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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2016

Open to Public

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

Department of the Treasury ► Information about Form 990 and its instructions is at www.irs.gov/form990

A	For the 2	016 calendar year, or tax year beginning		6, and ending		<u>'</u>	, 20						
				<u> </u>		D Employ	yer identification n	umber					
B⊓	Check if a		iu, nic.			52-1249							
H	Address c		livered to etroot address)	Room/sur	10								
님	Name cha	· · · · · · · · · · · · · · · · · · ·	ivered to street address)	100m/sui									
\vdash	Initial retur					410-727	-4828						
Ш	Final return/		or foreign postal code										
	Amended	eturn Baltimore, MD 21201				G Gross r		6,518,656					
	Application	pending F Name and address of principal officer			H(a) Is this a gr	oup return for	subordinates? 🔲 Yes	i X No					
					H(b) Are all s	subordinate	es included? 🔲 Yes	i 🗌 No					
1	Tax-exem	t status 🔀 501(c)(3) ☐ 501(c)() ◀	(insert no) 4947(a)(1) o	or 🗌 527	If "N	o," attach	a list (see instruction	ons)					
J	Website:	·			H(c) Group	exemption	number >						
K	Form of org	anization X Corporation Trust Association Oth	ner ► L	Year of formati	on 1987	M State	e of legal domicile	MD					
P	art I	Summary											
	1 E	riefly describe the organization's mission or mo	st significant activitie	es The Fo	undation was	created t	to carry out the						
ø	· ·	naritable, educational and religious purposes of The	-					ated)					
auc		he Foundation makes grants to public charitable org											
2	_	heck this box ▶☐ if the organization discontin											
Š		lumber of voting members of the governing boo	•	a.opcoca c	Thoro man	3		7					
<u>ග</u> නේ		lumber of independent voting members of the	• •	\/ line 1h\		4							
8		otal number of individuals employed in calenda				5							
Activities & Governance		· · · · · · · · · · · · · · · · · · ·	•	iiile Zaj .		6		0					
Ę	1	otal number of volunteers (estimate if necessar	- ·				 	6					
•		otal unrelated business revenue from Part VIII,	• • •			7a	 						
_	b 1	let unrelated business taxable income from For	m 990-1, line 34 .		Prior Ye	7b	C						
			Prior re		Current Y								
e	I.	Contributions and grants (Part VIII, line 1h)	• •	· ·		157,000		178,000					
Revenue		rogram service revenue (Part VIII, line 2g)		· ·			<u> </u>	0					
ş		vestment income (Part VIII, column (A), lines 3,	•	<u> </u>		998,137	<u> </u>	346,295					
_	1	other revenue (Part VIII, column (A), lines 5, 6d,						0					
<u></u>		otal revenue—add lines 8 through 11 (must equa		, line 12)	1	,155, <u>1</u> 37		524,295					
~ ₍₎	13 (irants and similar amounts paid (Part IX, colum	1	,050 <u>,405</u>		925,645							
Expenses (14 E	enefits paid to or for members (Part IX, column				0							
SS €	15 5	alaries, other compensation, employee benefits (I				0							
á sua	16a F	rofessional fundraising fees (Part IX, column (A), line 11e) .					0					
j g	b ⊺	otal fundraising expenses (Part IX, column (D),	line 25) ▶		<u> </u>	130	2 1 1 1						
 	1	other expenses (Part IX, column (A), lines 11a-1		<u> </u>		3,072		144,663					
=	18 7	otal expenses. Add lines 13–17 (must equal Pa	rt IX, Bollon G (A), Vite	. 25)	1	,053, <u>4</u> 77		1,070,308					
D		levenue less expenses Subtract line 18 from lin				101,660		(546,013)					
∌ ნ	3		S JUL 28 201		Beginning of Cu	rrent Year	End of Ye	ar					
ets C	20 7	otal assets (Part X, line 16)		'' S	17	,113,689	1	7,476,787					
Ass	21 7	(11 -1:11	CODEN			0		0					
Net Assets or	22 1	otal liabilities (Part X, line 26) let assets or fund balances. Subtract line 21 fro	Im line JGDEN, C	<u> </u>		,113,689	ī	7,476,787					
	art II	Signature Block				-							
Ur	nder penaltı	es of perjury, I declare that I have examined this return, inclu	ding accompanying sched	ules and stater	nents, and to the	ne best of	my knowledge and	belief, it is					
tru	ie, correct,	and complete Declaration of preparer (other than officer) is t	pased on all information of	which preparer	has any knowle	edge	,						
_			 ·		Т	<u> </u>	19/17						
Sig	gn	Signature of pricer			Dat	e	, , , , , ,						
	ere	Marc B. Terrill President											
		Type or prot name and title											
_	• •		signature	Da	te	T	PTIN						
	aid	, and the second				Check self-em	<u> </u>						
	eparer	F			<u> </u>		Pioyeu						
Us	se Only	Firm's name				's EIN ►							
N A -	ny tho IDG	Firm's address	ove2 (end instruction		Pho	ne no							
		discuss this return with the preparer shown at		13)	<u>······</u>	 ;		S No					
Fo	r Paperwo	ork Reduction Act Notice, see the separate instruc	For Paperwork Reduction Act Notice, see the separate instructions.										

4b	(Code:) (Expenses \$	including grant	s of \$) (Revenue \$)
	•					
					·····	
	(Code)	\ T	including grant	f ¢) (Deverous f	
С	(Code:) (Expenses \$	including grant	s or \$) (Revenue \$)
					·	
d	Other program ser (Expenses \$	vices (Describe in Schedu including grant) (Revenue \$,	
le	Total program serv		925,645) (ixevenue φ		
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					-	

Part IV	
	quired Schedules

1. Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule D. Schedule B. Schedule O. Contributors (see instructions)? 2. Is the organization required to complete Schedule B. Schedule of Contributors (see instructions)? 3. It is the organization required to complete Schedule D. C. Part II 4. Section 501(c)(3) organizations. Did the organization engage in obtobying activities on have a section 501(c)(4). S01(c)(5), or 501(c)(6), organization that receives membership dues, assessments, or smilar anounts as defined in Revenue Procedure 98-19" If "Yes," complete Schedule C, Part III. 5. Is the organization a section 501(c)(4). S01(c)(5), or 501(c)(6), organization that receives membership dues, assessments, or smilar anounts as defined in Revenue Procedure 98-19" If "Yes," complete Schedule C, Part III. 5. Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part III. 5. 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 III. 5. Did the organization maintain collections of works of art, historical tressures, or other similar assets? If "Yes," complete Schedule D, Part III. 5. Did the organization report an amount for Part X, line 21, for escound report an amount for accounting the schedule D, Part VIII. 6. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII. 7. Did the organization report an amount for other assets in Part X, line 10? If "Yes," complete Schedule D, Part VIII. 8. Did the organization report an amount for other assets in Part X, line 10. Part VIII. 9. Did the organization submit of the part X, line 10. P			-	Yes	No
2 Is the organization required to complete Schedule B, Schedule of Continuous (see instructions)? Did the organization region develor or undered political campagn activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I Section 501(x) organizations. Did the organization engage in lobbying activities, or have a section 501(x) election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(x)(4), 501(x)(5), or 501(x)(8) organization that receives membership dues, assessments, or smillar amounts as defined in Revenue Procedure 98-19" If "Yes," complete Schedule C, Part III 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 II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escroy or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide created counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V Did the organization report an amount for land, buildings, and equipment in Part X, line 10 If "Yes," complete Schedule D, Part V Did the organization report an amount for other liabilities in Part X, line 10 that is 5% or more of its total assets reported in Part X, line 10 If "Yes," complete Schedule D, Part V Did the organization report an amount for other liabilities i	1,		4		
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to cendidates for public office? If "Yes," complete Schedule C, Part II. 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the fax year? If "Yes," complete Schedule C, Part II. 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), 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. 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 II. 7 Did the organization membrane assets, or historic and areas, or histori	2	·	<u> </u>	$\overline{}$	<u> </u>
a section 501(x)0 grantations. Did the organization region to region to biblying activities, or have a section 501(x) election in effect during the tax year? If "Yes," complete Schedule C, Part II . 1 Set the organization is section 501(x)4, 501(x)5, or 501(x)6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III . 2 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 II . 3 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 III . 4 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . 5 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 VI . 5 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI . 5 Did the organization report an amount for investments—other secunities in Part X, line 10 II Part X,				<u> X</u>	
electron in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 5016(4), 5016(5), 5016(5) or 5016(9) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 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 II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, histonic land areas, or histonic structures? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, histonical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V 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 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V Did the organization report an amount for investments—other securities 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 V 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 V Did the organization separate or consolidated financial statements for the tax year? If "Yes," complete Sc	_	candidates for public office? If "Yes," complete Schedule C, Part I .	3		X
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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 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 VI If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII 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 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 VII 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 XIII 11b X 2 Did the organization report an amount for other liabilities 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 XIII 4 Did the organization organization in amount for other liabilities 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 XIII 11c X 11d X 12d Did the organization orbital in a positions under Fil A8 (ASC T40)! If "Yes," complete Schedule D, Part XI III 12d Did the organization orbital in accomplete Schedule D, Part XI III 12d Did the organization associated in consolidated, independent audited financial statements	8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
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10 Did the organization, directly or through a related organization, hold assets in temporally restricted endowments, permanent endowments, or usual-iendowments? If "Yes," complete Schedule D, Part V VII, VIII, IX, or X as applicable. 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete Schedule D, Part VI 12 Did the organization report an amount for investments—other securities in Part X, line 12° If "Yes," complete Schedule D, Part VII. 13 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. 14 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. 15 Did the organization report an amount for other lassification in Part X, line 15° If "Yes," complete Schedule D, Part X III. 16 Did the organization report an amount for other lassification in Part X, line 25° If "Yes," complete Schedule D, Part X III. 17 Did the organization obtain separate, independent audited financial statements for the tax year "If "Yes," complete Schedule D, Part X III. 18 Did the organization included in consolidated, independent audited financial statements for the tax year" If "Yes," complete Schedule D, Parts X and XII III. 18 Did the organization answered "No" to line 12a, then completing Schedule D, Parts X and XII III. 19 Did the organization have aggregate revenues or expenses of more than \$15,000 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 II and IV 10 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," comple		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
If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, VI, VI, VI, VI, VI, VI, V	10				
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 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 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 VIII e 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 XI f 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 XI f Did the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11	11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	"		
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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		Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		
	19		19		
				990	

Part IV Checklist of Required Schedules (continued)

			1.00	110
20 ą	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.	20a		X
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b	<u>.</u>	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		ļ	
	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
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	230		X
	current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			^
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		X
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-12	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.	36	-	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R</i> ,			
	Part VI	37		<u>X</u> _
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note . All Form 990 filers are required to complete Schedule O	38	Х	
		Form	990	(2016)

Check if Schedule O contains a response or note to any line in this Part V Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in Box 3 of Form 1096. Enter-0- if not applicable b Enter the number of Forms W-2G ancluded in line 1a. Enter-0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of enterphysees 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 2b If all least one is reported on line 2a, did the organization lite all required federal employment tax returns? Note. If the sum of fines is and 2a is greater than 250, you may be required to e-file (see instructions) 1b If all least one is reported on line 2a, did the organization lite all required federal employment tax returns? Note. If the sum of fines is and 2a is greater than 250, you may be required to e-file (see instructions) 1b If If yes, has it filed a Form 990-T for this year? If Yor to line 3b, provide an exploration in Schedule O 1c If yes, has it filed a Form 990-T for this year? If Yor to line 3b, provide an exploration in Schedule O 1d A arey sime during the calendar year, did the organization have an interest in, or a signature or other financial Accounts (YBAR) 1b If Yes, enter the name of the foreign country ≥ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (YBAR) 1b Uf any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5a Vas the organization a party to a prohibited tax shelter transaction at ground the organization should with very solicitation an express statement that such contributions or grits were not tax deductible as charitable contributions and party for goods and services provided	Form 99	io (2016)			Page
a Enter the number reported in Box 3 of Form 1096. Enter -0 - if not applicable 1	Part	V Statements Regarding Other IRS Filings and Tax Compliance			
The trie number of Forms W.2G included in line 1a. Enter -0- if not applicable 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 gambling) winnings to pinze winners? 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 Statements, filed for the calendar year ending with or within the year covered by this return Statements, filed for the calendar year ending with or within the year covered by this return Statements, filed for the calendar year ending with or within the year covered by this return Statements, filed for the calendar year ending with or within the year covered by this return Statements, filed for the calendar year, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). By the year? The filed a Form 990-T for this year? If *No* to line 3b, provide an explanation in Schedule 0. At any time during the calendar year, did the organization have an interest, in, or a signature or other suthority over, a financial account in a foreign country. See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction? If *Yes,* to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? Sa Vas the organization aparty to a prohibited tax shelter transaction? If *Yes,* to line 5a or 5b, did the organization file Form 8886-T? Did the organization selection and the were not tax deductible as chantable contributions and services provided? Did the organization selection protein the dominant and services provided? Did the organization selection in the va		Check if Schedule O contains a response or note to any line in this Part V	<u></u>	_	[
b Enter the number of Forms W-2G included in line 1a. Enter -0- in not applicable 1b	4-	5. "		Yes	No
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Statements, filed for the calendar year ending with or within the year covered by this return 1	2a		10		├
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Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3	b				
Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a 3b 1				-	
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O. 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country leuch as a bank account, securities account, or other financial accounts (FBAR). If "Yes," enter the name of the foreign country leuch as a bank account, or other financial accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c 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 contributions or gifts were not tax deductible? 5c Organizations that may receive deductible contributions under section 170(c). a 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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization may see a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7c X 7d If "Yes," indicate the number of Forms 8282 filed during the year 9 Did the organization notify the donor of the value of the goods or services provided? 17d Yes, "Indicate the number of Forms 8282 filed during the year 17d If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? The file organization in receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? The file organization in forceive any funds, directly indirectly, to pay prem	3a		3a	İ	X
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f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 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 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? If "Yes," enter the amount of tax-exempt interest received or accrued during the year If "Yes," enter the amount of tax-exempt interest received or accrued during the year Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O			7-		
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b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter a 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) 11a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	9	Sponsoring organizations maintaining donor advised funds.			
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Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O				$\neg \uparrow$	
Note. See the instructions for additional information the organization must report on Schedule O	13				
		·	13a		
			,		

the organization is licensed to issue qualified health plans

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

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

c Enter the amount of reserves on hand

14a

14b

13b

13c

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Sc			ions
Secti	on A. Governing Body and Management			X
<u>Jecii</u>	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. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	7		
b 2	Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	4 5 6	X	X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7a7b	X	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	_X	
b	Each committee with authority to act on behalf of the governing body?	8b	_X	<u> </u>
9	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		X_
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	iue C		1
40-	Did the aurometica have level shorters have been as officiated?	40-	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		X
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b		X
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		X
13	Did the organization have a written whistleblower policy?	13		X
14 15	Did the organization have a written document retention and destruction policy? 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?	14		X
а	The organization's CEO, Executive Director, or top management official .	15a		j
b	Other officers or key employees of the organization	15b		Х
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
b	with a taxable entity during the year?	16a		X
<u>, </u>	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply	า 501(c)(3)s	only)
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.		-	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re- Marilyn Loux 101 West Mt_Royal Avenue Baltimore, MD 21201 410-727-4828	cords.	•	

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

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

ΓV

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year

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

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 no	or any relate	d orga	aniz	atic	n c	ompe	nsa	ted any curren	it officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any	(do n box, i	ot ch	Pos neck ss pe d a d	c) ition more	e than o	one an ee)	ا ۔۔۔ءَ ا	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
- · · · · · · · · · · · · · · · · · · ·	25								}	
(1) Marc B Terrill President and Public Director	.25 40 0	X		X				0	802,129	92,056
(2) Richard L. Pearlstone	25		<u> </u>	1	 		_		802,129	92,030
Vice President and Donor Director	<u>23</u>	х		X				0	0	0
(3) P. Justin Pearlstone	.25				-		 	0	0	
Vice President and Donor Director	. 2	x		X				o	0	0
(4) Eugene Schreiber	.25			^	 -			<u> </u>		
Secretary/Treasurer and Public Director		х		X				0	0	0
(5) Any Elias	.25			1				<u> </u>		
Donor Director	- 	X						o	0	0
(6) Josh Fidler	.25							<u>-</u> -	<u>-</u>	
Public Director	1	х						o	0	0
(7) Darrell D. Friedman	.25									
Public Director	1	x						0	0	0
(8)										
(9)					ļ <u>-</u>					
(10)										
(11)										
(12)	<u> </u>									
(13)				-						
(14)	 									

`	(A) Name and title	(B) Average hours per week (list any	Position (do not check more than obox, unless person is both officer and a director/trus					an tee)	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimated om amount of other		
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizati (W-2/1099-I		fro orga and	ensation m the nization related nizations	
(15)		ļ					<u>u</u>							
(16)							 							
					-									
										<u> </u>				
														_
							_							
		ļ	ļ											
(23)		 												
(24)														
(25)														
1b c	Sub-total Total from continuation sheets to Part	VII, Sectio	 n A			-		>	0		2,129			,056
d 2	Total (add lines 1b and 1c) Total number of individuals (including bu reportable compensation from the organical compensation).		l to th	ose	list	ed a	above	▶ e) w	ho received me		2,129 00,000 d	of	92,	,056
3	Did the organization list any former of employee on line 1a? If "Yes," complete							emp	loyee, or high	est compe	ensated	3		No X
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of re	portal	ole d	com	per	nsatio							
5	Did any person listed on line 1a receive of services rendered to the organization									ation or inc	dividual	5	X	X
Section	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Repyear													
	(A) Name and business add	Iress	_						(B) Description of s	ervices	C	(C) ompens	ation	
None											 -			
								<u> </u>						

	990 (201							Page
Par	r Allī	Statement of Rev Check if Schedule (nonse or note to	any line in this	Part \/III		150
	· · · · · · · · · · · · · · · · · · ·	Check ii Genedule (o contains a res	ponse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Grants	1a	Federated campaign	s 1a					072 014
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
Gifts, (ilar Am	С	Fundraising events	<u>1c</u>					
ايَّةِ يَق	d	Related organizations						
ons, Sim	e f	Government grants (cor All other contributions, g						
er Eti	'	and similar amounts not inc		179 000				
Contributions, and Other Sim	g	Noncash contributions inclu	<u> </u>	178,000				
Cor	h	Total. Add lines 1a-1	·	•	178,000			
e e			··	Business Code	170,000			
Program Service Revenue	2a							
8	b							
Vice.	С							
Ser	d							
na La	е							
5 g	f f	All other program ser		L				
	3	Total. Add lines 2a–2 Investment income		. D	0		 	
	"	and other similar amo		ends, interest,	250.140			
	4	Income from investmen	•	· · · · · · · · · · · · · · · · · · ·	258,140			258,140
	5	Royalties	it of tax exempt be	> Id proceeds				
		, ,	(i) Real	(ii) Personal				
	6a	Gross rents						
	b	Less. rental expenses						
	С	Rental income or (loss)	0	0				
	d	Net rental income or	` <i>'</i>	•	0			
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
	L.	assets other than inventory Less cost or other basis	6,082,516					
	b	and sales expenses	5.004.261				i	
	С	Gain or (loss)	5,994,361 88,155	0				
	l	Net gain or (loss) .	00,133		88,155			00.155
	_		·		88,133			88,155
βL	8a	Gross income from fu	undraising					
Other Revenue		events (not including \$						
&		of contributions reporte	ed on line 1c)					
her		See Part IV, line 18	а					
ŏ		Less: direct expenses				•		
		Net income or (loss) for Gross income from ga		events >	0			
	Ja	See Part IV, line 19 .	•					
	b	Less direct expenses	u					
		Net income or (loss) fi		vities .	0			
	10a	Gross sales of in	ventory, less					
		returns and allowance	es . a					
		Less cost of goods s						
	c Net income or (loss) from sales of inventory .				0			
		Miscellaneous R	evenue	Business Code				
	11a							
	b							
	c d	All other revenue .						
		Total. Add lines 11a-	L		0			
	12	Total revenue. See in			524,295			346,295
								Form 990 (2016)

Part IX Statement of	Functional Expenses
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Secur	on 50 r(c)(5) and 50 r(c)(4) organizations must com			s must complete co	olumn (A)
<u> </u>	Check if Schedule O contains a respons			·	·
8b, 9	ot include amounts reported on lines 6b, 7b, b, 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 domestic organizations and domestic governments See Part IV, line 21	925,645	925,645		· ·
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16.				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 10 11 a b	Other employee benefits . Payroll taxes Fees for services (non-employees) Management . Legal				
c d e f g	Accounting Lobbying Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	144,323		144,323	
12 13 14 15 16	Advertising and promotion Office expenses Information technology Royalties Occupancy Travel	340		340	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	3.0		340	
19 20 21 22 23 24	Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance 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.)				
a b c d					
е 25	All other expenses Total functional expenses. Add lines 1 through 24e	1,070,308	925,645	144,663	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2016) Page **11** Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) End of year (A) Beginning of year Cash—non-interest-bearing Savings and temporary cash investments 763,805 **2** 868.872

	2	Savings and temporary cash investments	763,80 <u>5</u>	2	868,872
	3	Pledges and grants receivable, net		3	<u> </u>
	4	Accounts receivable, net	100,000	4	100,000
	5	Loans and other receivables from current and former officers, directors,			100,000
	l	trustees, key employees, and highest compensated employees			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section		 	
	"	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and		1 1	
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
s		organizations (see instructions) Complete Part II of Schedule L			
Assets	7	Notes and loans receivable, net		6	
ΑS	8	Inventories for sale or use		7	
_	9			8	
	10a	Prepaid expenses and deferred charges .		9	
	IVa	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D]	
	b	Less: accumulated depreciation 10b		10c	0
	11	Investments—publicly traded securities	16,249,884	11	16,507,915
	12	Investments—other securities See Part IV, line 11 .		12	
	13	Investments—program-related See Part IV, line 11 .		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	. 16	Total assets. Add lines 1 through 15 (must equal line 34)	17,113,689	16	17,476,787
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	· · · · · · · · · · · · · · · · · · ·
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	· · · · · · · · · · · · · · · · · · ·	20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors,			
	1	trustees, key employees, highest compensated employees, and	İ		
Ē		disqualified persons Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties .		24	
	25	Other liabilities (including federal income tax, payables to related third			
	23	parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		25	
_		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and	0	26	0
es		complete lines 27 through 29, and lines 33 and 34.		ŀ	
	27	Unrestricted net assets			
ala	28	<u>-</u>	17,113,689	27	17,476,787
8	29	Temporarily restricted net assets		28	
our	29	Permanently restricted net assets	<u> </u>	29	
Net Assets or Fund Balanc		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.	:		
ţ	30	Capital stock or trust principal, or current funds		30	· · · · · · · · · · · · · · · · · · ·
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
۲	32	Retained earnings, endowment, accumulated income, or other funds		32	·
Se	33	Total net assets or fund balances .	17,113,689	33	17,476,787
	34	Total liabilities and net assets/fund balances	17,113,689	34	17,476,787
	•	· · · · · · · · · · · · · · · · · · ·	11	1	Form 990 (2016)

Form **990** (2016)

Page	1	2
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Par	XI Reconciliation of Net Assets			-	
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>		
1.	Total revenue (must equal Part VIII, column (A), line 12)	1		52	24,295
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,01	70,308
3	Revenue less expenses Subtract line 2 from line 1	3		(54	46,013
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		17,1	13,689
5	Net unrealized gains (losses) on investments	5		9(09,111
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	1			
	33, column (B))	10		17,47	76,787
<u>Part</u>	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII .			· ·	\Box
				Yes	No
1	Accounting method used to prepare the Form 990 🗵 Cash 🔲 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın ın			
	Schedule O		ļ		j
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled or			
	reviewed on a separate basis, consolidated basis, or both		-	1	} }
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a			i i
	separate basis, consolidated basis, or both		1		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o				
	of the audit, review, or compilation of its financial statements and selection of an independent account		2c		ļ
	If the organization changed either its oversight process or selection process during the tax year, ex	plaın ın			
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in			
	the Single Audit Act and OMB Circular A-133?		3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits	3b	لـ	
			Forr	n 990	(2016)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2016

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Name of the organization Employer identification number 52-1249913 Pearlstone Family Fund, Inc. Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the cóllege or university: An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 X An organization organized and operated exclusively for the benefit of, to perform the functions of, or to 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV. Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, C its supported organization(s) (see instructions) You must complete Part IV. Sections A. D. and E. ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations . . . Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of listed in your governing (described on lines 1-10 support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) The Associated: Jewish Community Federation of Baltimore 52-0607957 10 Х 455,000 (B) (C) (D) (E)

455,000

Total

Par	Support Schedule for Organiza (Complete only if you checked th	a tions Desc ne box on lin	ribed in Sect e 5, 7, or 8 or	t ions 170(b)(1 f Part I or if th	l)(A)(iv) and le organizatio	170(b)(1)(A)(v on failed to au	i) alıfv under
	Part III. If the organization fails to						
	ion A. Public Support	(-) 0040	1 (1) 0040	T () 0044	T (1) 00/5		· · · · · · · · · · · · · · · · · · ·
1	ndar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
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						
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		<u>l</u>	<u> </u>	<u> </u>		
	ion B. Total Support ndar year (or fiscal year beginning in) ▶	(=) 2012	(h) 2012	(-) 2014	(-I) 0045	() 0040	
7	Amounts from line 4	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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 VI)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc First five years. If the Form 990 is for the				or fifth town	12	F04(-)(0)
13	organization, check this box and stop her		ıı s ilist, secon	ia, mira, ioum	, or mich tax yo	ear as a section	n 501(c)(3) ► □
Sect	on C. Computation of Public Suppor		ie	<u>·</u> ·	· ·	·	
14	Public support percentage for 2016 (line 6			11, column (f))		14	%
15 16a	Public support percentage from 2015 Sch 331/3% support test—2016. If the organization qual	zation did not	check the bo		nd line 14 is 33	15 3 ¹ /3% or more,	check this
b	33 ¹ / ₃ % support test—2015. If the organization this box and stop here. The organization	zation did not	check a box o	on line 13 or 16		is 33 ¹ /3% or mo	ore, check
17a	10% -facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the "forganization".	ets the "facts	-and-circumst	ances" test, ch	neck this box a	and stop here.	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization of Explain in Part VI how the organization of supported organization	tion meets th	ne "facts-and-o	circumstances"	test, check t	this box and s	a, and line top here.
18	Private foundation. If the organization did	not check a	box on line 13	, 16a, 16b, 17a	, or 17b, chec	k this box and s	

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

(Complete only if you checked the box on line 10 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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include 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					ĺ	
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						,
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year			<u>.</u>			
C	Add lines 7a and 7b		ļ				
8	Public support. (Subtract line 7c from						
	line 6)				*	~	
	on B. Total Support			r		r	
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6		-				
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses acquired after June 30, 1975					İ	
_	· ·	<u> </u>	 				·
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						
14	loss from the sale of capital assets		1		,		
	(Explain in Part VI)			!	,		
13	Total support. (Add lines 9, 10c, 11,		 	 			
	and 12)		Į.				
14	First five years. If the Form 990 is for the	ne organizatio	n's first, secon	d, third, fourth	, or fifth tax ve	ear as a section	1 501(c)(3)
	organization, check this box and stop he	-		a,a,		Jan 40 4 50000	▶ □
Secti	on C. Computation of Public Suppor		ie			·	
15	Public support percentage for 2016 (line 8			3, column (f))		15	%
16	Public support percentage from 2015 Sch	• • • • • • • • • • • • • • • • • • • •	•			16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2016 (y line 13, colur	nn (f)) .	17	%
18	Investment income percentage from 2015				•	18	%
19a	331/3% support tests—2016. If the organ						
	17 is not more than 331/3%, check this box		_	-		•	
b	331/3% support tests—2015. If the organiz						
	line 18 is not more than 331/3%, check this I	oox and stop h	nere . The organ	ızatıon qualıfies	as a publicly si	upported organı	zation 🕨 🔲
20	Private foundation If the organization di	d not chock a	hay on line 14	100 or 10b c	shook this how	and accomptent	tions 🕨 🗆

Part IV **Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete

	Sections A, D, and E if you checked 12d of Part I, complete Sections A and D, and complete F	art v	()	
Sect	ion A. All Supporting Organizations			
	Assumit of the commentant of the first of th	r	Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated if designated by			
2	class or purpose, describe the designation. If historic and continuing relationship, explain	1	X	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	2	<u> </u>	X
	(b) and (c) below	3a	ļ	X
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination			
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	3b	<u> </u>	
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		X
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		X
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
_	purposes	4c		X
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		X
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?			
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c		X
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.			
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with	6		X
0	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		_X
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)			
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more	8	\rightarrow	X
Ja	disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .			
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	9a		<u>X</u>
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		X
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		X
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below	10a		X
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10:		
	ACCOUNTING AMOUNTS THE ORIGINAL HAR EXCESS DUSTIESS HORITING I	105		v

10b

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Schedu	ne A (Form 990 or 990-EZ) 2016			Page J
Part	IV Supporting Organizations (continued)			
			Yes	No
11 、	Has the organization accepted a gift or contribution from any of the following persons?)		
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	44-	 	 -
	below, the governing body of a supported organization?	11a		X
	A family member of a person described in (a) above?	11b	<u> </u>	X
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		X
Secti	ion B. Type I Supporting Organizations		Yes	No
	Did the directors, trustees, or membership of one or more supported organizations have the power to	·	res	NO
1	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	l		
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			ĺ
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	-		
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	1		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		
Secti	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		
Secti	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
	•	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
_		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			ļ
	supported organizations played in this regard	3		لــــــا
Socti	ion E. Type III Functionally Integrated Supporting Organizations			
				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ctions	S)
а	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	structi	ions)
2	Activities Test Answer (a) and (b) below.	ĺ	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			1
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			-
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			ĺ
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	ĺ .		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	i		
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org					
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E					
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1 Net short-term capital gain	1				
2 Recoveries of prior-year distributions	2				
3 Other gross income (see instructions)	3				
4 Add lines 1 through 3	4				
5 Depreciation and depletion	5				
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6				
7 Other expenses (see instructions)	7				
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
Section B - Minimum Asset Amount	_	(A) Prior Year	(B) Current Year (optional)		
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)					
a Average monthly value of securities	1a				
b Average monthly cash balances	1b				
c Fair market value of other non-exempt-use assets	1c				
d Total (add lines 1a, 1b, and 1c)	1d	<u></u> _			
e Discount claimed for blockage or other factors (explain in detail in Part VI)					
2 Acquisition indebtedness applicable to non-exempt-use assets	2				
3 Subtract line 2 from line 1d	3				
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4				
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6 Multiply line 5 by 035	6				
7 Recoveries of prior-year distributions	7				
8 Minimum Asset Amount (add line 7 to line 6)	8				
Section C - Distributable Amount			Current Year		
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2 Enter 85% of line 1	2				
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4 Enter greater of line 2 or line 3	4				
5 Income tax imposed in prior year	5				
6 Distributable Amount Subtract line 5 from line 4, unless subject to					
emergency temporary reduction (see instructions)	6				
7 Check here if the current year is the organization's first as a non-functional	y in	tegrated Type III support	ng organization (see		
instructions)					

Part) Supporting Organi	zations (continued)			
Secti	Current Year					
1						
ż	Amounts paid to perform activity that directly furthers exe					
	organizations, in excess of income from activity					
3	Administrative expenses paid to accomplish exempt purp					
4	Amounts paid to acquire exempt-use assets					
5	Qualified set-aside amounts (prior IRS approval required)					
6	Other distributions (describe in Part VI). See instructions			<u></u>		
7	Total annual distributions. Add lines 1 through 6.					
8	Distributions to attentive supported organizations to whic	h the organization is res	ponsive			
	(provide details in Part VI) See instructions					
9	Distributable amount for 2016 from Section C, line 6					
10	Line 8 amount divided by Line 9 amount					
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016		
1	Distributable amount for 2016 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI) See instructions					
3	Excess distributions carryover, if any, to 2016					
а						
b						
С						
d						
е	From 2015					
f	Total of lines 3a through e					
g	Applied to underdistributions of prior years					
h	Applied to 2016 distributable amount					
i	Carryover from 2011 not applied (see instructions)					
j	Remainder Subtract lines 3g, 3h, and 3i from 3f.					
4	Distributions for 2016 from Section D, line 7 \$					
а	Applied to underdistributions of prior years					
b	Applied to 2016 distributable amount					
С	Remainder Subtract lines 4a and 4b from 4					
5	Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI See instructions		0			
6	Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions			0		
7	Excess distributions carryover to 2017 Add lines 3j and 4c.	0				
8	Breakdown of line 7					
a	<u> </u>					
b	Excess from 2013 .					
С	Excess from 2014 .					
d	Excess from 2015 .					
е	Excess from 2016					

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; Paill, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2 3a, and 3b, Part V, line 1; Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section lines 2, 5, and 6 Also complete this part for any additional information. (See instructions.)
Part IV, Section A, Line 6 -
The Supported Organization works to preserve and enhance Jewish life It addresses charitable, educational, religious, humanitarian,
health, cultural and social service needs of the Jewish community locally, nationally in Israel and throughtout the world
In furtherance of that mission, the Supported Organization encourages families to establish supporting organizations in
partnership with it, in order to engage interested donors and succeeding generations in philanthropic pursuits and
enhance both the Jewish and general communities in keeping with the Jewish tradition of repairing the world
All grants are made to tax-exempt charitable organizations registered with the Internal Revenue Service.
Part IV, Section B, Line 2 -
Grants to organizations, other than the Supported Organization, are made at the discretion of the Board of the Supporting
Organization and are made in furtherance of the mission of the Supported Organization to support Jewish, cultural, educational
and social justice work

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

2016

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

Open to Public Inspection

Complete if the organization is described below.
 ► Attach to Form 990 or Form 990-EZ.
 ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," on 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," on 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," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

, ,	соранито плотисотоло,, ч				
	ction 501(c)(4), (5), or (6) orga	anizations Complete Part III			
Name o	f organization			Employer ider	ntification number
	one Family Fund, Inc.			52-1249913	
Part l		e organization is exempt und			
	Provide a description of definition of "political car	f the organization's direct and in npaign activities")	idirect political ca	ampaign activities in Part	: IV. (see instructions fo
2	Political campaign activit	y expenditures (see instructions)		▶ \$	3
3	Volunteer hours for politic	cal campaign activities (see instru	ctions)		
Part I		e organization is exempt und			
2 3 4a b Part I 1 2	Enter the amount of any of the organization incurred Was a correction made? If "Yes," describe in Part—C Complete if the Enter the amount direct activities Enter the amount of the 527 exempt function activities exempt function edine 17b	IV. e organization is exempt und ly expended by the filing organia	n managers under rm 4720 for this y ler section 501(zation for section	c), except section 501 527 exempt function	
5	Enter the names, address organization made payme the amount of political co	ses and employer identification nuents. For each organization listed, ontributions received that were profund or a political action committed.	mber (EIN) of all s enter the amount emptly and directly	ection 527 political organi paid from the filing organi delivered to a separate p	zation's funds. Also ente
	(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)			 		

	section 501(h)).	is exempt under section 501(c)(3) and filed	•	
A	Check ► ☐ if the filing organization below	ngs to an affiliated group (and list in Part IV	each affiliated gro	up member's
_		es, and share of excess lobbying expenditur	,	
<u>B</u>		ked box A and "limited control" provisions a	pply.	
	Limits on Lobbyi		(a) Filing	(b) Affiliated
	(The term "expenditures" mea		organization's totals	group totals
	1a Total lobbying expenditures to influence pr			
	b Total lobbying expenditures to influence a		27,500	
	c Total lobbying expenditures (add lines 1a a		27,500	
	d Other exempt purpose expenditures		898,145	
	e Total exempt purpose expenditures (add li	nes 1c and 1d)	925,645	
		e amount from the following table in both		
	columns.		163,847	
	If the amount on line 1e, column (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 \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
		\$1,000,000		
	g Grassroots nontaxable amount (enter 25%	,	40,962	
	h Subtract line 1g from line 1a. If zero or less		0	
	i Subtract line 1f from line 1c. If zero or less,		0	
	j If there is an amount other than zero or	n either line 1h or line 1i, did the organization	file Form 4720	
	reporting section 4911 tax for this year?	<u> </u>		Yes No
	4-Year	Averaging Period Under section 501(h)		
		on 501(h) election do not have to complete all	of the five columns	below.
	See the se	eparate instructions for lines 2a through 2f.)		

	Lobbyii	ng Expenditures D	uring 4-Year Ave	raging Period		
	Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a	Lobbying nontaxable amount	156,303	180,315	180,041	163,847	680,506
b	Lobbying ceiling amount (150% of line 2a, column (e))					1,020,759
С	Total lobbying expenditures	20,000	25,000	25,000	27,500	97,500
d	Grassroots nontaxable amount	39,826	45,079	45,010	40,962	170,877
е	Grassroots ceiling amount (150% of line 2d, column (e))					256,316
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2016

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	5768	3	
For .	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)	_
	ription of the lobbying activity.	Yes	No	A	mount	
1	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)? Media advertisements?	ļ				
c d	Media advertisements?	ļ		_		
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?					
j	Total. Add lines 1c through 1					
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		Ĺ			
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?	\(\frac{1}{2}\)		. 4:		
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	;)(5), (or sec	ction		
					Yes 1	10
1	Were substantially all (90% or more) dues received nondeductible by members?			1	 -	
. 2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Dort	Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)			3		
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," C answered "Yes."				line 3,	is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	s of				
а	Current year		2a			
b	Carryover from last year		2b			
C	Total	.	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbeard and the state of the sent and the sent and the sent agree to carryover to the reasonable estimate of nondeductible lobbeard and the sent agree to carryover to the reasonable estimate of nondeductible lobbeard and the sent agree to carryover to the reasonable estimate of nondeductible lobbeard and the sent agree to carryover to the reasonable estimate of nondeductible lobbeard and the sent agree to carryover to the reasonable estimate of nondeductible lobbeard and the sent agree to carryover to the reasonable estimate of nondeductible lobbeard agree to carryover to the reasonable estimate of nondeductible lobbeard agree to carryover to the reasonable estimate of nondeductible lobbeard agree to carryover to the reasonable estimate of nondeductible lobbeard agree to carryover to the reasonable estimate of nondeductible lobbeard agree to carryover to the reasonable estimate of nondeductible lobbeard agree to carryover to the reasonable estimate of nondeductible lobbeard agree to carryover to the reasonable estimate of nondeductible lobbeard agree to carryover to the reasonable estimate of nondeductible lobbeard agree to carryover to the reasonable estimate to the					
=	and political expenditure next year?		4			
5 Par	Taxable amount of lobbying and political expenditures (see instructions)	<u>·</u>	5			
Provid	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated grounstructions); and Part II-B, line 1. Also, complete this part for any additional information.	oup list); Pari	t II-A, I	nes 1 a	nd

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SCHE	(Form

Pearlstone Family Fund, Inc.

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

2016

OMB No 1545-0047

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

Open to Public Inspection Employer identification number 52-1249913

Schedule I (Form 990) (2016) % □ Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form (h) Purpose of grant or assistance 21 □Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table (c) IRC section (if applicable) the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the Instructions for Form 990. General Information on Grants and Assistance (p) EIN 1 (a) Name and address of organization or government (1) Attachment #1 Part I Part II 3 9 **4** 3 9 8 8 9 5 E (12)

Schedule I (Form 990) (2016)

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Schedule I (Form 990) (2016) (f) Description of noncash assistance 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) The Foundation will request and receive periodic reports and updates from the grantees regarding how grants are utilized, and takes such (d) Amount of noncash assistance Grants are reviewed to ensure that they are permissible and in accord with applicable laws and regulations. (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients information into account in considering future grant awards. (a) Type of grant or assistance Part IV S 2 9 က

SCHEDULE J (Form 990)

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

2016 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

► Attach to Form 990.

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

Inspection Employer identification number

OMB No 1545-0047

	one Family Fund, Inc 52-1249913			
Part	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 on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ 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 (such as, maid, chauffeur, chef)			
			ļ	
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 on 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 on 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		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X	
C	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.	4c		X
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9. For persons listed on 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		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of.			
а	The organization?	6a		X
b	Any related organization? If "Yes" on line 6a or 6b, describe in Part III.	6b		X
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		x
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			Λ
	ın Part III	8		_ <u>X</u> _
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Schedule J (Form 990) 2016

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Part II

For each individual whose compensation must be reported on 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 aren't listed on Form 990, Part VII.

NOTE: THE SUIT OF COUNTIES (B)(I) THIS COUNTIES (B) (B) Breakdown of W-2 and/or 1099-MISC compensation	1 de la composition della comp	(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	יור אוו, ספכווטוו א, ווופ ד	a, applicable coluin	וו (ב) מוים (ב) מויוסמויוג	יון נוומן ווומואומתמו
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	€ !							
1 Marc B. Terrill	€	474,128	75,000	253,001	009'09	31,456	894,185	150,000
	8							
2 Carrell D. Friedman	(ii)				137,948	i	137,948	
	(i)							
က	€							
	€							i i
4	€							
	(i
S	€							
	€							
9	€							
	Ξ			•				
7	€							
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	Θ							
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10	(ii)					i		
	(ı)							
11	Ξ							
	€							
12	€							
	€							
13	(1)							
	Ξ							
14	(ii)							
	E							
15	€							
	Ξ							
16	Ξ							

Schedule J (Form 990) 2016

Part IIII Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part or any additional information.
he Directors of the Yehuda & Anne Neuberger Foundation, Inc. receive no compensation for their services. However, one of the
Directors is employed by the supported entity, The Associated Jewish Community Federation of Baltimore, Inc. (The Associated).
and of the compensation and benefits listed are paid by The Associated, none of it is attributable to the service as a Director
nd/or Officer of the Foundation.
ayment to Darrell D. Friedman, a former employee of The Associated, in the amount of \$137,948 was paid in 2016 under a deferred
ompensation agreement in place on December 31, 2013.
art I, Line 4b:
Латс В. Теттіl participates in a nonqualified deferred compensation plan. \$218,648 vested and was paid during the year
his amount is included in Form 990, Part VIII, Column E and Schedule J. Part II, Column Biii. Fifty thousand dollars
vas deferred and 1s included on Form 990, Part VII, Column F and Schedule J, Part II, Column C. A new five-year contract
vas executed for Marc B Terrill beginning January 1, 2013 The terms and conditions of the deferred compensation plan
re outlined in the contract with The Associated.

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.

2016

Open to Rubli

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

Pearlstone Family Fund, Inc.	52-1249913									
Form 990 Part VI, Section A,										
Line 2 - There are family relationships among the Donor Members and Directors. Richard L. Pearlstone, P.	Justin Pearlstone and									
Amy Elias have a family relationship.										
Line 6 - The organization has two classes of members, a Public Member-The Associated: Jewish Commun	nty Federation of Baltimore, Inc. and									
Donor Members consisting of Richard L. Pearlstone.										
Line 7a - The Members appoint the Board of Directors. The Public Member appoints the majority and the	Donor Members									
appoint the remainder										
Line 7b - Amendments to the Bylaws are subject to change or rescission by the Members before they are a	dopted									
Line 11a - The Form 990 and supporting schedules are distributed to the officers and directors upon comp	letion for									
review prior to filing.										
Line 12c - The supported organization monitors and enforces the potential of any conflict of interests by										
regularly reviewing the Board of Directors, its actions and the investment of assets to ensure that it complies										
with the conflict of interest policy.										
Line 15 - Marc B. Terrill participates in a nonqualified deferred compensation plan \$218,648 vested and was paid during the year.										
This amount is included in Form 990, Part VIII, Column E and Schedule J, Part II, Column Bin. Fifty thous	and dollars									
was deferred and is included on Form 990, Part VII, Column F and Schedule J, Part II, Column C A new fi	ve-year contract									
was executed for Marc B. Terrill beginning January 1, 2013. The terms and conditions of the deferred comp	ensation plan									
are outlined in the contract with The Associated										
Line 19 - The organization makes its governing documents and financial statements available to the public	upon request									
	••••									

SCHEDULE R (Form 990)

<u> </u>	_
lepartment of the Treasury iternal Revenue Service	lame of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.	ation about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.
	Information about Schedule R
	\blacksquare

Open to Public

2016

OMB No 1545-0047

(f)
Direct controlling
entity Employer identification number Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. 52-1249913 (e) End-of-year assets (d) Total income Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (c) Legal domicile (state or foreign country) (b) Primary activity (a) Name, address, and EIN (if applicable) of disregarded entity Pearlstone Family Fund, Inc. Part I Part II ල ন Ξ € <u>©</u> 9

פווכ פן וווסוכ וכומנכם נמע כאכוווף כו פמו וובמנוסוים ממו ווופ	alling the tan year.						
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state E or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling Sentity	(g) Section 512(b)(13) controlled entity?	2(b)(13) led
						Yes	2
(1) The Associated Jewish Community Federation of Baltimore, Inc. 101 W. Mt Royal Avenue Baltimore, MD 21201	Exempt Organization	Maryland	501(c)(3)	7	N/A		×
(2)							
(3)							
(4)							
(9)							
(9)							
E							

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

Schedule R (Form 990) 2016

Schedule R (Form 990) 2016

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

Schedule R (Form 990) 2016

Schedule R (Form 990) 2016

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Yes No		7 × ×	╄	× .	. Te X		. X											×	×	×	×	×	×	# p	16 X 19 X 11 X 12 X 12 X 14 X 14 X 15 X 1	1f X 1h X 1i X 1i X 1i X 1i X 1t X 1	16 X 19 X 11 X 11 X 11 X 11 X 11 X 11 X 10 X 1	16 X 19 X 11 X 10 X 10 X 10 X 11 X 11 X 12 X 12 X 13 X 14 X 15 X 15 X 16 Mining amount involved	16 X 19 X 11 X 11 X 11 X 11 X 11 X 11 X 12 X 12 X 14 X 15 X 1	16 X 16 X 17 X 18 X 19 X X 10 X X X X X X X X X	16 X 16 X 17 X 18 X 19 X 19 X 10 X 1	16 X 19 X 19 X 10 X 1
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	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	a controlled entity									(s)uoi	(s)uoı	ion(s)	nization(s) ganization(s) ations for related organizatic	nization(s)	nization(s) ganization(s) ations for related organization(s) ations by related organization(s)	nization(s)	ron(s)	ron(s)	ion(s)	ion(s)	ron(s)	ron(s)	ron(s)	ron(s)	ron(s)	ron(s)	ron(s)	ron(s)	ron(s)	ration(s)	ron(s)
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	g the tax year, did t	Heceipt of (I) Interest, (II) annuttes, (III) royaities, of (IV) fent Giff. grant. or capital contribution to related organization(s)	Gift, grant, or capital contribution from related organization(s)	Loans or loan guarantees to or for related organization(s)	Loans or loan guarantees by related organization(s)	Dividends from related organization(s)	Sale of assets to related organization(s)	Purchase of assets from related organization(s)	Exchange of assets with related organization(s)	Lease of facilities, equipment, or other assets to related organization(s)			of facilities, equipr	Lease of facilities, equipment, or other assets from related or Performance of services or membership or fundraising solicit	Lease of facilities, equipment, or other assets from related or Performance of services or membership or fundraising solicities.	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Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		a Hecel	c Gift, g	d Loans	e Loans	f Divide		n Purch	i Excha	j Lease	,		k Lease			_								į	_	× E 5 0 0 5 . m	× 550 05 . m	× 550 05 . 0	. χ_Εςο ασ νω	. x _ E c o	. x _ E c o a o L o	. x _ E c o a o z o

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 aross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(k) BI General or Percentage x 20 managing ownership K-1 partner? y es No									-		1		
(I) Code V~UBI amount in box 20 of Schedule K-1 (Form 1065)													
(h) Disproportionate allocations?									 				
(g) Share of end-of-year assets													
(f) Share of total income													
(e) Are all partners section 501(c)(3) organizations?													
(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)													
(c) Legal domicile (state or foreign country)													
(b) Primary activity													
(a) Name, address, and EIN of entity Name, address, and EIN of entity Name, address, and EIN of entity Name, address, and EIN of entity Name, address, and EIN of entity Name, address, and EIN of entity (b) (c) (d) (e) (f) (g) (g) Share of Share of Share of country Income (related, section total income end-of-year country) from tax under organizations? Share of section assets From tax under organizations? From tax under organizations? From tax under organizations? From tax under organizations? From tax under organizations?	(2)	(5)	(5)	(<u>u</u>)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)