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Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) OMB No 1545-0047 2013

Open to Public Inspection

► Do not enter Social Security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ► Information about Form 990 and its instructions is at www.irs.gov/form990. 2013, and ending For the 2013 calendar year, or tax year beginning Nov 2014 D Employer Identification Number MARYLAND HUMANITIES COUNCIL, C Name of organization INC. Check if applicable 52-1102799 Address change Doing Business As Number and street (or P O box if mail is not delivered to street address) Telephone number Name change Initial return 108 WEST CENTRE STREET (410) 685-0095 City or town, state or province, country, and ZIP or foreign postal code Terminated **G** Gross receipts \$1,832,240. BALTIMORE 21201-4565 Amended return H(a) Is this a group return for subordinates? XINO F Name and address of principal officer Application pending Are all subordinates included?
If 'No,' attach a list (see instructions) Nο PHOEBE STEIN 108 WEST CENTER STREET BALTIMORE MD 21201-4565 4947(a)(1) or 527 Tax-exempt status X 501(c)(3) 501(c) (H(c) Group exemption number Website: ► WWW.MDHC.ORG Other -L Year of formation 1977 M State of legal domicile Κ X Corporation Trust Association MD Form of organization Part I Briefly describe the organization's mission or most significant activities PURPOSE IS TO CREATE AND SUPPORT EDUCATIONAL EXPERIENCES IN THE HUMANITIES THAT INSPIRE ALL MARYLANDERS TO EMBRACE LIFELONG LEARNING, EXCHANGE IDEAS OPENLY, AND ENRICH Activities & Governance THEIR COMMUNITIES. TO DO THIS IT DEVELOPS AND MANAGES SUCH HUMANITIES BASED PROGRAMS AS MARYLAND HISTORY DAY, ONE MARYLAND ONE BOOK, CHAUTAUQUA, AND MUSEUM ON MAIN STREET, AND IT ALSO PROVIDES GRANTS TO NON-PROFIT ORGANIZATIONS. If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) . 4 Total number of individuals employed in calendar year 2013 (Part V, line 2a) . . . 5 16 6 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 7h Prior Year **Current Year** Contributions and grants (Part VIII, line 1h) 1,097,568 1,175,561. Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) 102. 10 106 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 917,577. 656,577. 11 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 015,251 1,832,240 12 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 92,880 84,006. Benefits paid to or for members (Part IX, column (A), line 4) 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 629,536. 627,075. 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . b Total fundraising expenses (Part IX, column-(D), line-25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,310,684 17 1,066,370. Total expenses Add lines 13-17 (must equal Part IX, column (A) line 25) 18 2,033,100. 1,777,451. Revenue less expenses. Subtract line 18/from line 12015. \circ -17,849 54,789. 19 **Beginning of Current Year End of Year** Total assets (Part X, line 16) . 838,225 902,053. 20 21 Total liabilities (Part X, line 26)-76,809. 85,848. 22 Net assets or fund balances Subtract line 21 from line 20 761,416 816,205. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Mrele Signature of officer Sign recitive Director Here Type or print name and title Print/Type preparer's name Preparer's signature X if self-employed P01225147 RANDALL SNYDER Paid Preparer RANDALL L. SNYDER Firm's name CPA Use Only Firm's FIN ► 12395 OLD FREDERICK ROAD 65-1172190 21104 Phone no 442-2002 MD (410)MARRIOTTSVILLE

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2013)

No

Yes

Form 990 ((2013) MARYLAND HUMANITIES COUNCIL, INC.	52-110279 <u>9</u>	Page 2
Partill	Statement of Program Service Accomplishments		
`	Check if Schedule O contains a response or note to any line in this Part III		x
1 Briefl	y describe the organization's mission:		
	POSE IS TO CREATE AND SUPPORT EDUCATIONAL EXPERIENCES		
	THE HUMANITIES THAT INSPIRE ALL MARYLANDERS TO EMBRACE LIFELONG LEARNING, EXCHA	ANGE IDEAS OPENLY.	AND ENRICH
		MOD I DUMO OF BREIT	THE BUILDING
<u>2ee i</u>	Form 990, Page 2, Part III, Line 1 (continued)		
- B 10	the work which were not letted on the	DELOF	
	ne organization undertake any significant program services during the year which were not listed on the		x No
	990 or 990-EZ?	· · · · · · · Yes	X NO
	s,' describe these new services on Schedule O.		s.
	ne organization cease conducting, or make significant changes in how it conducts, any program services	s? Ye	s X No
	s,' describe these changes on Schedule O.		
Secti	ribe the organization's program service accomplishments for each of its three largest program services, on 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amoun s, the total expenses, and revenue, if any, for each program service reported	as measured by expen it of grants and allocatio	ses. Ins to
4 a (Code	e) (Expenses \$ 546,738. including grants of \$ 83,369.)(Revenue \$	15,576.)
	NTS - PROVIDED GRANTS TO NON-PROFIT ORGANIZATIONS IN MARYLAND TO		
	GRAMS WITH SPECIAL EMPHASIS ON PROGRAMS THAT FEATURED CIVIC DI		
	THE MOST RECENT YEAR THE PROGRAM FUNDED 15 GRANTS.		
<u> </u>	THE MOST RECENT TEAR THE TROOKER TONDED TO GRANTO.		
			
			
4 b (Code	e·) (Expenses \$217, 286. including grants of \$0.)(Revenue \$	69,738.)
LIT	ERATURE - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO ENC	COURAGE	
REA	DING AND LITERACY, INCLUDING ONE MARYLAND ONE BOOK THAT SERVE	ED_6,132	
PAR	TICIPANTS. OTHER PROGRAMS INCLUDED LETTERS ABOUT LITERATURE,		
LIT	ERATURE AND MEDICINE, MEANING OF SERVICE, AND VARIOUS BOOK FE	ESTIVALS.	
		'D ^	60 100 :
4 c (Code			68,192.)
	TORY - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND TO INCREA		
	LOCAL AND NATIONAL HISTORICAL EVENTS AND IMPROVE RESEARCH AND		
<u>SK</u> I	LLS. PROGRAMS INCLUDED MARYLAND HISTORY DAY SERVING 21,465 ST	<u> TUDENTS, CHAUT</u>	AUQUA,
MUS	EUM ON MAIN STREET - HOMETOWN TEAMS.		
4 d Otho	r program services (Describe in Schedule O)	<u> </u>	
	enses \$ 237,476. including grants of \$ 0.)(Revenue \$	6,672	
		0,012	. ,
4 e Tota	I program service expenses ► 1,482,917.		

Page 2

1 . 1

Pai	rt IV Checklist of Required Schedules			
1			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	x	
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		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	15. mg	1 1	l no
í	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	х	
ı	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
•	Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		х
(d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
1	F Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12 8	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	Х	
I	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 :	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
ı	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or 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		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
	h If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 h		

Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or 21 Х Х 22 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 Х 23 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 Х 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c 24d Χ 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete X 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II Χ 26 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 Χ 27 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) Х 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Χ 28b 28c X Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Х 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 Χ Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections Χ 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, Х 34 Χ 35a 35b Χ Χ 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is Χ 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38

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	Check if Schedule O contains a response or note to any line in this Part V	· · ·	Yes	· No
4 ^	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	ĺ		
C	(gambling) winnings to prize winners?	1 c	X	
2 a	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 16			
ь	of at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
	olf 'Yes' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O</i>	3 b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
b	If 'Yes,' enter the name of the foreign country ▶			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
C	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a	X	·
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7ь	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	7.		х
_	1 · 1	7 c		<u> ^</u>
	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 e		<u> </u>
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
	If the organization, during the year, pay premiums, directly or manectly, on a personal benefit contract?			<u> </u>
_	as required?	7 g		Х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		_X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			
_	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		Х
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9 a		Х
	Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		Х
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	of Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	12-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13 a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	7,	7- +	٠,
	Enter the amount of reserves on hand			L.
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
t	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		l

Par	t VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in	, and	for						
	` Schedule O. See instructions.								
	Check if Schedule O contains a response or note to any line in this Part VI			. X					
<u>Sec</u>	tion A. Governing Body and Management	- 1	1						
_	Finter the number of voting members of the governing body at the end of the tax year 1a 27		Yes	No					
1 a	Enter the number of voting members of the governing body at the end of the tax year								
Ŀ	Enter the number of voting members included in line 1a, above, who are independent 1b	1							
	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		X					
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X					
4	Did the organization make any significant changes to its governing documents		37						
_	since the prior Form 990 was filed?	5	Х	X					
5	Did the organization become aware during the year of a significant diversion of the organization sassets?	6		$\frac{\lambda}{X}$					
6 7.	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more	-							
1 4	members of the governing body?								
	Are any governance decisions of the organization reserved to (or subject to approval by) members,								
•	stockholders, or other persons other than the governing body?	7 b		Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following								
	The governing body?	8 a	Χ						
k	Each committee with authority to act on behalf of the governing body?	8 b	X						
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		Х					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		NI.					
40.	Diddle and the base level charters broughed as offiliated?	10 a	Yes	No X					
	Did the organization have local chapters, branches, or affiliates?	iva							
Ľ	operations are consistent with the organization's exempt purposes?	10 b							
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х						
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	Χ						
	Twere officers, directors, or trustees, and key employees required to disclose annually-interests that could give rise to conflicts?	12 b	х	-					
•	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c	Х						
12	Did the organization have a written whistleblower policy?	13	X						
13 14	Did the organization have a written document retention and destruction policy?	14	X						
15	Did the process for determining compensation of the following persons include a review and approval by independent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
	The organization's CEO, Executive Director, or top management official	15 a	X						
t	Other officers of key employees of the organization	15 b	X						
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.)								
16 a	,	i							
	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	163							
	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a							
ł	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16 a							
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?								
	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 b							
Sec	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 b							
Sec. 17	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed Maryland Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	16 b							
Sec. 17	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Ition C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► Maryland Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available inspection. Indicate how you make these available. Check all that apply X. Own website X. Another's website X. Upon request Other (explain in Schedule O)	16 b							
Sec 17 18 19 20	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? It is the states with which a copy of this Form 990 is required to be filed ► Maryland Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available inspection. Indicate how you make these available. Check all that apply When website Wanother's website Wanother's website Wanother's website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available.	16 b							

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Form 990 (2013) MARYLAND HUMANITIES COUNCIL, INC

52-	1	1	02	7	9	9
J 2	_	_	~~	•	_	~

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

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

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

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

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

Check this box if neither the organization r	nor any rela	ated o	rgan	ızatı (C		ompe	nsat	ed any current officer,	director, or trustee.	
(A) Name and Title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee) Position (do not check more than one box, unless person is both an officer and a director/trustee) Reportable compensation from compens.								(F) Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) PHOEBE STEIN	40.00									
EXEC DIRECTOR				Χ				101,138.	0.	0.
(2) JAMES S KITTERMAN, JR	40.00									
FISCAL OFFICER					Х			64,922.	0.	0.
	40.00				X			76,188.	0.	0.
(4) LENNEAL HENDERSON, JR.	3.00									
CHAIR, BOARD OF DIRECTORS]	x		Х				0.	0.	0.
(5) ELIZABETH CANNON	1.00									
VICE CHAIRMAN, BOARD OF DIRECTORS] :	Х		Х				0.	0.	0.
(6) SILVIA GOLOMBEK	1.00									-
SECRETARY, BOARD OF DIRECTORS		Х		Х				0.	0.	0.
_(7) DAVIS SHERMAN	1.00									
TREASURER, BOARD OF DIRECTORS		Х		Х				0.	0.	0.
(8) DIEDRA BADEJO	1.00									
BOARD OF DIRECTORS		Х						0.	0.	0.
(9) BARBARA CLAPP	1.00									
BOARD OF DIRECTORS		Х						0.	0.	0.
(10)_ ELIZABETH CROMWELL	1.00									
BOARD OF DIRECTORS		X					<u> </u>	0.	0.	0.
(11) RHONDA DALLAS	1.00									
BOARD OF DIRECTORS	<u> </u>	Х						0.	0.	0.
(12) MONIQUE DIXON	1.00									
BOARD OF DIRECTORS		Х						0.	0.	0.
(13) ALBERT FELDSTEIN	1.00									
BOARD OF DIRECTORS		X						0.	0.	0.
(14) MICHAEL GLASER	1.00									
BOARD OF DIRECTORS		Х						0.	0.	0.

,	(B)			(0	C)							
(A) Name and title	Average hours per week	box	, unle:	ss pe nd a c	more	than o s both or/trust	an	(D) Reportable compensation from	(E) Reportable compensation from	amou	(F) stimated unt of oth	
	(list any hours for related organiza - tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	fr org an	pensation the anization direlated anization	ו
(15) LAUREN GLOVER BOARD OF DIRETORS	1.00	х						0.	0.			0.
(16) RONALD LESHER BOARD OF DIRECTORS	1.00	Х						0.	0.			0.
(17) O. F. MAKARAH BOARD OF DIRECTORS	1.00	Х						0.	0.	_		0.
(18) HILARY MILLER BOARD OF DIRECTORS	1.00	Х						0.	0.			0.
(19) ADRIANNE NOE BOARD OF DIRECTORS	1.00	Х						0.	0.			0.
(20) MAARTEN PEREBOOM BOARD OF DIRECTORS	1.00	Х						0.	0.		•	0.
(21) MATT POWER BOARD OF DIRECTORS	1.00	Х						0.	0.			0.
(22) CYNTHIA RAPOSO BOARD OF DIRECTORS	ECTORS X 0. 0.				0.		0.					
BOARD OF DIRECTORS	1.00	Х						0.	0.			0.
BOARD OF DIRECTORS	1.00	х						0.	0.			0.
(25) HEATHER SARKISSIAN BOARD OF DIRECTORS	1.00	Х						0.	0.			0.
1 b Sub-total			• •	• •	• •	• •		242,248.	0.			0.
c Total from continuation sheets to Part VII, Section				• •	• •	• •	-	0.	0.			0.
d Total (add lines 1b and 1c)							eive	242 , 248 . d more than \$100,0	0 . 000 of reportable con	npensa	tion	0.
3 Did the organization list any former officer, director, o											Yes	
on line 1a? If 'Yes,' complete Schedule J for such indi For any individual listed on line 1a, is the sum of repo	rtable co	mpe	nsat	ion a	and	othei	r coi	mpensation from		. 3		X
the organization and related organizations greater tha such individual			• •	• •	• •	• •				. 4		Х
for services rendered to the organization? If 'Yes,' con Section B. Independent Contractors	nplete S	ched	ule .	J for	suc	h pei	rson	·		. 5		Х
Complete this table for your five highest compensated compensation from the organization. Report compens	d indepersation for	nden the	t cor cale	ntrac ndai	tors r yea	that ar en	rec ding	with or within the	organization's tax ye			
(A) Name and business addres	s 			_				(B) Description o	f services	Compe	C) ensatio	n
					•							
Total number of independent contractors (including bits)	ut not lim	nited	to th	ose	liste	ed ab	ove) who received mo	re than			
\$100,000 of compensation from the organization	•								ļ" .	the second	·	,× -4

`	Check if Schedule O contains a response or note to any line	e in this Part VIII			
	·	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns 1 a b Membership dues 1 b c Fundraising events 1 c d Related organizations 1 d				
UTIONS, GIF Her Similar	e Government grants (contributions) 1 e 969,263. f All other contributions, gifts, grants, and				
CONTRIB AND OT	g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f	1,175,561.			
띨	Business Code				
PROGRAM SERVICE REVENUE	2 a b c d e e e e e e e e e e e e e e e e e e				
媛	f All other program service revenue				
<u>×</u>	g Total. Add lines 2a-2f ► 3 Investment income (including dividends, interest and	-			
ļ	other similar amounts)	102.	102.	0.	0.
	6 a Gross rents b Less: rental expenses c Rental income or (loss)				
	d Net rental income or (loss)				
	7 a Gross amount from sales of assets other than inventory				
	b Less cost or other basis and sales expenses				
	c Gain or (loss)				
OTHER REVENUE	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a				
뙲	b Less: direct expenses b				
)	c Net income or (loss) from fundraising events > 9 a Gross income from gaming activities				
	See Part IV, line 19 a b Less direct expenses b				
	c Net income or (loss) from gaming activities ▶			<u> </u>	
	10 a Gross sales of inventory, less returns and allowances				
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory ▶			 	
	Miscellaneous Revenue Business Code				
	11a b				
	d All other revenue	656,577.	656,577.	0.	0.
	e Total. Add lines 11a-11d	656,577.			ļ
	12 Total revenue. See instructions ▶	1,832,240.	656,679.	0 -	0.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (C) (A) Total expenses Do not include amounts reported on lines Management and Fundraising Program service 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 84,006 84,006 Grants and other assistance to individuals in the United States See Part IV, line 22 . . . Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16. . Benefits paid to or for members. Compensation of current officers, directors, trustees, and key employees 70,709 82,774 88,765. 242,248 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described ın section 4958(c)(3)(B)....... Other salaries and wages. 0. 290,932 273,859 17,073 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)......... 19,810 12,839 3,612 3,359. Other employee benefits 5,021. 29,568 5,377 19,170 10 <u>44,517</u> 28,857 8.101 7,559. Fees for services (non-employees). 80 67 6. c Accounting <u>3,746</u> 389 355. 4,490 e Professional fundraising services See Part IV, line 17. f Investment management fees Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) . . . Advertising and promotion 13 14 Information technology 15 2,808 16 32,442 27,066 2,568. 1,948. 2,875 840 87 17 18 Payments of travel or entertainment expenses for any federal, state, or local 19 Conferences, conventions, and meetings . . . 696 0 696 0. 21 30.390 25,354 630 2,406. Depreciation, depletion, and amortization . . . 22 4,214 437 400 5,051 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 189.672 0. Λ 189,672 a COUNCIL PROJECTS_ 995 12,568 **b** STAFF DEVELOPMENT 10,485 088 c AUDIT FEES 7.788 6.498 674 616. 656.577 656,577 d COST_SHARING___ 0. 28,082 123,741 68,959 26,700. e All other expenses 777,451 482,918 25 Total functional expenses Add lines 1 through 24e. . 153,835 140,698. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation If following Check here -

SOP 98-2 (ASC 958-720).

Form **990** (2013) MARYLAND HUMANITIES COUNCIL, INC. 52-1102799 Part X **Balance Sheet** (B) (A) Beginning of year End of year 1 2 2 411,870 474,950. 231,891 3 257,0<u>49.</u> 3 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 15,314 17,444. Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 10 a b Less: accumulated depreciation 10 b 176,650 10 c 150,110. 11 Investments – other securities See Part IV, line 11 12 12 Investments – program-related. See Part IV, line 11 13 13 14 14 15 Other assets See Part IV, line 11 15 2,500. 2,500 838,225 16 16 902,053 17 17 48,453 76,384 18 18 19 19 1,100. 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, 22 22 23 23 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. . . . 28,356 25 8,364. Total liabilities. Add lines 17 through 25........... 76,809 26 85,848. Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.

BALANCES BAA

FUZD

28

29 R

30

31

32

902,053. Form 990 (2013)

816,205.

557,975.

258,230.

27

28

29

30

31

32

33

34

473,205

288,211

761,416

838,225

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Fotr	n 990 (2013) MARYLAND HUMANITIES COUNCIL, INC. 52-	<u> 1102</u>	799		Pa	ge 12
Pa	rt XI Reconciliation of Net Assets					
•	Check if Schedule O contains a response or note to any line in this Part XI			<u> </u>	<u> </u>	.]
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	1,83	32,2	40.
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,7	77,4	51.
3	Revenue less expenses. Subtract line 2 from line 1	3		Ç	54,7	89.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		76	51,4	16.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6	-			
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9			_	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10		81	L6,2	<u>05.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					. X
					Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain		1	- 1	ļ	
	in Schedule O					
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		· · L	2 a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both.					
	Separate basis Consolidated basis Both consolidated and separate basis			1		
	b Were the organization's financial statements audited by an independent accountant?			2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate			\neg †		
	basis, consolidated basis, or both		-	ł		
	X Separate basis Consolidated basis Both consolidated and separate basis					
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud review, or compilation of its financial statements and selection of an independent accountant?	it,	L	2 c	х	_
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O					
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		L	3 a	х	
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a	udıt			1	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		<u></u>	3 b	Х	
BAA	4		F	orm	990 (2	2013)

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.

OMB No 1545-0047

Employer identification number

Open to Public Inspection"

(AAL			COUNCIL, INC							L02799			
Part		Reason for Pub	lic Charity Status	(All organizations	must co	omplet	e this p	art.) S	ee inst	ruction	s.		
he o	gan	ization is not a private	foundation because it	is (For lines 1 through	11, checl	k only or	ne box)						
1	П	A church, convention	of churches or associa	tion of churches describ	ed in sec	ction 17	0(b)(1)(A	۸)(i).					
2	П	A school described in	section 170(b)(1)(A)(i	ii). (Attach Schedule E)									
3	П	A hospital or a cooper	ative hospital service o	organization described in	section	170(b)	(1)(A)(iii).					
4	М	A medical research or	ganization operated in	conjunction with a hosp	ıtal desc	ribed in	section	170(b)(1)(A)(iii).	Enter th	ne hospital's		
	Ш	name, city, and state	·						,,,,,				
5	П	• .	ited for the benefit of a	college or university ow	ned or o	perated	by a gov	ernmen	tal unit d	escribed	in section		
6	П	A federal, state, or loc	al government or gove	rnmental unit described	ın sectio	on 170(l)(1)(A)(v	v).					
7	X	An organization that n in section 170(b)(1)(A	ormally receives a sub A)(vi). (Complete Part	lly receives a substantial part of its support from a governmental unit or from the general public described . (Complete Part II)									
8		A community trust des	scribed in section 170	ed in section 170(b)(1)(A)(vi). (Complete Part II)									
9	_	from activities related investment income an June 30, 1975. See se	normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts it to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross nd unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after section 509(a)(2). (Complete Part III.)										
10	Ш	An organization organ	ized and operated exc	lusively to test for public	safety. S	See sec	tion 509	(a)(4).					
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3) . Check the box that describes the type of supporting organization and complete lines 11e through 11h												
		a ∏Type I b	Type II c	Type III - Function	ally integ	rated	(ı 🗌 :	Type III -	- Non-fu	nctionally in	tegrate	ed
е	Distriction that have been been been been a particular dispersion of the property of the prope												
f													
g		Since August 17, 2006	6, has the organization	accepted any gift or co	ntributio	n from a	ny of the	followin	ig persoi	ns?			
_		•	_	, , , ,			-		•			Yes	No
		(i) A person who di below, the gove	rectly or indirectly controlly roing body of the supp	trols, either alone or toge orted organization?	ether with	n persor	ıs descril	oed in (i	ı) and (ııı) 	. 11 g (i)		
		(ii) A family member	er of a person describe	d ın (ı) above?							. 11 g (ii)		
		(iii) A 35% controlle	d entity of a person de	scribed in (i) or (ii) above	⊋?						11 g (iii)		
h				upported organization(s				_			119 (117)		
		(i) Name of supported organization	(ii) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(Iv) is organiza column (I) your good	ation in) listed in verning	(v) Did yo the organi column (i) supp	zation in of your	(vi) la organiza colum organiza U S	ation in in (i) d in the	(vii) Amount supp		tary
					Yes	No	Yes	No	Yes	No			
A)													
B)									1				
		-		1			ĺ						
C)													
					1		Ì		1				
D)								ļ					
-,	-				 	 	 	ļ	-				
E1					1								
E)					 -	 	ł		 				
otal													
AA	For	Paperwork Reduction	n Act Notice, see the	Instructions for Form	990 or 9	90-EZ.		5	Schedule	A (Form	1 990 or 990	-EZ) 2	013

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

A	J			
(Complete only if you checked	d the box on line 5, 7, o	r 8 of Part I or if the organ	nization failed to qualify unde	r Part III. If the
(Oomprote stary a year streets			and to quality and	
organization fails to qualify un	ider the tests listed belo	w, please complete Part	III.)	

Sec	tion A. Public Support		,		T		
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	1,782,561.	1,739,532.	2,211,056.	2,015,251.	1,832,240.	9,580,640.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	1,782,561.	1,739,532.	2,211,056.	2,015,251.	1,832,240.	9,580,640.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)				,		
6	Public support. Subtract line 5 from line 4						9,580,640.
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	1,782,561.	1,739,532.	2,211,056.	2,015,251.	1,832,240.	9,580,640.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	499.	264.	170.	106.	102.	1,141.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		-				
11	Total support. Add lines 7 through 10				! !		9,581,781.
12	Gross receipts from related activiti	es, etc (see instruc	ctions)		<i></i>	12	
13	First five years. If the Form 990 is organization, check this box and s						▶ □
	tion C. Computation of Pu						
	Public support percentage for 201						99.99%
15	Public support percentage from 20)12 Schedule A, Pa	art II, line 14			15	99.98%
16 a	33-1/3% support test — 2013. If and stop here. The organization of						
t	33-1/3% support test — 2012. If t and stop here. The organization of						
17 a	10%-facts-and-circumstances to or more, and if the organization m the organization meets the 'facts-a	eets the 'facts-and-	-circumstances' tes	st, check this box a	ind stop here. Exc	lain in Part IV how	_
	10%-facts-and-circumstances to or more, and if the organization morganization meets the 'facts-and-	eets the 'facts-and- circumstances' tes	-circumstances' tes t The organization	st, check this box a i qualifies as a pub	ind stop here. Exp licly supported org	olain in Part IV how anization	the ▶ □
18	Private foundation. If the organiz	ation did not check	a box on line 13,	16a, 16b, 17a, or 1	17b, check this box	and see instruction	ons ►

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

(Complete only if you o	checked the box on line 9 of F	Part I or if the organization	failed to qualify under Part I	I If the organization fails
to qualify under the tes	its listed below, please compl	lete Part II.)		

Sec	tion A. Public Support						
Caler 1	ndar year (or fiscal yr beginning in) Gifts, grants, contributions and membership fees received. (Do not include	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	any 'unusual grants.')						
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						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
ŭ	facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 .						
7 a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
Ė	and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)	,	e g Notar	i Jesta H		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	tion B. Total Support					<u> </u>	
	dar year (or fiscal yr beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
10 a	Amounts from line 6					-	
c	: Add lines 10a and 10b · · · · ·						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
	Total Support. (Add Ins 9,10c 11 and 12)						
	First five years. If the Form 990 is organization, check this box and s			hırd, fourth, or fifth	tax year as a secti	on 501(c)(3)	
<u>Sec</u>	tion C. Computation of Pul						
15		• • •	•				ૄ
16	Public support percentage from 20	12 Schedule A, Pa	art III, line 15		<u> </u>	16	ૄ
Sec	tion D. Computation of Inv						
17	Investment income percentage for	2013 (line 10c, co	lumn (f) dıvıded by	line 13, column (f	7))	17	o _l o
18	Investment income percentage from					1 . J.	96
	33-1/3% support tests — 2013. If is not more than 33-1/3%, check the	nis box and stop h	ere. The organizat	ion qualifies as a j	publicly supported o	organization	•
	33-1/3% support tests — 2012. If line 18 is not more than 33-1/3%, o	check this box and	stop here. The or	ganizatıon qualıfie	s as a publicly supp	oorted organization	` ▶ │ │
	Private foundation. If the organization	ation did not check			this box and see in	nstructions	
BAA			TEEA0403	06/28/13	90	hedule A (Form 99	0 or 990 EZ) 2012

Schedule A	(Form 990 or 990-EZ) 2013	MARYLAND	HUMANITIES	COUNCIL,	INC.	52-1102799	Page 4
Part IV	Supplemental Inform or 17b; and Part III, lin (See instructions).	ation. Provide e 12. Also com	the explanation olete this part f	ons required b for any addition	y Part II, line 10; onal information.	Part II, line 17a	
							
	-					 	
		- 					
_ 		- 			-		
							-
							
							-
							
							
	- <u></u>						
							. – – – –
		-					· -
							- -

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

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

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

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

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

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

• 5	Section 501(c)(4), (5), or (6) org	ganizations ⁻ Complete Part III.			
Name	of organization	<u> </u>		Employer identific	ation number
MAR	RYLAND HUMANITIES C	COUNCIL, INC.		52-110279	9
Par	t I-A Complete if the o	rganization is exempt under secti	on 501(c) or is a	section 527 organi	ization.
1	Provide a description of the or	rganization's direct and indirect political camp	aign activities in Part I	V	· · · · · · ·
2					
3	Volunteer hours	<u> </u>	· · · · · · · · · · · · · · · · · · ·		
Par	t I-B Complete if the o	rganization is exempt under secti	on 501(c)(3).		
1	Enter the amount of any excis	se tax incurred by the organization under sect	ion 4955	▶ \$	S
2	Enter the amount of any excis	se tax incurred by organization managers und	er section 4955	▶ \$	S
3		section 4955 tax, did it file Form 4720 for this	-		
4 a	Was a correction made?				· · · Yes No
	If 'Yes,' describe in Part IV.				
Par		rganization is exempt under secti			
1	Enter the amount directly expe	ended by the filing organization for section 52	7 exempt function acti	vities ▶ \$	
2	Enter the amount of the filing function activities	organization's funds contributed to other orga	nizations for section 5	27 exempt ▶ \$	3
3	Total exempt function expend line 17b	itures. Add lines 1 and 2. Enter here and on F	orm 1120-POL,		
4	Did the filing organization file	Form 1120-POL for this year?			· · · Yes No
5	organization made payments. amount of political contribution	and employer identification number (EIN) of al For each organization listed, enter the amoui ns received that were promptly and directly de action committee (PAC). If additional space is	nt paid from the filing of elivered to a separate i	organization's funds. Also political organization, suc	enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)			_		
(6)					

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

Schedule C (Form 990 or 990-EZ) 2013

Part II-A Complete if section 501(on is exempt under se	ction 501(c)(3) and	d filed Form 5768 (ele	ection under
		ngs to an affiliated group (and	d list in Part IV each affil	ated group member's name	
		d share of excess lobbying ex		,	
B Check ► I If the filin	g organization che	cked box A and 'limited contro	l' provisions apply.		
(The term		ying Expenditures eans amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditure	res to influence pub	olic opinion (grass roots lobby	ing)	0.	
b Total lobbying expenditure	res to influence a le	gislative body (direct lobbying	9)	0.	
· · ·	•	nd 1b)		0.	
	•			0.	
e Total exempt purpose ex	penditures (add lin	es 1c and 1d)		0.	
		ount from the following table ii		0.	
If the amount on line 1e, colo	ımn (a) or (b) is	The lobbying nontaxable	amount is.		
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$	517,000,000	\$225,000 plus 5% of the excess	over \$1,500,000		
Over \$17,000,000		\$1,000,000			
_		of line 1f)		0.	
•		enter -0		0.	
j If there is an amount other	er than zero on eith	enter -0- · · · · · · · · · · · · · · · · · ·	ganızatıon file Form 472		Yes No
	<u> </u>	4-Year Averaging Period Unat made a section 501(h) el	Inder Section 501(h)		
(Som		nns below. See the instructi			
	Lok	bying Expenditures During	4-Year Averaging Peri	iod	
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e)) · · · ·					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					·
f Grassroots lobbying expenditures					
BAA				Schedule C (Form 9	990 or 990-EZ) 2013

		1)	(b)
r each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description the lobbying activity	Yes	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)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?	-		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-	11
j Total. Add lines 1c through 1i	X		11,
·			11,
2 a 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?			
art III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or	
section 501(c)(6).			· · · · · · · · · · · · · · · · · · ·
			Yes
			f
			-
			-
Did the organization make only in-house lobbying expenditures of \$2,000 or less?	(c)(5)	 	2 3 section 501(c
Did the organization make only in-house lobbying expenditures of \$2,000 or less?	(c)(5)	 	2 3 section 501(c
Did the organization make only in-house lobbying expenditures of \$2,000 or less?	(c)(5) Part II	 	2 3 section 501(c
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? The state of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) I answered 'Yes.' Dues, assessments and similar amounts from members	(c)(5) Part II	, or s	2 3 section 501(c
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Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Art III-B Complete if the organization is exempt under section 501(c)(4), section 501 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) I 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 b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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? Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Art IV Supplemental Information Supplemental Information The Line 1 MET WITH STATE AND FEDERAL OFFICIALS AND LEGISLATOR	(c)(5) Part II	, or s II-A, I 1 2 a 2 b 2 c 3 4 5	section 501(c) line 3, is
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Schedule C	(Form 990 or 990-EZ) 2013MARYLAND HUMANITIES COUNCIL, INC.	52-1102799	Page 4
Part IV	Supplemental Information (continued)		
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SCHEDULE D (Form 990) .

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 2013

m990. Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

MAF	ARYLAND HUMANITIES COUNCIL, INC.		52-110	2799	
Par	ரி Organizations Maintaining Donor Advised Funds or C	Other Similar Fu	nds or Accounts.		
	Complete if the organization answered 'Yes' to Form 990	, Part IV, line 6.			
	(a) Donor advise	ed funds	(b) Funds and o	ther acco	unts
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 a are the organization's property, subject to the organization's exclusive legal c			Yes	No
6	Did the organization inform all grantees, donors, and donor advisors in writing for charitable purposes and not for the benefit of the donor or donor advisor, impermissible private benefit?	or for any other purpo	ose conferring	ີYes	□No
Da	Conservation Easements.				<u> </u>
<u>rai</u>	Complete if the organization answered 'Yes' to Form 990	, Part IV, line 7.			
1					
	Preservation of land for public use (e.g., recreation or education)		of an historically important	land area	а
	Protection of natural habitat	\square	of a certified historic struct		
	Preservation of open space				
2		contribution in the fo	orm of a conservation eas	ement or	the
	last day of the tax year				
			Held at the	End of th	e Tax Year
-	a Total number of conservation easements			-	
	b Total acreage restricted by conservation easements				
(c Number of conservation easements on a certified historic structure included in	n (a)	. 2 c		
C	d Number of conservation easements included in (c) acquired after 8/17/06, and structure listed in the National Register		. 2 d		
3	Number of conservation easements modified, transferred, released, extinguis tax year ►	shed, or terminated by	y the organization during	the	
4	Number of states where property subject to conservation easement is located	→	_		
-5				_ 7	
	and enforcement of the conservation easements it holds?			Yes	∐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing co	nservation easement	ts during the year		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing consenses	vation easements du	ring the year		
8	Does each conservation easement reported on line 2(d) above satisfy the req and section 170(h)(4)(B)(ii)?	quirements of section	170(h)(4)(B)(ı)	Yes	No
9	In Part XIII, describe how the organization reports conservation easements in include, if applicable, the text of the footnote to the organization's financial statements				
Par	Organizations Maintaining Collections of Art, Historic Complete if the organization answered 'Yes' to Form 990,	al Treasures, or , Part IV, line 8.	r Other Similar Ass	ets.	_
1 a	a If the organization elected, as permitted under SFAS 116 (ASC 958), not to reart, historical treasures, or other similar assets held for public exhibition, educin Part XIII, the text of the footnote to its financial statements that describes the	ation, or research in			
t	b If the organization elected, as permitted under SFAS 116 (ASC 958), to report historical treasures, or other similar assets held for public exhibition, education following amounts relating to these items:	n, or research in furti	nerance of public service,		
	(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 amounts required to be reported under SFAS 116 (ASC 958) relating to these	sımılar assets for fina e items:	incial gain, provide the fo	llowing	
a	a Revenues included in Form 990, Part VIII, line 1				
	h Assets included in Form 990. Part X		_ ¢_		

Schedule D (Form 990) 2013 MARYLAI	TINAMUH DN	IES COUNCIL	, INC.		52-1102799		Page
Pant III Organizations Maintaini	ng Collection	ns of Art, Hist	orical Treasures,	or Other	Similar Assets	(continue	ed)
3 Using the organization's acquisition, a items (check all that apply)	ccession, and otl	her records, check	any of the following th	at are a signi	ficant use of its colle	ection	
a Public exhibition		d Loan	or exchange programs	3			
b Scholarly research		e Other					
c Preservation for future generation	ıs	_					
Provide a description of the organizati Part XIII	on's collections a	and explain how th	ey further the organiza	tion's exempt	purpose in		
5 During the year, did the organization s to be sold to raise funds rather than to	be maintained a	s part of the orgar	ization's collection?.		Y(_	No
Escrow and Custodial A	crrangements ount on Form	s. Complete if t 990, Part X, lin	he organization ar e 21.	nswered 'Y	es' to Form 990	, Part IV,	1
1 a Is the organization an agent, trustee,	custodian, or othe	er intermediary for	contributions or other	assets not inc	duded		٦
on Form 990, Part X? b If 'Yes,' explain the arrangement in Pa					· · · · · · · □ ¥٬	es	No
bili res, explain the arrangement in Pa	in Am and compl	ete the following ta	ible				
c Beginning balance				10	Amou	unt	
d Additions during the year							
e Distributions during the year							
					-		
f Ending balance							TN.
5	•	•			L	es	No
b If 'Yes,' explain the arrangement in Pa	in XIII. Check hei	re ir the explantion	nas been provided in	Paπ XIII			J
Part V Endowment Funds. Con	oplete if the or	rganization ans	wered 'Yes' to Fo	rm 990 Pa	art IV line 10		
	(a) Current year	(b) Prior yea		ı		e) Four years	back
1 a Beginning of year balance	(4) 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(4) 1 1 1 1	(4)) = = =	(4)	, co	7.00.700.0	
b Contributions							
c Net investment earnings, gains,							
and losses							
d Grants or scholarships							
e Other expenditures for facilities and programs							
f Administrative expenses							
g End of year balance							
2 Provide the estimated percentage of t	he current year e	nd balance (line 1	g, column (a)) held as				
a Board designated or quasi-endowmer	nt ►	9					
b Permanent endowment ►						-	
c Temporarily restricted endowment		્ર					
The percentages in lines 2a, 2b, and 2	2c should equal 1	00%					
3 a Are there endowment funds not in the organization by:			t are held and administ	tered for the		Yes	No
(i) unrelated organizations					3a(i	 	NO
(ii) related organizations						' 	
b If 'Yes' to 3a(II), are the related organi						' 	
					<u> </u>		
		ion a chaowinellt i	unuə.				
Part VI Land, Buildings, and Eq Complete if the organizati		'Yes' to Form 9	990, Part IV, line 1	1a. See Fo	orm 990, Part X,	, line 10.	
Description of property		st or other basis investment)	(b) Cost or other basis (other)		cumulated (c	d) Book val	ue
1 a Land							
b Buildings							
c Leasehold improvements		372,091.			235,657.	136.	434

. ► 150,110. Schedule **D** (Form 990) 2013

(a) Description of security or category (including name of security)	(b) Book value	Part IV, line 11b. See Form 990 (c) Method of valuation Cost or en	
(1) Financial derivatives	——————————————————————————————————————	(C) Welfied of Valuation Cost of en	id-oi-year market value
(2) Closely-held equity interests			
i_i 「			
	 		
<u>A)</u>			
B)			
C)			
(D) (E)		-	
			·
(F) (G)			<u>-</u>
(H)			
(1)			
Total (Column (b) must equal Form 990, Part X, column (B) line 12) . ▶			
Part VIII Investments — Program Related.			
Complete if the organization answered '	res' to Form 990, F	Part IV, line 11c. See Form 990	, Part X, line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or er	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			<u> </u>
(10)			•
Total (Column (b) must equal Form 990, Part X, column (B) line 13)		<u></u>	
Part IX Other Assets. Complete if the organization answered 'Y	/os' to Earm 000 [Part IV line 11d See Form 000	Dort V line 15
	scription	Fait IV, line 11d. See I offin 990	(b) Book value
(1)			(5) 5000 7420
(2)			
(3)		= .	
(4)			-
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B), II	ne 15)		
Part X Other Liabilities. Complete if the organization answered 'Yes' to Fo	nrm 99∩ Part IV line 1	10 or 11f See Form 900 Part Y line 1	25
(a) Description of liability	(b) Book value		23
(1) Federal income taxes	(2) 20011 12:00	 	
(2) LOANS PAYABLE	8,36	64.	
(3)			
(4)			,
(4)			,
			1
(5)			gen eg <mark>t</mark> sk
(5) (6)			
(5) (6) (7)			
(5) (6) (7) (8)			
(5) (6) (7) (8) (9)			

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Schedule **D** (Form 990) 2013

Schedule D (Form 990) 2013 MARILAND HUMANITIES COUNCIL, INC.	52-1102/99 Fage 5
Part XIII Supplemental Information (continued)	
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TEEA3305 07/01/13

Schedule **D** (Form 990) 2013

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SCHEDULE ! (Form 990)

Department of the Treasury Internal Revenue Service

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ► Attach to Form 990. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

2013

OMB No 1545-6047

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

Open to Public Inspection

Name of the organization

Employer Identification number 52-1102799 ≗ □

× |∝]

MARYLAND HUMANITIES COUNCIL, INC.

Part | General Information on Grants and Assistance

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(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,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) BALTIMORE MUSEUM OF INDUS1415-KEY-HIGHWAY BALTIMORE MD 21230	52-1205675	501(C)(3)	10.000.	0	OTHER	0	HUMANITIES PRO
ETWOR 	74-2662919	501(C)(3)	10.000	0	OTHER	C	
CON MARYL 2	52-226553	501 (C) (3)	9,426.	0	OTHER	0	
 	52-6037288	501(C) (3)	.000,6	0	OTHER	_0	1
DATION_ EET_SE_ 03	52-1431622	501 (C) (3)	8,000.	.0	OTHER	0	HUMANITIES PRO
HOPK PLAC	52-0595110	501 (C) (3)	5,500.	0	OTHER	0	HUMANITIES PRO
(7)							
(8)		-					
 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table 	and government organs listed in the line 1 t	anizations listed in the	e line 1 table			A A	6

Schedule I (Form 990) (2013)

TEEA3901 07/12/13

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

Page 2

52-1102799

MARYLAND HUMANITIES COUNCIL, INC

Schedule I (Form 990) (2013)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Information about Schedule O (Form 990 or 990-EZ) and its instructions is

at www.irs.gov/form990.

OMB No 1545-0047 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer Identification number Name of the organization MARYLAND HUMANITIES COUNCIL, INC -1102799 Pt_VI,_Line_7a_ THE COUNCIL'S BOARD PROVIDES THAT UP TO 6 MEMBERS OR 25% OF THE TOTAL BOARD MAY BE GUBERNATORIAL APPOINTEES. GUBERNATORIAL APPOINTMENTS ARE MADE AT THE DISCRETION OF THE GOVERNOR OF MARYLAND, UPON RECOMMENDATION OF THE COUNCIL. ELECTION OF MEMBERS IS BY MAJORITY VOTE OF THE COUNCIL AT ITS ANNUAL MEETING. IN THIS INSTANCE, THE GOVERNOR IS CONSIDERED TO BE 'OTHER PERSONS" AS DESCRIBED IN THIS QUESTION. Pt_VI, Line 8a _ _ THE ORGANIZATION MAINTAINS MINUTES OF THE MEETINGS THE ORGANIZATION MAINTAINS MINUTES OF THE MEETINGS Pt VI, Line 11b THE FORM 990 IS FIRST PREPARED BY THE AUDITOR, REVIEWED BY THE COUNCIL'S FISCAL OFFICER, AND THEN REVIEWED BY THE EXECUTIVE DIRECTOR. ONCE COMPLETED, THE AUDIT AND FORM 990 ARE REVIEWED BY THE EXECUTIVE COMMITTEE OF THE BOARD, AND THEN REVIEWED AND APPROVED BY THE FULL BOARD BEFORE FILING. ALL BOARD AND STAFF MEMBERS ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE VI, Line 12c STATEMENT AT LEAST ANNUALLY OR WHEN A MATERIAL CHANGE OCCURS. MEMBERS OF THE BOARD AND ITS COMMITTEES ARE REQUIRED TO DISCLOSE CONFLICTS PRIOR TO DECISION-MAKING BY THE ENTITY. IF THE BOARD OR COMMITTEE DISCOVERS A FAILURE TO DISCLOSE AND TO EXCUSE ONESELF, THE BOARD OR COMMITTEE SHALL INVESTIGATE AND TAKE APPROPRIATE ACTION. FORM 990 IS ON OWN WEBSITE, ANOTHER'S WEBSITE, AND UPON REQUEST. THE EXECUTIVE COMMITTEE REVIEWS THE PERFORMANCE OF THE EXECUTIVE DIRECTOR Pt VI, Line 15a AND DETERMINES SALARY BASED ON JOB PERFORMANCE, TAKING INTO ACCOUNT COMPENSATION LEVELS OF OTHER EXECUTIVE DIRECTORS OF NEH-FUNDED HUMANITIES COUNCILS THROUGHOUT THE COUNTRY FROM AN ANNUAL MEMBER SALARY SURVEY. COMPENSATION FOR OTHER STAFF MEMBERS IS APPROVED BY THE EXECUTIVE COMMITTEE AND THE BOARD AS PART OF THE ANNUAL BUDGET. THE EXECUTIVE DIRECTOR DETERMIES THE SALARY FOR MANAGEMENT AND OTHER PERSONNEL BASED ON THE APPROVED BUDGET FOR THE YEAR AND INDIVIDUAL PERFORMANCE.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

THEIR COMMUNITIES. TO DO THIS IT DEVELOPS AND MANAGES SUCH HUMANITIES BASED PROGRAMS AS MARYLAND HISTORY DAY, ONE MARYLAND ONE BOOK, CHAUTAUQUA, AND MUSEUM ON MAIN STREET, AND IT ALSO PROVIDES GRANTS TO NON-PROFIT ORGANIZATIONS.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4d (continued)

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

Code	Description:	INTER-DISCIPLINARY - PROVIDED PUBLIC PROGRAMS THROUGHOUT MARYLAND
Expenses	237,476.	IN VARIOUS OTHER HUMANITIES DISCIPLINES, INCLUDING PRACTICING
Grants Of	0.	DEMOCRACY THAT INVOLVED 861 PARTICIPANTS IN CIVIC ENGAGEMENT
Revenue.	6,672.	AND DIALOGUE, SPEAKERS BUREAU, AND COMMUNICATIONS.

Form 990

Continuation Sheet for Form 990

OMB No 1545-0047

2013

Department of the Treasury Internal Revenue Service Name of the Organization

Employler Identification number

MARYLAND HUMANITIES COUNCIL, INC.

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and

52-1102799

(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director		Officer	Key employee	Highest compensated employee		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
26 STEPHEN SFEKAS BOARD OF DIRECTORS	1.00	Х						0.	0.	(
27 KEITH STONE BOARD OF DIRECTORS	1.00	Х						0.	0.	(
28 LINDSAY THOMPSON BOARD OF DIRECTORS	1.00	Х						0.	0.	(
29 YOLANDA VAZQUEZ BOARD OF DIRECTORS	1.00	Х						0.	0.	_(
30 DAVID WISE BOARD OF DIRECTORS	1.00	Х						0.	0.	(
· 										
						-			-	
	·						_			
										
		_								
		_	_				$\left \cdot \right $			

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172

2013

Department, of the Treasury Internal Revenue Service Attachment Sequence No 179 ► See separate instructions. ► Attach to your tax return. (99)ldentifying number Name(s) shown on return MARYLAND HUMANITIES COUNCIL, INC. 52-1102799 Business or activity to which this form relates Form 990 / Form 990EZ Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. 1 1 2 Total cost of section 179 property placed in service (see instructions).......... 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation. Subtract line 3 from line 2 If zero or less, enter -0- 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions. . 5 (a) Description of property 6 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs). 11 11 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11... 12 Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12. 13 Note: Do not use Part II or Part III below for listed property Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the 14 15 16 Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 29,620 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B — Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (g) Depreciation (b) Month and (C) Basis for depreciation (d) (e) (a) year placed (business/investment use only — see instructions) Classification of property Convention 19 a 3-year property 200 DB 770 3,849. 5.0 yrs ΗY **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property 25 yrs S/L g 25-year property 27.5 yrs MM S/L h Residential rental 27.5 yrs MM S/L property MM i Nonresidential real 39 yrs S/L MM S/L Section C - Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System

20 a Class life

c 40-year.

| Part IV | Summary (See instructions.)

21 Listed property. Enter amount from line 28

MM

12 yrs

40 yrs

S/L

S/L

S/L

21

30,390.

Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on

the appropriate lines of your return Partnerships and S corporations — see instructions

No

(i) Elected

section 179

cost

(f) Vehicle 6

Yes

No

Yes

Form 4562 (2013) MARYLAND HUMANITIES COUNCIL, INC. Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 24 a Do you have evidence to support the business/investment use claimed? 24b If 'Yes,' is the evidence written? Yes No (d) (e) (f) (h) (a) (c) Cost or Basis for depreciation Recovery Method/ Depreciation Type of property Business/ Date placed in service investment other basis (business/investment Convention deduction period (list vehicles first) percentage use only) Special depreciation allowance for qualified listed property placed in service during the tax year and 25 used more than 50% in a qualified business use (see instructions) . Property used more than 50% in a qualified business use: 26 Property used 50% or less in a qualified business use 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 . . . 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (e) Vehicle 5 (a) (b) Total business/investment miles driven 30 Vehicle 1 Vehicle 2 Vehicle 3 Vehicle 4 during the year (do not include commuting miles). 31 Total commuting miles driven during the year Total other personal (noncommuting) Total miles driven during the year. Add 33 lines 30 through 32 Yes No Yes No Yes No Yes No Yes No Was the vehicle available for personal use during off-duty hours? Was the vehicle used primarily by a more 35 than 5% owner or related person? Is another vehicle available for 36 personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions)

		1. 1.4					Yes	No		
37	7 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?									
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners									
39 Do you treat all use of vehicles by employees as personal use?										
40	Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?									
Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)										
Pa	rt VI Amortization									
	(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or		(f) nortization r this year			

	Description of costs	Date amortization begins	Amortizable amount	Code section	Amortizat period o percenta	r	Amortization for this year
42	Amortization of costs that begins during your 2	013 tax year (see ins	structions)				
43	Amortization of costs that began before your 2	013 tax year				43	<u> </u>
44	Total. Add amounts in column (f) See the inst	tructions for where to	report		4	14	