

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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.

Inten	nat Reven	ue Service	P GO to www.iis.gov/i	onnesso for metructions a	ilu tile lates	CHITOTH	iauon.•		inspection		
A	For the	e 2017 ca	lendar year, or tax year beginning	7/1/2017	, and e	ending		0/201			
B	Check If	applicable	C Name of organization The Education	on Foundation of Baltimore	County Public	c Schoo	D Employer	ident	afication number		
\bigsqcup_{i}	Address	change	Doing business as				1				
	Name ch	ange	Number and street (or P O box if mail is r	not delivered to street address)	Room/suite		52-181920				
닏'	Name Ch	ialige	6901 N Charles St.	·	Bidg 'E'		E Telephone	numb	ber		
<u></u>	nıtıal reti	urn	City or town	State	ZIP code		(443) 809-6	198			
П	-inal return	v/terminated	Towson	MD	21204		(110,000				
二			Foreign country name Foreig	n province/state/county	Foreign postal	l code			070.040		
/	Amended	d return					G Gross rec	eipts \$	672,213		
П	Application	on pending	F Name and address of principal officer		_	H(a) is th	nis a group return	for subc	ordinates? Yes X No		
			Douglas W Eder, President 105 V	V Chesapeake Ave Suit	e B1/LTows	H(b) Ar	e all subordinate	es incli			
	ov ovom	npt status		◀ (insert no) 4947(a)(1)	1 - 1	1	"No," attach a lis				
					91 2 321	-		•	•		
<u>J V</u>	Vebsite	e: ► http	//www EducationFoundationBCPS	org	 	H(c) Gr	oup exemption	numbe T	er 🚩		
KF	orm of o	rganızatıon	X Corporation Trust Assoc	ciation Other >	L Yea	ar of form	ation 1992	M	State of legal domicile MD		
P	art I	Su	mmary		1						
	1		describe the organization's mission	or most significant activit	ies: To p	rovide	an opportun	ity fo	r community and		
Governance			te charitable giving in support of ed								
Jan			,								
ē	2	Chock	this box. Note the organization d	econtinued its operation	c or disposed	ರ್ಚಲ	oro 4hón 259	/ of i	its not assats		
Š	2	Numbo	this box ▶॑ if the organization di r of voting members of the governing	a body (Bort VII June 1e)	s or dispose	MEW	pie man 25.	2	115 1161 055615.		
∞ ა	3	Number	of understanding treatment and the government	y bouy (Part VI, lille Ta)			_	<u>3</u>	30		
Activities &	4	Tatala	r of independent voting members of umber of individuals employed in cal	the governing body (Far		Vioiv	0 6 ZOBB	5			
Ę	5	Total nu	imber of individuals employed in ca	iendar year 2017 (Part V	,iine [名] 山	1404	0 0 20.00	_	0		
cti	6		umber of volunteers (estimate if nec		·			6-			
⋖	7a		related business revenue from Part		1 • ()(Gi)	EN. U	-7a	0		
	b	Net unr	elated business taxable income fron	n Form 990-1, line 34	Land .			7b ·	0		
							Prior Year	0.40	Current Year		
ne	8		utions and grants (Part VIII, line 1h)			211	,946	5 203,384			
Revenue	9	-	n service revenue (Part VIII, line 2g)					0	10.070		
Š	10		nent income (Part VIII, column (A), li	•				,289			
. –	11		evenue (Part VIII, column (A), lines 5				,205				
<u>'</u>	12		venue—add lines 8 through 11 (must eg		ne 12)			,440			
,	13		and similar amounts paid (Part IX, c				325	302,409			
	14		s paid to or for members (Part IX, co		·	0					
S	15		, other compensation, employee benefit		s 5–10)	0					
Expenses	1		ional fundraising fees (Part IX, colur		.	0 (
ă	b		ndraising expenses (Part IX, columr		0				ì		
Ш	17		xpenses (Part IX, column (A), lines 1		.			,390			
			penses Add lines 13–17 (must equ		ne 25)		403	,053	413,683		
	19	Revenu	e less expenses. Subtract line 18 fro	om line 12				,613	-55,498		
Net Assets or Fund Balances	1	,			ļ	Beginn	ing of Current		End of Year		
set	20	Total as	sets (Part X, line 16)				1,029	_			
A P	21		bilities (Part X, line 26)					<u>,24</u> 9	67,790		
žž	22	Net asse	ets or fund balances Subtract line 2	,617	954,303						
Pa	rt II		nature Block								
			y, I declare that I have examined this return, in								
and b	elief, it is	s true, corre	ect, and complete Declaration of preparer (other		ormation of whi	ich prepa	irer has any kno I				
Sig	n		ynu & chomas	<u>, </u>				, (0/31/18		
Her		[Signature of officer		_		Date				
			Tricia L Thomas	 	Treas	surer					
			Type or print name and title	T2							
.		Print	t/Type preparer's name	Preparer's signature		Date		neck [PTIN If		
Paid -				SELF-PREPARED RET	IIRN			lf-emp			
	parer			IOCEL - I IVEL MINED IVET							
Use	Only		i's name				Firm's EIN				
		I Firm	's address ▶				Phone no				

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

	990 (2017)	The Education Foundation of Baltimore County Public Schools, Inc	32-1013200	Page Z
Pa	rt III	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly de	escribe the organization's mission		
	to suppo	rt enrichment of the Baltimore County Public Schools		
			. 	
2		organization undertake any significant program services during the year which were not listed on	[7] v	□
	•	Form 990 or 990-EZ? describe these new services on Schedule O	X Yes	No
3		organization cease conducting, or make significant changes in how it conducts, any program	□ v ₂₂	X No
	services		Yes	NO NO
		describe these changes on Schedule O	oo as moosuros	lbu
4	Describe	e the organization's program service accomplishments for each of its three largest program services. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and	allocations to oth	ore
		expenses, and revenue, if any, for each program service reported	anocations to oth	1013,
	tile total	expenses, and revende, if any, for each program service reported		
4a	(Code) (Expenses \$ 86,552 including grants of \$ 0) (Revenue	<u> </u>	<u> </u>
70	Instruction	onal initiative grants to baltimore County public schools	, ,	/
4b) (Expenses \$ 77,928 including grants of \$ 0) (Revenue		
	Awards a	and scholarship programs for baltimore County students		-
				-
			. .	
				
			· 	
		•••••••••••••••••••••••••••••••••••••••		
			,	
4c	(Code) (Expenses \$ 137,929 including grants of \$ 0) (Revenue	e \$)
	•	on Supplies, equipment & Services provided to schools		
		·	·	
			. 	
			·	
	O41	arram convece (Decembe in Cabadida O.)		
4d		ogram services (Describe in Schedule O)	0)	
40	(Expense	es \$ 0 including grants of \$ 0) (Revenue \$		

BADGIO

Part IV	Checklist of Required Schedules
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III .	8		X
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			.,
40	negotiation services? If "Yes," complete Schedule D, Part IV	9		_X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	$_{X}$	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
••	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	11a		Х
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			V
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	11b		X_
С	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	1		
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Χ
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		_X
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		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	120	^	
J	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Χ
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			.,
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	, ,	,	
10	on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17	X	
18	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		-	
	If "Yes," complete Schedule G, Part III	19		Χ

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Χ
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		.,	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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		Х
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	256		Х
26	990-EZ? If "Yes," complete Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	25b		
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Χ
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	21		
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Χ
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Χ
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	20-		v
29	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29		<u>х</u>
2 9 30	Did the organization receive more than \$25,000 in horizont contributions? If res, complete ocheque in			
	conservation contributions? If "Yes," complete Schedule M	30		Χ
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
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		v
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		X
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		_x_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
	III, or IV, and Part V, line 1	34		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled	35a		
	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			v
37	organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		X
Ji	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
		_	- DESIGN	

c Enter the amount of reserves on hand

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

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

_	The Education Foundation of Baltimore County Public Schools, Inc 52-18' Statements Regarding Other IRS Filings and Tax Compliance	9200	P	age 5
Pal ,	Check if Schedule O contains a response or note to any line in this Part V			
	,		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0	1		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1c		
_	gaming (gambling) winnings to prize winners?	10		
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
D	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		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country	l ,		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)	<u> </u>		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a_		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		 ^
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		-
6a	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		,	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Χ	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	-		
	required to file Form 8282? If "Yes " indicate the number of Forms 8282 filed during the year 7d	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		×
e	Did the organization receive any funds, directly of indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
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?	8		Х
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		Х
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter			
а	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]	1		ļ
11	Section 501(c)(12) organizations. Enter Gross income from members or shareholders 11a			
a b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
D	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans . 13b	1		-

14a

Part VI

The Education Foundation of Baltimore County Public Schools, Inc

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI

X

	Check it Schedule O Contains a response of hote to any line in this rait vi				<u> </u>
Sect	ion A. Governing Body and Management				
		, ,		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a <u>30</u>			
	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				
L	committee, explain in Schedule O	1b 30	,		
b	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 relati				
2	any other officer, director, trustee, or key employee?	Orisinp with	2	-	X
3	Did the organization delegate control over management duties customarily performed by or und	ler the direct	-		
J	supervision of officers, directors, or trustees, or key employees to a management company or of		3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 w		4		X
5	Did the organization become aware during the year of a significant diversion of the organization		5		X
6	Did the organization have members or stockholders?		6	$\neg \neg$	X
7a	Did the organization have members, stockholders, or other persons who had the power to elect	or appoint		\neg	
	one or more members of the governing body?		7a		Х
ь	Are any governance decisions of the organization reserved to (or subject to approval by) memb	ers,			
-	stockholders, or persons other than the governing body?	•	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions underta	iken during		Ì	
	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	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be				
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule C		9		X
Sect	ion B. Policies (This Section B requests information about policies not required by the li	nternal Revenue Co	ode)	1	
			40.	Yes	No
	Did the organization have local chapters, branches, or affiliates?	ab abantara	10a		Χ_
D	If "Yes," did the organization have written policies and procedures governing the activities of sur affiliates, and branches to ensure their operations are consistent with the organization's exempt		10b		
44.	Has the organization provided a complete copy of this Form 990 to all members of its governing body before		11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	illing the form.	11a	^	1
12a			12a		\overline{x}
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	e rise to conflicts?	12b		
	Did the organization regularly and consistently monitor and enforce compliance with the policy?				
•	describe in Schedule O how this was done	•	12c		
13	Did the organization have a written whistleblower policy?		13		Х
	Did the organization have a written document retention and destruction policy?		14	Х	
	Did the process for determining compensation of the following persons include a review and approximation of the following persons in the following persons i	proval by	· 1		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	on and decision?			
а	The organization's CEO, Executive Director, or top management official .		15a		X
b	Other officers or key employees of the organization		15b	_	<u> </u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		•		ļ
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arra	angement		.	
	with a taxable entity during the year?	-1	16a	\dashv	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to ev		,		
	participation in joint venture arrangements under applicable federal tax law, and take steps to set the expansion of expansion of the expansio	aieguaid	16b		
2006	the organization's exempt status with respect to such arrangements?		100		
<u> 17</u>	List the states with which a copy of this Form 990 is required to be filed MD	· · · · · · · · · · · · · · · · · · ·			
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and	990-T (Section 501/c)(3)s	onlv)	
	available for public inspection. Indicate how you made these available. Check all that apply	. (550,1011 551)	,,,,,,,	,/	
		plaın ın Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing document		policy	, and	
	financial statements available to the public during the tax year				
20	State the name, address, and telephone number of the person who possesses the organization		•		
	Patrick Fannon, CPA	(443) 809-6198			
	6901 Charles Street Towson MD 21204				

52-1	01	റാ	$\wedge \wedge$
n/-	വ	97	w

Form 990 (2017)

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

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

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

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 nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Average hours per week (list any hours for related organizations below dotted box unless person is both an officer and a director/trustee) box unless person is both an officer and a director/trustee) Officer and a director/trustee) Former of individual in institutional		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations				
(1) Mick Rayburn	1 00							-		_
Director	0 00	Х								
(2) Danielle Alderson	1 00									
Director	0 00	Х								
(3) Shayla Myers	1 00									
Director	0 00	Х								
(4) Richard Huffman III	1 00									
Director	0 00	Х								
(5) William Caltrider	1 00									
Director	0 00	X								
(6) Scott Dorsey	1 00									
Director	0 00		ļ							
(7) Christine Crawford	1 00	1								
Director	0 00									
(8) David Garbarino	1 00	1								
Director	0 00		_							
(9) Kevin Healey	1 00	•								
Director	0 00									
(10) Olivia Jacobsen	1 00									
Director	0 00									
(11) Jason Plotkin	1 00									
Director	0 00		$ldsymbol{ldsymbol{ldsymbol{eta}}}$							
(12) Cindy Jones	1 00	1								
Director	0 00		_	ļ						
(13) Keith Riddle	1 00	1								
Director	0 00		_							
(14) Nancy Grasmick	1 00									
Director	0 00	<u> </u>			L	<u> </u>				·

Part VII	Section A. Officers, Directors, 1	iusiees, ney Li	iipio	yee	3, a	iiu	<u>myn</u>	esi	Compensated	Lilipioye	-e3 (cc	ininaeu)	
•	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er an	Pos neck ss pe	erson	e than on the thick that the thick that the thick the th	an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Report compens from rel organizz (W-2/1099	able sation lated itions	(F) Estimate amount other compensa from the organizate and relate	of ition e ion ed
(15) Karen (Grannas	1 00											
Director		0 00	Х										
(16) Lisa Ha	thaway	1 00	_								-		
Director		0 00	x										
(17) Gary ha	armon	1 00											
Director		0 00	X										
(18) Kristin I	Huber	1 00										-	
Director		0 00	x										
(19) Paul Hu	ıme	1 00											
Director		0 00	1										
(20) Pat Isaa	ac	1 00							`				
Director	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	0 00	1	Ì									
(21) Brando	n McMann	1 00	_		_								
Director		0 00	1										
(22) Paula N	Miller	1 00											
Director	***************************************	0 00	1										
(23) Douglas	s Eder	1 00											
Past Presider		0 00			x								
	Ruppersberger	1 00											
	nt Communications	0 00			x								
(25) Alvın Ka		1 00											_
Asst Treasur		0 00			х								
1b Sub-tot								•	0		0		0
	om continuation sheets to Part VII,	Section A						•	0		0		0
	add lines 1b and 1c)							•	0		0		0
	imber of individuals (including but not	limited to those	listed	dab	ove) wł	no red	ceiv	ed more than \$	100.000 d	of		
	ble compensation from the organizatio				0	,			•	•			
											•	Yes	No
3 Did the	organization list any former officer, di	rector, or trustee	e, key	y en	nplo	yee	, or h	igh	est compensate	d	[
	ee on line 1a? If "Yes," complete Sche		-		-	•		•	·		ľ	3	Х
	individual listed on line 1a, is the sum anization and related organizations gre tal											4	X
	person listed on line 1a receive or accices rendered to the organization? If "									ndividual		5	X
	ndependent Contractors												
1 Comple	te this table for your five highest composation from the organization Report of											n's tax	·
	(A) Name and business add	iress							(B) Description of ser	vices	c	(C) ompensation	
None													0
													0

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

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

0 0

Form 990 (2017) The Education Foundation of Baltimore County Public Schools, Inc. 52-1819200 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) (B) (D) Related or Unrelated Total revenue Revenue excluded from exempt business function revenue tax under sections revenue 512-514 3,206 1a Federated campaigns 1a Contributions, Gifts, Grants and Other Similar Amounts 1b 0 b Membership dues 1c 0 c Fundraising events 1d 0 d Related organizations e Government grants (contributions) 1e 0 f All other contributions, gifts, grants, and similar amounts not included above 1f 200,178 g Noncash contributions included in lines 1a-1f \$ 203,384 Total. Add lines 1a-1f **Business Code** Program Service Revenue 0 ٥ 0 0 f All other program service revenue 0 0 Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 29,554 Income from investment of tax-exempt bond proceeds 0 0 5 Royalties (ı) Real (II) Personal 6a Gross rents b Less rental expenses 0 c Rental income or (loss) d Net rental income or (loss) 0 (i) Securities (II) Other 7a Gross amount from sales of assets other than inventory 167,789 b Less cost or other basis and sales expenses 156,471 0 11,318 c Gain or (loss) 11,318 d Net gain or (loss) Other Revenue 8a Gross income from fundraising events (not including \$ 7,752 of contributions reported on line 1c) See Part IV. line 18 271,486 а 157,557 **b** Less direct expenses c Net income or (loss) from fundraising events 113,929 9a Gross income from gaming activities See Part IV, line 19 0 **b** Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances а 0 b Less cost of goods sold 0 c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 0 11a

.....

All other revenue

Total. Add lines 11a-11d

Total revenue. See instructions

0

0

0

0

358,185

Part IX

Secti	on 501(c)(3) and 501(c)(4) organizations must complete a	Il columns All other	r organizations mus	st complete column	(A)
	Check if Schedule O contains a response or note	e to any line in this l	Part IX .		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations			•	• •
	domestic governments See Part IV, line 21	224,481	224,481		
2	Grants and other assistance to domestic				
	ındıvıduals See Part IV, line 22	77,928	77,928		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16	. 0			
4	Benefits paid to or for members	0			-
5	Compensation of current officers, directors,				
	trustees, and key employees	0		0	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			<u>-</u>
10	Payroll taxes	0			
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
С	Accounting	0			·
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column	-			
	(A) amount, list line 11g expenses on Schedule O)	. 0		0	
12	Advertising and promotion	0			
13	Office expenses	58,586	- <u>-</u> -	58,586	
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel .	5,170		5,170	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	. 0			
19	Conferences, conventions, and meetings	34,920		34,920	
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0	0	
23	Insurance	744		744	
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)			1	
а	Administrative supplies	7,615		7,615	
b	State registration & Filing fee	200		200	
С		0			
d	Marketing and telecomm	4,039		4,039	
е	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	413,683	302,409	111,274	
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				
	following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 148,960 1 71,421 Cash-non-interest-bearing 2 25,580 8,871 2 Savings and temporary cash investments 3 1,500 0 3 Pledges and grants receivable, net 이 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, 5 trustees, key employees, and highest compensated employees Complete Part II of Schedule L ol 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 0 6 0 7 Notes and loans receivable, net 0 8 8 Inventories for sale or use 10.000 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a ol 10c 0 b Less accumulated depreciation 10b 829,210 890.648 11 Investments—publicly traded securities 11 32,944 32,825 12 Investments—other securities See Part IV, line 11 12 13 Investments—program-related See Part IV, line 11 ol 13 0 14 0 14 Intangible assets 15 0 15 Other assets See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34) 1,022,093 1,029,866 16 16 49.749 17 67,790 17 Accounts payable and accrued expenses 18 Grants payable 18 19 2,500 19 Deferred revenue 20 20 Tax-exempt bond liabilities 0 0 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L ol 22 0 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties ol 24 0 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 52,249 26 67.790 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ► | X | and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 431,458 27 384,556 484,774 28 508,362 Temporarily restricted net assets 28 61,385 Permanently restricted net assets 29 61,385 Organizations that do not follow SFAS 117 (ASC958), check here and complete lines 30 through 34. 30 ol Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 0 31 0 32 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 977,617 33 954,303

Total liabilities and net assets/fund balances

1,022,093

1,029,866

34

Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI	_				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		358	3,185	
2	Total expenses (must equal Part IX, column (A), line 25)	2		413	3,683	
3	Revenue less expenses Subtract line 2 from line 1	3		-55	5,498	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		977,617		
5	Net unrealized gains (losses) on investments	5		32	<u>2,184</u>	
6	Donated services and use of facilities	6				
7	Investment expenses .	7				
8	Prior period adjustments .	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10		954	<u>,303</u>	
Part				ı	_	
	Check if Schedule O contains a response or note to any line in this Part XII		1			
				Yes	No	
1	Accounting method used to prepare the Form 990		-			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O					
			2a		l X	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		Za		-	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both					
					ĺ	
	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 audited on a					
	separate basis, consolidated basis, or both				ĺ	
	X Separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	nt of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	_X_		
	If the organization changed either its oversight process or selection process during the tax year, explain	ın		l		
	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		<u> </u>	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	990	(0047)	

Continuation Sheet for Form 990

Page 1 of

Name of the Organization

The Education Foundation of Baltimore County Public Schools, Inc.

Employer identification number

52-1819200

Part VII Section A Continuation of Off			rus	ster	25.			plovees, and	Highest	
Compensated Emp	•	13, 1	ı u.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	· (C)		ipioyooo, aiia	goct	
(A)	(B)			- 11	C)_			(D)	(E)	(F)
Name and title	Average	Posit	tion (chec	k all	that ap	ply)	Reportable	Reportable	Estimated
-	hours per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(26) Jamie Bakert	1 00							-		
Secretary	0 00			X		<u> </u>				
(27) Joe Harsel	2 00									
Vice President Advancement	0 00			X						
(28) Gary Berger	2 00									
1st Vice President	0 00	<u></u>		Х		ļ				
(29) Tim Bojanowski	4 00		_							
President	0 00			Х						
(30) Tricia Thomas	3 00									
Treasurer	0 00			Х						
(31) Patrick Fannon	3 00									
Controller	0 00				Х					
(32) Debborah Phelps	40 00	_								
Francisco Director	0 00				Х					
(33) Laura lemon	40 00	_								
Associate Director	0 00	•			х					
(34)			_							
(35)										
(36)										
(37)										
(38)										
(39)										
(40)										
(41)										
(42)										
(43)										
(44)										
(45)										
(46)										

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Inspection

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number Name of the organization 52-1819200 The Education Foundation of Baltimore County Public Schools, Inc.

Pa		Reason for Public Char			mplete th	is part)	See instructions		
		anization is not a private founda							
1	Ŭ	A church, convention of church						\sim	
2	Ī	A school described in section	170(b)(1)(A)(ii). (A	Attach Schedule E (Fo	rm 990 oı	990-EZ)) <i>[</i>	//	
3	F	A hospital or a cooperative ho					\ /		
4	\vdash	A medical research organization). Enter the	
•		hospital's name, city, and state		,				, 	
5		An organization operated for the section 170(b)(1)(A)(iv). (Con	he benefit of a colle	ege or university owne	d or oper	ated by a	governmental unit	described in	
6		A federal, state, or local gover	nment or governme	ental unit described in	section '	170(b)(1)((A)(v).		
7	X	X 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)							
8		A community trust described in	n section 170(b)(1))(A)(vi). (Complete Pa	art II)				
9		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 college or university							
10	An organization that normally receives (1) more than 33 1/3% 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 33 1/3% 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.)								
11		An organization organized and	l operated exclusive	ely to test for public sa	afety See	section	509(a)(4).		
12	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								
а	a 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.								
b		Type II. A supporting organ control or management of the organization(s) You must	he supporting orgai	nization vested in the	ction with same per	its suppo sons that	rted organization(s) control or manage), by having the supported	
С		Type III functionally integrits supported organization(s	rated. A supporting	organization operate You must complete	d in conne e Part IV.	ection with Sections	n, and functionally ii a. A. D. and E.	ntegrated with,	
d		Type III non-functionally integ	ntegrated. A support	orting organization operation generally must s	erated in d atisfy a di	connectio stribution	n with its supported requirement and ar	organization(s) n attentiveness	
_		requirement (see instruction Check this box if the organi						Tyne III	
е		functionally integrated, or T	vpe III non-function	ally integrated suppor	rting orga	nization	sa type i, type ii,	Type III	
f		Enter the number of supported		, , , , , , , , , , , , , , , , , , , ,				0	
g		Provide the following information					· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	(1)	Name of supported organization	(n) EIN	(III) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
					Yes	No			
(A)									
(B)									
(C)									
(D)									
(E)									
Tota	1						0	, 0	

Page 2

Schedule A (Form 990 or 990-EZ) 2017 The Education Foundation of Baltimore County Public Schools, Inc.

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	275,596	96,429	519,443	211,946	203,384	1,306,798	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0	
3	The value of services or facilities furnished by a governmental unit to the organization without charge	127,135	136,556	141,947	195,885	324,638	926,161	
4 5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on	402,731	232,985	661,390	407,831	528,022	2,232,959	
	line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.000.050	
6	Public support. Subtract line 5 from line 4						2,232,959	
	tion B. Total Support	(a) 2012	(h) 2014	(2) 2015	(4) 2016	(a) 2017	(f) Total	
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017		
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	402,731 95,265	232,985 57,435	661,390 13,571	407,831 12,386	528,022 29,554	2,232,959	
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0		0	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	98,020	135,588	98,516	163,058	121,682	616,864	
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (s First five years. If the Form 990 is for the oroganization, check this box and stop here		econd, third, fourth	n, or fifth tax year a	s a section 501(c)	12 (3)	3,058,034	
Sec	tion C. Computation of Public Sup	pport Percenta	ge					
	Public support percentage for 2017 (line 6, c Public support percentage from 2016 Sched			f))		14 15	73 02% 76 68%	
	 33 1/3% support test—2017. If the organization qualifies as 33 1/3% support test—2016. If the organization 	s a publicly supporte ation did not check :	ed organization a box on line 13 oi	r 16a, and line 15 is			►X	
	box and stop here. The organization qualifies as a publicly supported organization a 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line							
	15 is 10% or more, and if the organization r Explain in Part VI how the organization meet supported organization	neets the "facts-an	d-circumstances"	test, check this bo	x and stop here.		▶ □	
18	Private foundation. If the organization did rinstructions	ot check a box on l	line 13, 16a, 16b,	17a, or 17b, check	this box and see		▶	

OCITO	duic A (Folim 555 of 555 LLZ) 2517 THE Luuck		or barring of	21.16) 1 ab.10 00110	, , , , , , , , , , , , , , , , , , ,		2.7454
Pa	rt III Support Schedule for Orga	anizations Des	cribed in Sect	ion 509(a)(2)			
	(Complete only if you checke	ed the box on lir	ne 10 of Part I	or if the organiz	ation failed to	qualify under Pag	ţulî 💮
	If the organization fails to qu						
Sec	tion A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise				/	ľ	
	sold or services performed, or facilities furnished in any activity that is related to the					ĺ	
	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						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						(
6	Total. Add lines 1 through 5	0	0	0	0	0	(
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						
С	Add lines 7a and 7b	0	0	0	0	0	
8	Public support (Subtract line 7c from	•				٠,	,
	line 6)	٠,	_/		,		
	tion B. Total Support	(-) 0040	/ (1) 2044	(-) 2045	(4) 2016	(2) 2017	(f) Total
_	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	/0	0	0		0	
10a	Gross income from interest, dividends,	/					
	payments received on securities loans, rents,	/					,
	royalties, and income from similar sources	 / 					<u>'</u>
D	Unrelated business taxable income (less	/					
	section 511 taxes) from businesses	/					(
_	acquired after June 30, 1975	/ 0	0	0	0	0	
	Add lines 10a and 10b Net income from unrelated business	/				4	
11	activities not included in line 10b, whether						
	or not the business is regularly carried on						(
12	Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI)						(
13	Total support. (Add lines 9, 10c, 11,	-					
	and 12)	ol	0	0	0	l ol	(
14	First five years. If the Form 990 is for the o	rganization's first, s	econd, third, fourt			(3)	
	organization, check this box and stop here			•			▶□
Sec	tion C. Computation of Public Su	pport Percenta	ae				
	Public support percentage for 2017 (line 8, o			(f))		15	0 00%
	Public support percentage from 2016 Sched			.,,		16	0 00%
	ction D. Computation of Investmen				<u> </u>		
17	Investment income percentage for 2017 (line			olumn (f))		17	0 00%
18	Investment income percentage from 2016 S					18	0 00%
	33 1/3% support tests—2017. If the organi			4, and line 15 is m	ore than 33 1/3%.		
4	not more than 33 1/3%, check this box and						▶ [
b	33 1/3% support tests—2016. If the organi					33 1/3%, and	_
	line 18 is not more than 33 1/3%, check this						▶□
20	Private foundation. If the organization did	not check a box on	line 14, 19a, or 19	b, check this box a	and see instruction	s	▶ _

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 Part V)

Section A. All Supporting Organizations

Seci	ion A. Ali Supporting Organizations		\ <u>-</u>	N
			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			
	class or purpose, describe the designation If historic and continuing relationship, explain	1		<u> </u>
2	Did the organization have any supported organization that does not have an IRS determination of status			1
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			<u></u>
	organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
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	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)			1
·	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
40	Was any supported organization not organized in the United States ("foreign supported organization")? If			
44	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
1_	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	- T a		
b				
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion	4b	—	
	despite being controlled or supervised by or in connection with its supported organizations	40		
C	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			1
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			لــــ
	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			1
	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)	<u>5a</u>		
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?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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.	6		
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			
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
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)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	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 .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			1
D	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
_	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			-
С	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
40-		36		
iua	Was the organization subject to the excess business holdings rules of section 4943 because of section			1
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated	10-	—	—
_	supporting organizations)? If "Yes," answer 10b below	10a		
þ	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	46:		
	determine whether the organization had excess business holdings)	10b		l

	The Education Foundation of Sammer County I date Controlle, the			ugu u
Part	IV Supporting Organizations (continued)		Voc	No
	lles the second of the fellowing masses		res	NO
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	١ ،		
а	below, the governing body of a supported organization?	11a	 	-
h	A family member of a person described in (a) above?	11b	•	
b	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	•	
	ion B. Type I Supporting Organizations	1110	L	
Sect	on B. Type 1 Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	Γ.	,	140
,	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		; '	
	controlled the organization's activities if the organization had more than one supported organization,			١.
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	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	-		\vdash
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carned out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		
Secti	ion C. Type II Supporting Organizations			
Occi	on o. Type ii oupporting 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	1.		
	the supported organization(s)	1	-	
Secti	ion D. All Type III Supporting Organizations			
0001	on but it you in outporting 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			ĺ
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			ĺ
	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			ĺ
	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			ĺ
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			١.
	supported organizations played in this regard	3		
Secti	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 in	struc	tions)
a	The organization satisfied the Activities Test Complete line 2 below	0		,
_				
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	struci	tions
2	Activities Test Answer (a) and (b) below.		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,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		i
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	-		İ
	reasons for the organization's position that its supported organization(s) would have engaged in these	<u>-</u>		
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	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		

The Education Foundation of Baltimore County Public Schools, Inc. 52-1819200

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgar	nizations	
. 1 Check here if the organization satisfied the Integral Part Test as a qualify	ıng t	rust on Nov 20, 1970 (exp	laın in Part VI) See
instructions. All other Type III non-functionally integrated supporting org	anız	ations must complete Sect	ions 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	0	0
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	0	0
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	0	0
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	0	0
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by 035	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount		,	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		. 0
2 Enter 85% of line 1	2		0
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		0
4 Enter greater of line 2 or line 3	4		0
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		0
7 Check here if the current year is the organization's first as a non-functional	ally ii	ntegrated Type III supporti	ng organization (see
instructions)			

Part '	Type III Non-Functionally Integrated 509(a)(3)	Supporting Organiza	tions (continued)	
Section	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e	xempt purposes		
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organ	ızatıons	
	Amounts paid to acquire exempt-use assets			
	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			0
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI) See instructions			
9	Distributable amount for 2017 from Section C, line 6			0
10	Line 8 amount divided by line 9 amount			0 000
		(3)	(ii)	(iii)
Se	ction E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions	Distributable
		Excess Distributions	Pre-2017	Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			0
	Underdistributions, if any, for years prior to 2017			
2	(reasonable cause required—explain in Part VI) See			
	Instructions			
3	Excess distributions carryover, if any, to 2017			
а		0		
b	From 2013 0			
	From 2014 0			
	From 2015 0			
	From 2016 0			
	Total of lines 3a through e	0		
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			0
i	Carryover from 2012 not applied (see instructions)			
i	Remainder Subtract lines 3g, 3h, and 3i from 3f	0		
4	Distributions for 2017 from			
	Section D, line 7 \$ 0			
a	Applied to underdistributions of prior years		0	
	Applied to 2017 distributable amount			0
	Remainder Subtract lines 4a and 4b from 4	0		
5	Remaining underdistributions for years prior to 2017, 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 2017 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 2018. Add lines 3j			
•	and 4c	0		
8	Breakdown of line 7		-	
a	Excess from 2013 0			
<u>a</u>	Excess from 2014 0			
	Excess from 2015 0			
d d	Excess from 2016 0	· · · · · · · · · · · · · · · · · · ·		
	Excess from 2017 . 0			
_				

Schedule A (Fo	orm 990 or 990-EZ) 2017	The Education For	undation of Baltim	ore County Public	Schools, Inc	52-1819200	Page 8
Part VI	Supplemental Info	rmation. Provide the				a or 17b, Part	
		Section A, lines 1, 2,					
•		rt IV, Section C, line					
		line 1, Part V, Sectio				in v, section E,	
	lines 2, 5, and 6 Al	so complete this part	for any additiona	information (See	instructions)		
5	D. 40.11.4						
Part II Sect	ion B Line 10 Net rev	enue from events	• • • • • • • • • • • • • • • • • • • •				
	••••		· • • • • • • • • • • • • • • • • • • •			· • • • • • • • • • • • • • • • • • • •	
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							-

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Name	of the organization		Employ	ver identification number			
The E	ducation Foundation of Baltimore County Put	lic Schools, Inc		52-1819200			
Part	Organizations Maintaining Donor	Advised Funds or Other Sir	milar Funds or	Accounts.			
	Complete if the organization answere	d "Yes" on Form 990, Part I\	/, line 6				
		(a) Donor advised funds		(b) Funds and other accounts			
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)			<u></u>			
4	Aggregate value at end of year			<u> </u>			
5	Did the organization inform all donors and do						
	funds are the organization's property, subject			Yes No			
6	Did the organization inform all grantees, done						
	used only for charitable purposes and not for		or advisor, or for				
	purpose conferring impermissible private ben	efit?.	<u> </u>	Yes No			
Part							
	Complete if the organization answere						
1	Purpose(s) of conservation easements held to						
	Preservation of land for public use (e g ,			nistorically important land area			
	Protection of natural habitat	P	reservation of a	certified historic structure			
	Preservation of open space						
2	Complete lines 2a through 2d if the organizat	ion held a qualified conservation	n contribution in t	the form of a conservation			
	easement on the last day of the tax year			Held at the End of the Tax Year			
а	Total number of conservation easements			2a			
b	Total acreage restricted by conservation ease			2b			
С	Number of conservation easements on a cert			2c			
d	Number of conservation easements included		id not on a	ایما			
	historic structure listed in the National Regist	er Annualanad salanad askumassus	abad artarminat	2d Lead by the accompation during			
3	Number of conservation easements modified	transferred, released, extinguis	sned, or terminat	ed by the organization during			
4	the tax year ▶	onconvation easement is located	⊣ ▶				
4 5	Does the organization have a written policy re			adling of			
3	violations, and enforcement of the conservati		, mopeonon, nan	☐ Yes ☐ No			
6	Staff and volunteer hours devoted to monitoring, in		l enforcina conserv				
•	>	,	3	•			
7	Amount of expenses incurred in monitoring, inspec	ting, handling of violations, and enfo	orcing conservation	easements during the year			
	▶ \$		•				
8	Does each conservation easement reported	on line 2(d) above satisfy the red	quirements of se	ction 170(h)(4)(B <u>)(i)</u>			
	and section 170(h)(4)(B)(ii)?			Yes No			
9	In Part XIII, describe how the organization re						
	balance sheet, and include, if applicable, the		ization's financia	I statements that describes			
	the organization's accounting for conservation						
Part	III Organizations Maintaining Collect			r Similar Assets.			
	Complete if the organization answere						
1a	If the organization elected, as permitted under						
	works of art, historical treasures, or other sim						
	of public service, provide, in Part XIII, the tex						
b	If the organization elected, as permitted under works of art, historical treasures, or other sim						
	of public service, provide the following amour		non, education, (or research in futule affice			
	(i) Revenue included on Form 990, Part VIII,			▶ \$			
	(ii) Assets included in Form 990, Part X	mie i		► \$ ► \$			
2	If the organization received or held works of	ort historical treasures or other	similar assets fo	or financial gain, provide the			
-	following amounts required to be reported un						
а	Revenue included on Form 990, Part VIII, line		.g to those holls	▶ \$			
	Assets included in Form 990. Part X			▶ \$			

Part	III Organizations Maintaining (Collections of Ar	t, Histori	cal Trea	asures, or	Other	Similar Assets	s (continued)	
3	Using the organization's acquisition, a	accession, and othe	r records,	check a	ny of the foll	lowing	that are a signific	ant use of its	
	collection items (check all that apply)								
а	Public exhibition		d	Loan	or exchange	progra	ams		
b	Scholarly research		e \square	Other					
С	Preservation for future generati	ons							
4	Provide a description of the organizat		d evolain h	now they	further the	ornaniz	ation's exempt n	urnose in Part	
~	XIII	ion a collections and	и схрівії і	iow tricy	iditiici tiic t	organiz	ation's exempt p	arpooc arr are	
5	During the year, did the organization	solicit or receive do	nations of	art histo	orical treasu	res or	other similar		
•	assets to be sold to raise funds rathe							Yes No	
Dart	IV Escrow and Custodial Arrar				· •				
rail	Complete if the organization a		Form 90	∩ Part	IV line 9 c	or reno	rted an amount	on Form	
	990, Part X, line 21	inswered res on	11 01111 00	o, rait	14, 1110 0, 0	л торо	rica an amoun		
1a	Is the organization an agent, trustee,	custodian or other i	ntermedia	ry for co	ntributions o	r other	assets not		
10	included on Form 990, Part X?	custodian of other i	memedia	1 101 00	110000000000000000000000000000000000000	, 00,101		Yes No	
b	If "Yes," explain the arrangement in P	art XIII and comple	te the folio	wing tab	ole				
~		and and comple		9			,	Amount	
С	Beginning balance					1	С	(
d	Additions during the year					1	d		
е	Distributions during the year .					1	е		
f	Ending balance					1	f	(
2a	Did the organization include an amou	nt on Form 990. Pa	rt X, line 2	1, for es	crow or cust	todial a	ccount liability?	Yes X No	
b	If "Yes," explain the arrangement in P								
Part		arry m one or nor	THE CHIE						
Lait	Complete if the organization answered "Yes" on Form 990, Part IV, line 10								
	Complete ii the organization a	(a) Current year	(b) Prior	,	(c) Two years	s back	(d) Three years back	(e) Four years back	
1a	Beginning of year balance	89,388	(-,	79,581		33,196	84,94		
b	Contributions	00,000		1,625		0	50		
c	Net investment earnings, gains,	-		.,,					
-	and losses	7,380		9,772		-1,295	4	11,200	
d	Grants or scholarships	3,935		1,590		2,320	2,30		
е	Other expenditures for facilities		-						
	and programs								
f	Administrative expenses								
g	End of year balance	92,833	_	89,388		79,581	83,19	84,949	
2	Provide the estimated percentage of t	the current year end	balance	(line 1g,	column (a))	held as	3		
а	Board designated or quasi-endowmer		<u>%</u>						
b	Permanent endowment	65%							
С	Temporarily restricted endowment	35%							
_	The percentages on lines 2a, 2b, and	•					-4		
3a	Are there endowment funds not in the	possession of the	organizati	on that a	ire neid and	admini	stered for the	Yes No	
	organization by							3a(i) X	
	(i) unrelated organizations							3a(ii) X	
b	(ii) related organizations If "Yes" on line 3a(ii), are the related of	organizatione lieted	ac require	d on Scl	hadula R2			3b	
4	Describe in Part XIII the intended use							<u> </u>	
Part	-		ii 3 Cildow	inent iai	143			 .	
rait	Complete if the organization a		Form 99	n Part	IV line 11a	See	Form 990 Part	X line 10	
	Description of property	(a) Cost or oth			st or other		Accumulated	(d) Book value	
	Description of property	(investme			s (other)		depreciation	(u) book value	
1a	Land .	· · · · · · · · · · · · · · · · · · ·	0		0	 			
b	Buildings		0		0	+	0		
C	Leasehold improvements		o		0		o	(
d	Equipment		o		0	 	0		
e	Other .	-	ol		0		0	0	
	. Add lines 1a through 1e (Column (d)	must equal Form 9	90, Part X	, columi	n (B), line 10)c)	•	(

Page 3

Part VII	Investments—Other Securities.			
	Complete if the organization answe	red "Yes" on Form 990	, Part IV, line 11b See Forn	n 990, Part X, line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v Cost or end-of-year	
(1) Financia	l derivatives	0		
(2) Closely-h	held equity interests	0		
(3) Other				
(<u>B</u>)				
				· · ·
				_ ,
(H)	n (b) must equal Form 990, Part X, col (B) line 12)	0		
Part VIII	Investments—Program Related.			
Part VIII	Complete if the organization answer	red "Ves" on Form 990	Part IV line 11c See Forn	n 990 Part X line 13
			(c) Method of v	
	(a) Description of investment	(b) Book value	Cost or end-of-year	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 13) ▶	0		
Part IX	Other Assets.			
	Complete if the organization answe	<u>red "Yes" on Form 990</u>	, Part IV, line 11d See Forn	
	(a) Do	escription		(b) Book value
(1)				
(2)				
(3)				
(4)	··· ·			
(5)				<u> </u>
(6)			······································	
(8)				
(9)	nn (b) must equal Form 990, Part X, col (B) line	2 15)	-	C
Part X	Other Liabilities.	, 10)	<u></u>	1
TaitA	Complete if the organization answe	red "Yes" on Form 990	Part IV line 11e or 11f Se	e Form 990 Part X
	line 25	ica ica oni oni ado	, raitiv, interreor in oc	C i omi ooo, i dit x,
1.	(a) Description of liability	(b) Book value		
	I income taxes	0		
(2)	· mostrio taxoo			
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 25)	0		
2. Liability for	runcertain tax positions. In Part XIII, provide th	e text of the footnote to the o	organization's financial statements	that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Schedule D (Forr	m 990) 2017	The Education Foundation of Baltimore County Public Schools, Inc.	52-1819200	Page 5
Part XIII	Supplen	nental Information (continued)		
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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

Go to www irs gov/Form990 for the latest instructions

OMB No 1545-0047

Open to Public

Employer identification number

52-1819200 The Education Foundation of Baltimore County Public Schools, Inc. Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17 Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply X Mail solicitations Solicitation of non-government grants а Solicitation of government grants X Internet and email solicitations b g X Special fundraising events X Phone solicitations C X In-person solicitations d Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, 2a key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (v) Amount paid to (III) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) (or retained by) (ii) Activity custody or control of from activity fundraiser listed in or entity (fundraiser) contributions? organization col (I) No Yes 1 0 2 0 0 0 0 0 0 0 5 0 0 0 6 0 0 0 7 0 0 0 0 0 0 0 10 0 0 0 0 Total 0 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Schedule G (Form 990 or 990-EZ) 2017 The Education Foundation of Baltimore County Public Schools, Inc. 52-1819200 Page **2** Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b List

	events with gross rece	eipis greater than \$5,00	<u> </u>		
		(a) Event #1 Golf Event	(b) Event #2 State of Schools	(c) Other events NONE	(d) Total events (add col (a) through col (c))
	•	(event type)	(event type)	(total number)	
1	Gross receipts	110,138	169,100	0	279,238
2	Less Contributions	7,752		0	7,752
	minus line 2)	102,386	169,100	0	271,486
4	Cash prizes			0	0
5	Noncash prizes			0	0
6	Rent/facility costs	6,158	27,669	0	33,827
7	Food and beverages	13,292	52,199	0	65,491
8	Entertainment			0	0
9	Other direct expenses	6,416	51,823	0	58,239
10				>	(157,557) 113,929
				Part IV. line 19. or rec	
			, , , , , , , , , , , , , , , , , , , ,	, ,	
		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
1	Gross revenue				0
2	Cash prizes				0
3	Noncash prizes				0
4	Rent/facility costs				0
5	Other direct expenses				0
6	Volunteer labor	Yes <u>%</u> No	Yes % No	Yes %	
7	Direct expense summary Ad	ld lines 2 through 5 in col	umn (d)	•	(0)
8	Net gaming income summar	Subtract line 7 from line	e 1, column (d)	. ▶	0
E	nter the state(s) in which the o	rganization conducts gam	ning activities		
	"No," explain		n each of these states?		Yes No
	Vere any of the organization's ç "Yes," explain	gamıng licenses revoked,	suspended, or terminate	ed during the tax year?	Yes No
	3 4 5 6 7 8 9 10 11 Int III 2 3 4 5 6 7 8 E Is If I I I I I I I I I I I I I I I I I	1 Gross receipts 2 Less Contributions 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary Act Net income summary Subtration (line) Subtrati	Cash prizes Cash prizes	Golf Event (gevent type) 1 Gross receipts 1 10,138 169,100 2 Less Contributions 3 Gross income (line 1 minus line 2) 1 102,386 1 102,386 1 169,100 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs 6 Rent/facility costs 7 Food and beverages 1 3,292 5 2,199 8 Entertainment 9 Other direct expenses 10 Direct expenses summary Add lines 4 through 9 in column (d) Net income summary Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, than \$15,000 on Form 990-EZ, line 6a (a) Bingo (b) Pull tabs/instant bingo/progressive bingo 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Were any of the organization icensed to conduct gaming activities in each of these states? If "No," explain	(e) Event #1 Golf Event (lowent type) 1 Gross receipts 1 10,138 1 169,100 2 Less Contributions 3 Gross income (line 1 minus line 2) 1 Cash prizes 5 Noncash prizes 6 Rent/facility costs 6 Rent/facility costs 7 Food and beverages 1 3,292 5 2,199 0 Other direct expenses summary Add lines 4 through 9 in column (d) 1 Not income summary Subtract line 10 from line 3, column (d) 1 Noncash prizes (e) Other direct expenses 0 Other direct expenses 0 Other direct expenses 0 Other direct expenses (e) Bingo (i) Pull labelinistant bingo/progressive bingo (c) Other gaming (e) Direct expenses 1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 1 Yes % Yes % Yes % No No 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Subtract line 7 from line 1, column (d) 8 Net gaming income summary Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities a Is the organization licensed to conduct gaming activities a Is the organization incensed to conduct gaming activities a Is the organization incensed to conduct gaming activities a Is the organization incensed to conduct gaming activities a Is the organization incensed to conduct gaming activities a Is the organization incensed to conduct gaming activities in each of these states? Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

Sched	ule G (Form 990 or 990-EZ) 2017 The Education Foundation of Baltimore County Public Schools, Inc	<u>52-</u>	181920	00 Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	s No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?		Yes	s 🔲 No
13	Indicate the percentage of gaming activity conducted in			
а	The organization's facility	13a		<u>%</u>
b	An outside facility	13b_		<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	i		
	Name ▶	· 		·
	Address ▶	. 	 -	· • • • • • • • • • • • • • • • • • • •
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	[Yes	s 🔲 No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$0 and the			
	amount of gaming revenue retained by the third party ► \$0			
С	If "Yes," enter name and address of the third party			
	Name ▶			
	Address ▶			
16	Gaming manager information			
	Name ▶			
	Gaming manager compensation ► \$0			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions			-
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	г	_	
	retain the state gaming license?	Į	Yes	s 🗌 No
D	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$			0
Part				
	- CCC MONIGORIONO			
				
				

SCHEDULE (Form 990)

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.

▶ Attach to Form 990.

Employer identification number

► Go to www.irs.gov/Form990 for the latest information. Department of the Treasury Internal Revenue Service Name of the organization

The Education Foundation of Baltimore County Public Schools, Inc	52-1819200	
Part I General Information on Grants and Assistance		
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	assistance, and	[
the selection criteria used to award the grants or assistance?	× Yes	ž

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Baltimore County Public Schools . 6901 N Charles St Towson, MD 212d	52-6000886		224,481				various educational projects
Enter total number of section 501(c)(3) and government organizal Enter total number of other organizations letted in the line 1 tables	501(c)(3) and	government organi	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	ie 1 table		A 4	7
מיווטבו טו סמוכיו ס	galiikaiioi is	ופת ווו חופ וווופ י ימר	ום				-

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

Schedule I (Form 990) (2017)

52-1819200

Page 2

The Education Foundation of Baltimore County Public Schools, Inc

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

Schedule I (Form 990) (2017)

Part III

(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) (d) Amount of noncash assistance 77,928 (c) Amount of cash grant Part III can be duplicated if additional space is needed 47 (b) Number of recipients (a) Type of grant or assistance Scholarships Part IV 2 9 ~ က

Schedule I (Form 990) (2017)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

The Education Foundation of Baltimore County Public Schools, Inc	52-1819200
Form 990, Part VI, Section B, Line 11b The completed form 990 is reviewed with the Foundation	on
treasueerand executive committee and is made available to all board members upon request	
Form 990, Part VI, Section C, Line 19. The foundation web site indicates that the financial	
statements and governing documents are available upon request. Additionally, the 990 tax	
return is filed with the maryland secretary of State's office and is available on-line from	
their web site	
	·····
	
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Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization	Employer identification number
The Education Foundation of Baltimore County Public Schools, Inc	52-1819200
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