SCANNED JUL 3 1 2019



Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2017

Do not enter social security numbers on this form as it may be made public.

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Internal Revenue Service

A For the 2017 cales Inspection

_	roi uie	July 1 , 2017, and en	ımg Jü	ne 30	, 20 18									
В	Check if a	pplicable C Name of organization Edenwald Residents' Association		D Employ	er identification number									
	Address of	hange Doing business as			52-1514950									
	Name cha	Number and street (or P O box if mail is not delivered to street address) Room	'suite	E Telepho	one number									
	Initial retu	- 1			410-339-6000									
	Final return	/terminated City or town, state or province, country, and ZIP or foreign postal code												
	Amended	return Baltimore, MD 21286		G Gross r	eceipts \$ 160,374									
$\bar{\sqcap}$		n pending F Name and address of principal officer Mrs. Sally Ransom-Knecht	H(a) Is this a		subordinates ⁷ Yes Vo									
_	. фрош	800 Southerly Road, Apt.702, Baltimore, MD 21286		•	es included? Yes No									
_	Tax-exem				a list (see instructions)									
<u>:</u>	Website:		[number ►									
K		ganization ☐ Corporation ☐ Trust	-1											
_	art I	Summary	nation 1987	IN State	of legal domicile MD									
					Il increase the same and									
40	1	Briefly describe the organization's mission or most significant activities: to for												
Governance		services offered to the residents of the Edenwald Retirement Community; to promote fellowship & concern among the resedents;												
Ē		to promote projects and offer volunteer assistance that benefit residents; and to assist in making life interesting and enjoyable. Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.												
Š	L		d of more that	- 1	its net assets.									
ၓ	3 1	Number of voting members of the governing body (Part VI, line 1a)		. 3	8									
Activities &	4 1	lumber of independent voting members of the governing body (Part VI, line 1	D)	. 4	8									
Ę.	5	otal number of individuals employed in calendar year 2017 (Part V, line 2a)		. 5	0									
Ĭ.	6	otal number of volunteers (estimate if necessary)		. 6	225									
AC	7a 1	otal unrelated business revenue from Part VIII, column (C), line 12		. 7a	0									
	1	let unrelated business taxable income from Form 990-T, line 34		7b	0									
	 		Prior Y		Current Year									
Revenue	8 (Contributions and grants (Part VIII, line 1h)		112 220										
	1	Program service revenue (Part VIII, line 2g)	113,320	112,417										
	1													
æ	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		35,112	40,176									
_		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	8,638	7,781										
	12	otal revenue—add lines 8 through 11 (must equal Part VIII. column (A), line (2)		157,070	160,374									
	13 (Grants and similar amounts paid (Part IX, column (3) (0) (1)		1,706	111,438									
	14	Benefits paid to or for members (Part IX, column (A); line-4)		0	0									
Ş	15 5	calaries, other compensation, employee benefits (Part IX, column (A) lines 5		98,990	0									
Se	16a F	Professional fundraising fees (Part IX, columned), line (Ne)		0	0									
Expenses	b 7	otal fundraising expenses (Part IX, column (D) (ine 25)	V											
ŭ	17 (otal fundraising expenses (Part IX, column (b) line 25) Other expenses (Part IX, column (A), lines 11a 11d 117 240) otal expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	1	40,704	43,187									
	18 7	otal expenses Add lines 13–17 (must equal Part IX collumn 4) line 25)		141,400										
	19 F	Revenue less expenses. Subtract line 18 from line 12	 											
_ 0	13 1	revenue less expenses. Oubtract line to from hige-12	Beginning of Ci	15,670	5,749 End of Year									
Vet Assets or und Balances	20 7	otal acceta (Dart V. line 16)	- Cegiiiiii g Ci Ci											
SSe		otal assets (Part X, line 16)		283,771	233,176									
돭	1	otal liabilities (Part X, line 26)		0	0									
-щ		let assets or fund balances. Subtract line 21 from line 20		283,771	233,176									
23	art II	Signature Block												
		es of perjury, I declare that I have examined this return, including accompanying schedules and sta			my knowledge and belief, it is									
tru	e, correct,	and complete Declaration of preparer (other than officer) is based on all information of which prepared	rer nas any know	rieage										
	1	William of Gunter St.		#/9/	1019									
Sig	ın	Signature of officer	Da	ate'	•									
He	re	WILLIAM F. HONTER, JR ASST. TREASON	RER											
		Type or print name and title												
D^	id	Print/Type preparer's name Preparer's signature	Date	Chastell	PTIN									
Pa				Check self-emp										
	eparer	Firm's name		- 1	* -1									
US	e Only	Firm's name		n's EIN ▶										
Ma	the IDC	discuss this return with the preparer shown above? (see instructions)	Pho	one no.										
		discuss this return with the preparer shown above? (see instructions)	<u> </u>	• • •	Yes No									
For	Paperwo	rk Reduction Act Notice, see the separate instructions. Cat	No. 11282Y		Form 990 (2017)									

90.16

Form 9	90 (2017)			Page 2
Part			Part III	🗹
1	Briefly describe the organization's mis		rarim	<u>V</u>
•			s of the Edenwald Retirement Community	to promote
	fellowship and concern among the resid	ents; topromote projects and offering fi	nancial & volunteer assistance that benefit	residents;
	and to assist in making life at Edenwald	interesting, enjoyable, and beeticial for	the residents.	
2	Did the organization undertake any sig			
	prior Form 990 or 990-EZ?			es 🗹 No
3	If "Yes," describe these new services of Did the organization cease conduction		how it conducts any program	
3	_			es 🗹 No
	If "Yes," describe these changes on S	chedule O.		
4			ts three largest program services, as n	neasured by
	expenses. Section 501(c)(3) and 501(c) the total expenses, and revenue, if any		ort the amount of grants and allocation	s to others,
4a	(Code:) (Expenses \$	10,086 including grants of \$) (Revenue \$)
	Edenforum			
	•••••			
			••••••	
4b) (Revenue \$)
	Flower Boxes			
	(Outro)) (D	
4c		4,426 including grants of \$) (Revenue \$)
	Library		- •	
			·	
A -1	Other manner and the Control of the	-1-1-1-0		
4d	Other program services (Describe in Se (Expenses \$ 22,937 including		e.\$. \	
4e	Total program service expenses ▶	39.206	· · · · · · · · · · · · · · · · · · ·	



Part	IV Checklist of Required Schedules			
1	Is the ergopization described in section E01/o/(2) or 4047/o/(1) (ather them a private foundation)? If "Vee"		Yes	No
•	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	ļ	/
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.	10		-
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		- ·
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		√
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	·	1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		√
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		√
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		√
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		√
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		√
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		<u>,</u>
				 -

Part	Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
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		
22	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21		✓
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	✓_	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
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		1
	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		1
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		✓
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
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		✓
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	28a 28b		1
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		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		▼
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		▼
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		√
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		▼
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R</i> ,			
38	Part VI	37	<u>, </u>	✓
	TO THE STATE OF TH	50	7 000	

Part	V Statements Regarding Other IRS Filings and Tax Compliance		-						
	Check if Schedule O contains a response or note to any line in this Part V		· · · · ·						
4 -			Yes	No					
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a contact the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b contact the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1							
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	{		l .					
	reportable gaming (gambling) winnings to prize 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 2a 2								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		✓					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)								
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓_					
b 42	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority	3b							
4a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial								
	account)?	4a		1					
b	If "Yes," enter the name of the foreign country: ▶								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts								
	(FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	ļ ļ	√					
b b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓					
6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	1						
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or		,						
	gifts were not tax deductible?	6b	✓						
7	Organizations that may receive deductible contributions under section 170(c).								
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?	7a							
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b							
·	required to file Form 8282?	7c							
d	If "Yes," indicate the number of Forms 8282 filed during the year								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	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?	-							
9	Sponsoring organizations maintaining donor advised funds.	8		_					
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:		ĺ						
a	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 . [10b]		- 1						
11	Section 501(c)(12) organizations. Enter.		ĺ	-					
	Gross income from other sources (Do not net amounts due or paid to other sources			- 1					
_	against amounts due or received from them.)			Ì					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			1					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
L	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			1					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	ļ		l					
С	Enter the amount of reserves on hand		ļ						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	+	!					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b							
			990	(2017)					

Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			ions.
Sect	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		. [✓
	to the state of th		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	3	 	ļ
	If there are material differences in voting rights among members of the governing body, or	1		
	if the governing body delegated broad authority to an executive committee or similar	1		ĺ
	committee, explain in Schedule O.	1		ľ
b	Enter the number of voting members included in line 1a, above, who are independent . 1b	3	}	ļ
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
3	any other officer, director, trustee, or key employee?	2	 -	✓_
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?			/
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	\vdash	1
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	<u> </u>	✓
6	Did the organization have members or stockholders?	6	1	_
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	<u> </u>	_	<u> </u>
	one or more members of the governing body?	7a	1	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			}
	the year by the following:	ļ		
a	The governing body?	8a	√	
ь 9	Each committee with authority to act on behalf of the governing body?	8b	✓	
•	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Reven		ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b 125	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	12a 12b	-	1
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		<u> </u>
_	describe in Schedule O how this was done	12c	.	✓
13	Did the organization have a written whistleblower policy?	13	\rightarrow	7
14	Did the organization have a written document retention and destruction policy?	14		\
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		✓_
ь	Other officers or key employees of the organization	15b		✓_
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			- 4
iva	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?			
_b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	16a		✓
~	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		1	Ì
	organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.			
10	Own website			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of inte financial statements available to the public during the tax year.	erest p	olicy.	, and
20	· · · · · · · · · · · · · · · · · · ·			
	State the name, address, and telephone number of the person who possesses the organization's books and rec Harold Kay, 800 Southerly Rd., Baltimore, MD 21286, 410-337-3709	oras:		
	······································			

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Part VII	Compensation of Officers,	Directors,	irustees,	key Employees	, mignest	Compensated	Employees,	, and
	Independent Contractors							
	midependent Contractors							

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	r any relate	d org	anız	atio	n c	ompe	ensa	ited any currer	nt officer, director	r, or trustee.	
					C)						_
(A)	(B)	(4	_4 _4		ition	e than o		(D) .	(E)	(F)	
Name and Title	Average					is both		Reportable	Reportable	Estimated	
	hours per week (list any		er and		lirect	or/trus		compensation from	compensation from related	amount of other	
	hours for	Individual trustee or director	Inst	Officer	ě	e Hg	Former	the	organizations	compensation	
	related organizations	vidu	Institutional trustee	g	Key employee	nest	ם	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization	
	below dotted	Q #) <u>aa</u>		용	# S		(** 2 1033 111100)		and related	
	line)	l iste	캻	ĺ	8	pen				organizations	
		•	tee			Highest compensated employee					
(1) Sally Ransom-Knecht	16										_
President	† <u>''</u>		İ	1		İ		٥	l		0
(2) Katherine Allen	16			Ť			\vdash				
Vice-President	† <u>-</u>			1				ĺ	0		0
(3) Harold Kay	16							<u>_</u>			<u> </u>
Secretary	†			1				۰ ا	o		0
(4) Sander Wise	16										
Assistant Secretary				✓				o	o		0
(5) Thomas Morell	16										_
Treasurer				✓				o	o		0
(6) William Hunter	16										_
Assistant Treasurer				✓				0	0		0
(7) Sandra Butchart	16										
Liaison				✓			<u> </u>	0	0		_0
(8) Marjorie Quigley	16										
Liaison		- <u></u> -		✓				0	0		_0
(9)											
(10)											_
(44)	_										
(11)											
(12)											_
(13)										·	_
(14)											_

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	/ees			lighe	st C	ompensated E	mployees (continu	ued)		
	(A) Name and title		(C) Position (do not check more th box, unless person is i officer and a director/t					n an	(D) Reportable compensation from	(E) Reportable compensation from	n from	(F) Estimated amount of other		
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizatio (W-2/1099-N	ons	comp fro orgai and	ensation m the nization related nizations	
(15)														
(16)														
(17)											†	· · · · · · · · · · · · · · · · · · ·		
(18)						-								
(19)														
(20)														
(21)														
(22)				_				_				· ·		
(23)								-						
(24)														
(25)														
1b c d	Sub-total	VII, Section		•	•		•	> > >						
2	Total number of individuals (including but reportable compensation from the organi	not limited						e) w	ho received m	ore than \$1	00,000) of		
3	Did the organization list any former of employee on line 1a? <i>If</i> "Yes," complete 8	ficer, direct								est compe	nsated	3	Yes N	No
4	For any individual listed on line 1a, is the organization and related organizations individual	greater tha			000	2 11	"Ye	s, "				e		
5	Did any person listed on line 1a receive of for services rendered to the organization?													
Section	on B. Independent Contractors			·										
1	Complete this table for your five highest compensation from the organization. Repyear.	•												
	(A) Name and business add	ress	<u>.</u>						(B) Description of s	ervices		(C) Compens	ation	
		·	-											
2	Total number of independent contractor received more than \$100,000 of compens.							th	ose listed abo	ove) who				

Form **990** (2017)

Par	t VIII				l i Abi-	David 1/111		
		Check if Schedule O con	tains 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
ats other	1a	Federated campaigns .	1a					,
ž a	b	Membership dues	1b					
S, G	С	Fundraising events	. 1c			İ		
Gift Iar,	d	Related organizations .	1d					
š, i	е	Government grants (contribut						
tion S	f	All other contributions, gifts, g						
혈美		and similar amounts not included		112,417				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in l	-			ļ		
	h	Total. Add lines 1a-1f .	<u></u>		112,417			
ם				Business Code			 	
eve	2a							
ě	b						•	
ΞŽ	C							1
Š	d				-		 	
Jran		All other program service r				-		
Program Service Revenue	g	Total. Add lines 2a–2f.			0	1		
	3	Investment income (inclu						
		and other similar amounts)			2,505	2,505	(
	4	Income from investment of ta	x-exempt be	ond proceeds ▶	2,000	2,000	•	· · · · · ·
	5	Royalties						
			(i) Real	(ii) Personal				
	6a	Gross rents						
	ь	Less rental expenses						
	С	Rental income or (loss)					·	<u></u>
	d	Net rental income or (loss)		▶				
	7a		Securities	(II) Other				
		assets other than inventory		40,776				
	b	Less cost or other basis						
		and sales expenses .		3,105		3		1
	C	Gain or (loss)		37,671				
	ď	Net gain or (loss)		▶	37,671	37,671		0
venue	8a	Gross income from fundral events (not including \$	ising					
Other Rev		of contributions reported on See Part IV, line 18	•					
ŧ	ь	Less direct expenses .	_					
J		Net income or (loss) from f						
		Gross income from gaming	activities.					
		See Part IV, line 19	a					
	ь	Less direct expenses	b		~ · -	· ·		
	С	Net income or (loss) from (gaming acti	vities ▶				
	10a	Gross sales of invento	ory, less	-			•	•
		returns and allowances	· · a	37,226	ŀ			
	b	Less cost of goods sold						
	С	Net income or (loss) from s		entory ▶	7,781	7,781		0
		Miscellaneous Revenue	e	Business Code			· · · · · · · · · · · · · · · · · · ·	
	11a	***************************************						
	b							
	C							
	d	All other revenue		L				
	e	Total. Add lines 11a-11d		T				
	12	Total revenue. See instruc	ctions	▶ 1	160.374	47.957	O	ป ก

	90 (2017)				Page 10
	Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must com				
Do no	Check if Schedule O contains a response include amounts reported on lines 6b. 7b.	(A)	(B)	(C)	<u> </u>
	o, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	1,848	1,848		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	109,590	109,590		
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	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)			_	
9	Other employee benefits				
10	Payroll taxes				····
11	Fees for services (non-employees):		1		
a	Management				
b	Legal				
C	Accounting		- -		
d e	Lobbying				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	2,745	2,745	0	0
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	+			· · · · · · · · · · · · · · · · · · ·
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				•
23	Insurance	1,236	1,236	0	C
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column	Ì			
	(A) amount, list line 24e expenses on Schedule O.)				
а	Programs for Residents	39,206	39,206	0	0
b					
C					
d	All al				
e	All other expenses Total functional expenses. Add lines 1 through 24e	39,206	39,206	0	0
25 26	Joint costs. Complete this line only if the	154,625	154,625	0	0
20	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)				

Pa	rt X				
		Check if Schedule O contains a response or note to any line in this Pa	rt X	<u> </u>	
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	35,690	1	38934
	2	Savings and temporary cash investments	6,737	2	6,742
	3	Pledges and grants receivable, net	0	3	
	4	Accounts receivable, net	0	4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			0
ts	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0		0
Assets	7	Notes and loans receivable, net	0	7	0
۲	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 0	,		
	b	Less: accumulated depreciation 10b 0	0	10c	0
-	11	Investments—publicly traded securities	241,344	11	187,500
•	12	Investments—other securities. See Part IV, line 11	0	12	0
-	13	Investments—program-related. See Part IV, line 11	0	13	0
-	14	Intangible assets		14	0
-	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	283,771	16	233,176
Ţ.	17	Accounts payable and accrued expenses	0	17	. 0
-	18	Grants payable	. 0	18	0
	19	Deferred revenue	0	19	0
2	20	Tax-exempt bond liabilities	0	20	0
2	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	0	21	0
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
lar.		disqualified persons. Complete Part II of Schedule L	0	22	0
~ 4	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third	. 0	24	0
		parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	0
	26	Total liabilities. Add lines 17 through 25	0	26	0
\top		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.			<u>v</u>
<u> </u>	27	Unrestricted net assets	··	27	
ğ 2	28	Temporarily restricted net assets		28	
; ;	29	Permanently restricted net assets		29	
Secretary of fully balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
2 3	30	Capital stock or trust principal, or current funds	0	30	0
ğ 3	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
Ž 3	32	Retained earnings, endowment, accumulated income, or other funds.	0		0
: دِ	33	Total net assets or fund balances	283,771	33	233,176
	34	Total liabilities and net assets/fund balances	283 771		233 176

Form 9	90 (2017)			P	age 12		
Par	XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI				. 🗸		
1	Total revenue (must equal Part VIII, column (A), line 12)	1			60,374		
2	Total expenses (must equal Part IX, column (A), line 25)	2		1	54,625		
3	Revenue less expenses. Subtract line 2 from line 1	3			5,749		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2	83,771		
5	Net unrealized gains (losses) on investments	5			C		
6	Donated services and use of facilities	6					
7	Investment expenses	7			Q		
8	Prior period adjustments				0		
9	Other changes in net assets or fund balances (explain in Schedule O)	· · · · · · · · · · · · · · · · · · ·					
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line						
	33, column (B))	10		2	33,176		
	Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	<u></u>			. D		
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 Schedule O.	plaın ın					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?				1		
	If "Yes," check a box below to indicate whether the financial statements for the year were comreviewed on a separate basis, consolidated basis, or both.	oiled or	75				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				.		
b	······································				✓		
	If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	ed on a					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			<u> </u>			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account	_	2c				
	If the organization changed either its oversight process or selection process during the tax year, ex	plaın ın					

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

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3b

Form **990** (2017)

9. 22.

SCHEDULE I (Form 990)

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

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

2017
Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990.

► Go to www irs.gov/Form990 for the latest information.

anization							Employer Identific	ation number
sidents' Association								14950
	on Grants and	Assistance						114000
election criteria used to nbe in Part IV the organi Grants and Other As	award the grants zation's procedur ssistance to Do	or assistance? res for monitoring mestic Organiz	the use of grant furations and Don	inds in the United	States.	the organization	on answered "Y	Yes No
and address of organization or government	(b) EIN	(c) IRC section (f applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)			Purpose of grant or assistance
				, <u></u>	 	· 		
						· · ·		
		,				,		
							.	
								
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				ine 1 table	L		· ·	0
	the organization maintalelection criteria used to note in Part IV the organication of the Association of the Part IV, line 21, find address of organization or government	General Information on Grants and the organization maintain records to subselection criteria used to award the grants into in Part IV the organization's procedur Grants and Other Assistance to Do 990, Part IV, line 21, for any recipient address of organization or government (b) EIN to the control of the c	General Information on Grants and Assistance the organization maintain records to substantiate the amou- election criteria used to award the grants or assistance? note in Part IV the organization's procedures for monitoring Grants and Other Assistance to Domestic Organiz 990, Part IV, line 21, for any recipient that received m and address of organization or government (b) EIN (c) IRC section (f) applicable) total number of section 501(c)(3) and government organiza	General Information on Grants and Assistance the organization maintain records to substantiate the amount of the grants or election criteria used to award the grants or assistance? note in Part IV the organization's procedures for monitoring the use of grant fur Grants and Other Assistance to Domestic Organizations and Don 990, Part IV, line 21, for any recipient that received more than \$5,000. Indiadress of organization (b) EIN (c) IRC section (f) applicable) To government (f) applicable) Grants and Other Assistance to Domestic Organizations and Don or government (f) applicable) Grants and Other Assistance to Domestic Organizations and Don organization (h) EIN (c) IRC section (f) applicable) Grants and Other Assistance to Domestic Organizations and Don organizations and Don organization (h) EIN (c) IRC section (f) applicable)	General Information on Grants and Assistance the organization maintain records to substantiate the amount of the grants or assistance, the election criteria used to award the grants or assistance? the in Part IV the organization's procedures for monitoring the use of grant funds in the United Grants and Other Assistance to Domestic Organizations and Domestic Government (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-cash assistance (c) IRC section (f) Amount of cash (e) Amount of non-cash assistance (d) Amount of cash (e) Amount of non-cash assistance (e) Amount of non-cash assistance (e) Amount of non-cash assistance (f) Applicable) (d) The control of the line of table to table to the line of table table to the line of table table to the line of table t	General Information on Grants and Assistance the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for election criteria used to award the grants or assistance? The in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if addition and address of organization [b] EIN [c] IRC section (fd Armount of cash grant or government or gov	General Information on Grants and Assistance the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or a selection criteria used to award the grants or assistance? nibe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization good, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is not not address of organization or government. (b) EIN (c) IRC section (f) Amount of cash grant (g) Amount of non-cash assistance or grant (g) Amount of non-cash assistance or grant (g) Operation (g) Amount of non-cash assistance or grant (g) Operation (g) Oper	General Information on Grants and Assistance the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and electron criteria used to award the grants or assistance? International Companization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Y 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Indicators of organization In Item (e) IFC section (fl applicable) In Item (e) IFC section (grant of non-cash assistance) In Item (e) IFC section (grant of non-cash assistance) In Item (e) IFC section (grant of non-cash assistance) In Item (e) IFC section (grant of non-cash assistance) In Item (e) ITEM (e) IFC section (grant of non-cash assistance) In Item (e) ITEM (

Schedule I (Form 990) (2017)

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

52-1514950

Department of the Treasury Internal Revenue Service Name of the organization

Edenwald Residents' Association

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection Employer identification number

Part III, Line 4d - Other program services include Hospitality Committee to welcome and assimilate new residents into the community;
Sponsor weekly non-denomination religious services; Communicating with bereaved and ill residents; Hosting monthly coffee and
conversations' meetings; Maintaining 24/7 coffee station to stimulate community feeling; Provide entertainment for New Year's Eve and other
occasions; Provide tools and equipment for residents to use in the wood shop, Accumulate archive material; Organize and fund Glee Club
and other similar activities: Maintain photo directory and biography of each resident: Residents are kept abreast of health issues.
Part VI, Line 6 - All residents are members of the Association by virtue of their residency.
Part VI, Lines 7a,b - Officers are elected by the members at the Annual Meeting of the Association.
Part VI, Lines 8a,b - Minutes are recorded contemoraneously by the Secretary, and Executive Committee minutes are made available for
public viewing after approval in the library. Copies of membership meetings are placed in each residents' mail box.
Part VI, Line 11b - Announcement is made at a regular Executive Committee meeting that the report is available to review.
Part VI, Line 19 - Documents, polices, and financials are not made available to the public. If published, they are only available to residents and
staff.
Part VIII, Line 1f - Contributions listed are made to the Association by residents for distribution to employees of the Edenwald Retirement
Community in lieu of tips or other gratuities in recognition of services rendered during the year.
Part XI, Line 9 - The amount represents a correction for a CD erroneously journalized twice.
Part XI, Line 9 - The amount represents a correction for a CD erroneously journalized twice.
Part XI, Line 9 - The amount represents a correction for a CD erroneously journalized twice.
Part XI, Line 9 - The amount represents a correction for a CD erroneously journalized twice.
Part XI, Line 9 - The amount represents a correction for a CD erroneously journalized twice.
Part XI, Line 9 - The amount represents a correction for a CD erroneously journalized twice.
Part XI, Line 9 - The amount represents a correction for a CD erroneously journalized twice.
Part XI, Line 9 - The amount represents a correction for a CD erroneously journalized twice.
Part XI, Line 9 - The amount represents a correction for a CD erroneously journalized twice.