DLN: 93493132015040 OMB No 1545-0047 Return of Organization Exempt From Income Tax 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 Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019 D Employer identification number B Check if applicable CHESAPEAKE BAY FOUNDATION INC □ Address change 52-6065757 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 6 HERNDON AVENUE ☐ Amended return ☐ Application pending (410) 268-8816 City or town, state or province, country, and ZIP or foreign postal code ANNAPOLIS, MD $\,\,$ 214034503 $\,\,$ G Gross receipts \$ 37,372,192 Name and address of principal officer H(a) Is this a group return for William C Baker ☐Yes **☑**No subordinates? 6 HERNDON AVENUE H(b) Are all subordinates ANNAPOLIS, MD 214034503 ☐ Yes ☐No ıncluded? **✓** 501(c)(3) ☐ 501(c)() **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW CBF ORG L Year of formation 1966 M State of legal domicile Summary 1 Briefly describe the organization's mission or most significant activities The Chesapeake Bay Foundation's (CBF) mission is to Save the Bay See Schedule O Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 30 4 29 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 277 **6** Total number of volunteers (estimate if necessary) 6 68,962 Total unrelated business revenue from Part VIII, column (C), line 12 -53,353 **b** Net unrelated business taxable income from Form 990-T, line 34 -54,053 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 26,494,920 26,413,351 Ravenua 1,547,757 9 Program service revenue (Part VIII, line 2g) . 1,441,813 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 7,210,445 1,720,575 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 93,478 155,290 35,240,656 29,836,973 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 410,531 310,585 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 15,097,699 16,934,684 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . 549,931 658,327 b Total fundraising expenses (Part IX, column (D), line 25) ▶3,616,546 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 10,434,571 11,376,725 26,492,732 29,280,321 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 8,747,924 Revenue less expenses Subtract line 18 from line 12 . 556,652 Net Assets or Fund Balances Beginning of Current Year End of Year 118,702,708 116,825,477 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 8,751,620 7,198,868 22 Net assets or fund balances Subtract line 21 from line 20 . 108,073,857 111,503,840 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign Here William C Baker President Type or print name and title Print/Type preparer's name Preparer's signature Check 🔲 ıf P00288314 Paid self-employed Firm's EIN ► 52-1392008 Preparer Use Only Firm's address ► 4550 MONTGOMERY AVE SUITE 800N Phone no (301) 951-9090 BETHESDA, MD 208142930 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2018)					Page 2						
Pa	rt III Statement	of Program Servi	ce Accomplis	hments								
	Check If Sche	dule O contains a resp	onse or note to	any line in this Part III		🗹						
1		organization's mission		•								
The 0	Chesapeake Bay Found	dation's (CBF) mission,	simply stated, is	s to Save the Bay See	Schedule O for Continuation (page	e 51)						
2	Did the organization undertake any significant program services during the year which were not listed on											
	the prior Form 990 or 990-EZ?											
	If "Yes," describe the	If "Yes," describe these new services on Schedule O										
3	Did the organization cease conducting, or make significant changes in how it conducts, any program											
	services?											
	If "Yes," describe these changes on Schedule O											
4	Section 501(c)(3) an		ons are required	to report the amount	largest program services, as mea of grants and allocations to others							
	(Code) (Expenses \$	13,100,700	including grants of \$	295,886) (Revenue \$	507,517)						
	See Additional Data											
4b	(Code) (Expenses \$	6,776,722	ıncludıng grants of \$	14,699) (Revenue \$	1,040,240)						
	See Additional Data											
4c	(Code) (Expenses \$	3,207,278	ıncludıng grants of \$) (Revenue \$)						
	See Additional Data											
4d	Other program servi	ces (Describe in Sched	ule O)									
	(Expenses \$	ınc	luding grants of	\$) (Revenue \$)						
4e	Total program serv	vice expenses ▶	23,084,7	00								

Par	tIV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 💆	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥞	2	Yes	
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 2	3		No
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	Yes	
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		No
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	6		No
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	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III".	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
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	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 💆	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 2	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 📆	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17	Yes	_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
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	Yes	
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		No
		-	orm 99 6	(2018)

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Part	Checklist of Required Schedules (continued)			
			Yes	No
	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	Yes	
	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	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
	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		No
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒	29	Yes	
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
4	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		No
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
Ь	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Par				
	Check if Schedule O contains a response or note to any line in this Part V	<u>. </u>		
			Yes	No

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

1b

1c

Yes

7b

7с

7e

7f

7g

7h

8

9a

9h

12a

13a

14a

14b

15

No

No

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7d |

10a

10b

11a

11b

12b

13b

13c

Yes

Nο

No

No

If "Yes," did the organization notify the donor of the value of the goods or services provided?

e Did the organization receive any funds, directly or 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? . . .

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a 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.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

d If "Yes," indicate the number of Forms 8282 filed during the year

Sponsoring organizations maintaining donor advised funds.

a 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

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 501(c)(7) organizations. Enter

Section 501(c)(12) organizations. Entera Gross income from members or shareholders .

Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file

Part		" respo	onse to i	ines
	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			✓
Sec	tion 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 30			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 29			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a ·	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	

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			V	NI -
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	e.)	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
а	The governing body?	8a	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
6	Did the organization have members or stockholders?	6		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No

7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	_	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	∍.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,		Yes	
b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	10b		
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990	10b	Yes	

b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
Ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			

Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	∍.)	
			Yes	No
0a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
3	Did the organization have a written whistleblower policy?	13	Yes	
1	Did the organization have a written document retention and destruction policy?	14	Yes	
5	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
7	List the States with which a copy of this Form 990 is required to be filed AL , AR , CA , FL , GA , HI , IL , KS , KY , NH , NJ , NM , NY , NC , OR , PA , RI , SO WI			
8	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			

13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed AL , AR , CA , FL , GA , HI , IL , KS , KY , N , NH , NJ , NM , NY , NC , OR , PA , RI , SC WI			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			

16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
	status with respect to such an angements?	16b	
Se	ction C. Disclosure		
17	List the States with which a copy of this Form 990 is required to be filed AL , AR , CA , FL , GA , HI , IL , KS , KY , M , NH , NJ , NM , NY , NC , OR , PA , RI , SO WI		
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply		
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)		
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest 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's books and records David Fogle 6 HERNDON AVENUE ANNAPOLIS, MD 214034503 (410) 268-8816		
		F	orm 990 (2018)

101111 330 (2	010)										Page /
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	≘ ın t	hıs	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	ıstees, Key E	mploy	ees	, an	d F	lighe	st (Compensated En	nployees	
year .	this table for all persons requir of the organization's current of		·						, ,		•
of compensa	tion Enter -0- in columns (D), (if the organization's current key	E), and (F) if no	compe	nsatı	on w	vas į	paid		- ,,		
• List the who received	organization's five current high direportable compensation (Box and any related organizations	est compensate	d emplo	yees	(oth	ner t	than a	n off	icer, director, truste	e or key employee)	1
• List all o	of the organization's former office compensation from the organization						pensat	ed e	employees who rece	ived more than \$10	0,000
	f the organization's former dir e , more than \$10,000 of reportat										e
compensated	in the following order individual demployees, and former such p	ersons									
☐ Check tl	nis box if neither the organization	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	Т
	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	one bo oth a direct	ox, un off tor/t	t cho unles ficer rust	and a	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MI3C)	(W- 2/1099- MISC)	related organizations
See Additiona	al Data Table										

PO Box 64271 Baltimore, MD 212644271

Page **8**

Par	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)														
	(A) Name and Title	(B) Average hours per week (list any hours for related	Position than o	on (do	(C) o not ox, u an off tor/t	t che unles fficer trust	neck mo ess pers r and a tee)	ore son	Repo compo froi organiz	(D) ortable ensation m the ration (W	v-	(E) Reportable compensation from related organizations (\) 2/1099-MISC		Estima amount o compens from organizati	ated of other sation the
		organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/109	, - MI3C		2/1099-MISC)		relat organiza	ed
See	Additional Data Table				T	T	<u> </u>	\vdash							
				\vdash		\vdash									
		+		\vdash	 	\vdash	+	+-'			+		+		
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			<u> </u>	$oxed{oxed}$	<u> </u>	igspace		'					\perp		
			l'												
		1						\Box							
c T	Sub-Total	•				,	•	<u>—</u>		:27.640			0		**** 220
2	Total (add lines 1b and 1c) Total number of individuals (including of reportable compensation from the	g but not limited	to thos				e) who	rec		497,649 re than	\$100		<u> </u>		111,229
														Yes	No
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule 3</i>			tee, ke	•		oyee, c	or hi	ghest cor	mpensat	ed e	mployee on	3		No
4	For any individual listed on line 1a, is organization and related organization individual											the • • •	4	Yes	
5	Did any person listed on line 1a receiv services rendered to the organization									tion or II	ndıvı •	dual for	5		No
Se	ection B. Independent Contract	ors			_	_		_							
1	Complete this table for your five high from the organization Report comper	nsation for the c										s tax year	npen		
		(A) and business addre	ess							D	escrij	(B) otion of services		(C Comper	sation
The P	roduction Advantage Inc	_	_		_	_	_	_		Mass Pro	ducti	on Printing		1	,337,768
Oak H	3 Park Center Rd Suite 15 hill, VA 20171 baud Inc									Software	Imp	ementation			594,729
РО Во	ox 930256 ca, GA 311930256									5010	***·F	officiació			35 1,1 = 5
	onfire Red									Media Co	nsult	ants			419,722
	Clarendon Blvd 925 ton, VA 22201														
	tified Ventures LLC									Environm	nenta	l Consultants			401,366
	Connecticut Ave 10FL ington, DC 20009						_								
SC&H	Group Inc									IT Consu	Itants	5			221,259

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 15

		Statement of	Povonuo										Pag	je 9
Part	VIII	Check if Schedul		respo	onse or r	note to anv	line in t	his Part VIII					🗆]
		5.166N N C6116EE		,			((A) revenue	Re e fu	(B) lated or xempt inction		(C) Jnrelated business revenue	(D) Revenue excluded fror tax under section	
	1 a	Federated campaig	ns	1a		309,630			re	evenue			512 - 514	
nts ints		• Membership dues	Ļ	1b										
3ra nou		· : Fundraising events	Ļ	1c		867,528								
Š, (An		d Related organizatio	Ļ	1d										
ia Ia		Government grants (c	Ļ	1e		1,568,624								
ıs,			Ĺ											
Contributions, Gifts, Grants and Other Similar Amounts	f All other contributions, gifts, grants, and similar amounts not included above 1f 23,667,569					23,667,569								
풀질	9	Noncash contribution In lines 1a - 1f \$	ons included	1,!	501,317									
ar Co		— h Total. Add lines 1a	-1f			.		26,413,351						
						Business		20,413,331	T				<u> </u>	
ગાન	2a	Tuition and Education					900099	1,0	40,240	1,04	0,240			
Program Service Revenue		Farm Income						2	40,156	24	0,156			
υ Œ	_	Contract Income					900099	2	24,448	22	4,448			
rwc	_	Workshop Income					900099		42,913	4	2,913			
Š	u						900099							
ran	е			-										
₹og	f	All other program se	rvice revenue			1 5	I 547,757							
4	g	Total. Add lines 2a–2	2f		>	1,-	147,737							
		Investment Income (I			ınterest,	and other]	874,930	0			-53,353	928	,283
		imilar amounts) . Income from investm	ond proc	eeds 🕨										
						. •		16,82	1				16	,821
		•	(ı) Real		(11)	Personal								
	6a	Gross rents												
	b	Less rental expenses	31	. 1, 174 0			1							
	c	Rental income or	31	1,174			1							
	_	(loss)					_							
	d	Net rental income o						311,17	4				311	,174
	7 -	Gross amount	(ı) Securiti	es	(11)	Other	-							
	/ d	from sales of assets other than inventory	assets other than inventory			50,75	7							
	b	Less cost or other basis and sales expenses	7,06	0,595		64,683	7							
	c	Gain or (loss)	85	9,575		-13,930	5							
	d	Net gain or (loss) .				>	1	845,64	5				845	,645
ne	8a	Gross income from f (not including \$	867,528 c											
듄		contributions reporte See Part IV, line 18		а	}	159,607								
Re	b	Less direct expense	s	Ь		409,937	1							
e	c	Net income or (loss)	from fundraisi	ng ev	ents .	· •		-250,330	0				-250	,330
Other Revenue	9a	Gross income from g See Part IV, line 19												
	h	Less direct expense	ıc	a b			-							
		Net income or (loss)			L		_							
		Gross sales of invent												
		returns and allowand	ces		ļ									
	.			a			-							
		Less cost of goods s		Ь										
		Net income or (loss) Miscellaneous		nveni		ess Code								
	11	a Miscellaneous			240	900099	9	51,149	9				51	,149
	b	Settlement fee incor	me		-	900099	+	13,48	7				13	,487
		- Settlement ree income												
	c	Credit card rebate			 	900099	•	12,989	9				12	,989
		- · · - - • • •												
	d	All other revenue .			 		+				\vdash			
	e	Total. Add lines 11a	-11d		·	>								
	12	Total revenue. See	Instructions					77,62			\vdash			
					- •	-		29,836,97	3	1,547,757	'	-53,353	1,929	

Forr	n 990 (2018)				Page 10
	art IX Statement of Functional Expenses				
Sect	cion $501(c)(3)$ and $501(c)(4)$ organizations must complete all co	_		elete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX .			<u> ⊔</u>
Do 7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	310,585	310,585		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	795,414	228,486	367,035	199,893
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	11,330,086	9,472,975	670,819	1,186,292
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	391,882	326,919	23,073	41,890
9	Other employee benefits	3,492,622	2,810,339	286,710	395,573
10	Payroll taxes	924,680	728,143	88,100	108,437
11	Fees for services (non-employees)				
ē	Management				
ŀ	Legal	88,378	50,800	19,905	17,673
c	: Accounting	112,000		112,000	
c	i Lobbying	253,250	253,250		
€	Professional fundraising services See Part IV, line 17	658,327			658,327
f	Investment management fees	230,400		230,400	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,086,260	1,860,031	201,842	24,387
12	Advertising and promotion	183,788	155,824	9,891	18,073
13	Office expenses	3,414,613	2,709,835	137,345	567,433
14	Information technology	880,489	642,655	112,998	124,836
15	Royalties				
16	Occupancy	353,606	326,565	10,714	16,327
17	Travel	534,874	431,768	70,402	32,704
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	365,376	289,816	36,219	39,341
20	Interest	206,182	155,510	29,446	21,226
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,476,128	1,303,415	86,343	86,370
23	Insurance	398,971	323,633	51,757	23,581
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount				

525,861

64,772

60,511

24,124

117,142

29,280,321

2,656,108

486,417

49,424

60,511

7,443

100,356

23,084,700

1,986,090

19,245

3,508

11,323

2,579,075

20,199

11,840

16,681

5,463

3,616,546

Form **990** (2018)

670,018

exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Check here ▶ ☑ If following SOP 98-2 (ASC 958-720)

expenses on Schedule O)

a Repairs & Maintenance

b Memberships & dues

c Stipends & honoraria

d Donated Goods

e All other expenses

Form 990 (2018)

15

16

17

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33

34

Liabilities 22

Fund Balance

Assets or 30

Net

Other assets See Part IV, line 11 . . .

Grants payable . .

Deferred revenue

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Accounts payable and accrued expenses .

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

Total liabilities. Add lines 17 through 25 . .

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

Capital stock or trust principal, or current funds

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

Retained earnings, endowment, accumulated income, or other funds

Total assets.Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

		(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing	6,573	1	5,169
2	Savings and temporary cash investments	16,158,113	2	14,854,719
3	Pledges and grants receivable, net	12,356,999	3	12,943,327
4	Accounts receivable, net	810,911	4	806,285
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9)		6	

	6	Part II of Schedule L	fied pe n 4958 ations o (see in	rsons (as defined under s(c)(3)(B), and of section 501(c)(9) structions) Complete		6	
Assets	7	Notes and loans receivable, net			82,635	7	
SS	8	Inventories for sale or use				8	
۹	9	Prepaid expenses and deferred charges			429,400	9	583,305
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	51,140,519			
	b	Less accumulated depreciation	10b	21,005,194	30,320,433	10c	30,135,325
	11	Investments—publicly traded securities .			28,788,527	11	31,177,524
	12	Investments—other securities See Part IV, line	11 .	27,629,029	12	27,960,880	
	13	Investments—program-related See Part IV, line	e 11 .			13	
	14	Intangible assets				14	

236.174

118.702.708

1,885,152

1.208.962

3,059,272

1.045.482

7.198.868

34.235.332

30,757,721

46.510.787

111,503,840

118,702,708

Form **990** (2018)

242.857

116.825.477

2,315,171

1.199.252

3,667,355

327,222

1,242,620

8.751.620

36.206.381

25,446,564

46.420.912

108,073,857

116,825,477

15

16

17

18

19

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21

22 23

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31 32

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34

3a

3b

Yes

Yes (2018)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

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

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

EIN: 52-6065757

Name: CHESAPEAKE BAY FOUNDATION INC

Form 990 (2018)

Form 990, Part III, Line 4a: Environmental Protection and Restoration (EPR)The Environmental Protection and Restoration Department's primary objective is to drive significant improvements in the health of the Chesapeake Bay as measured by CBF's Bay Health Index Consistent with the CBF strategic plan, this involves developing and recommending priorities for the organization's policy work, engaging our members and implementing restoration elements of the plan. The Program utilizes a combination of strategies to help achieve a reduction in Bay pollution, restoration of critical habitat, and better-managed fisheries. See Schedule O for Continuation (page 51)

Education CBF's Education Department is responsible for leading students, teachers, and adults in hands-on, on-the-water, environmental education experiences about the Bay Through education programs, our professional educators use innovative teaching methods to engage students in real-world issues and scientific inquiry, exciting and

Form 990, Part III, Line 4b:

encouraging them to take action to protect our natural resources. Student Leadership courses during the summer further train student leaders from high schools across the region. See Schedule O for Continuation (page 52)

Form 990, Part III, Line 4c: CommunicationsThe Communications Department's charge is to market CBF and its policy agenda, educate and engage the public, and mobilize support for organizational

priorities and Bay restoration efforts. Communications also manages internal communications and public opinion research. See Schedule O for Continuation (page 53)

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other week (list person is both an officer from the from related compensation and a director/trustee) from the any hours organization organizations

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours	and	a dir	ecto	or/tr	ustee)	}	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
William C Baker President	40 00	×		х				236,014	0	22,008	
Harry T Lester Chair	4 00	×		х				0	0	0	
Jane P Batten Vice Chair	2 00	х		х				0	0	0	
Carolyn Groobey	4 00			V				0	0	0	

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Chair
Jane P Batten
Vice Chair
Carolyn Groobey
Vice Chair (through 01/19)

Arnold I Richman

R Bruce Bradley

George L Bunting Jr

W Russell G Byers Jr

Keith D Campbell

Trustee (through 01/19)

Michael J Chiaramonte

Vice Chair

Trustee

Trustee

Trustee

Trustee

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the compensation from related any hours and a director/trustee) organization organizations from the

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
Thomas M Davis III Trustee	1 00	×						0	0	0
Robert S Evans Trustee	1 00	х						0	0	0
Harry S Gruner Trustee	4 00	х						0	0	0
Ann Fritz Hackett Trustee (through 01/19)	1 00	×						0	0	0
Michael J Hanley Trustee	1 00	Х						0	0	0

Ann Fritz Hackett
Trustee (through 01/19)
Michael J Hanley

Christian Hodges

Trustee

Trustee

Trustee

Otis S Jones

Ann D Horner

Mark J Hourigan

Trustee (through 01/19)

Jeanne Trimble Hoffman

Trustee (beginning 01/19)

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	6			•			(14, 2/4,000	1 (1) 2/1000	organization and related organizations	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)		
Robert A Kınsley II Trustee	1 00	×					0	0	0	
Burks B Lapham Trustee	1 00	х					0	0	0	
Katie Z Leavy Trustee	4 00	×					0	0	0	
Pamela B Murphy Trustee	1 00	×					0	0	0	
Devan B Ogburn	1 00	х					0	0	0	

Pamela B Murphy
Trustee
Devan B Ogburn
Trustee

Elizabeth Oliver-Farrow

Trustee

Trustee

Mark S Ordan

Anna R Pauletta

Ann Pelham

Trustee (beginning 01/19)

Trustee (beginning 01/19)

Trustee (through 07/18)

Anne B Shumadine

and Independent Contractors

and Independent Contractors (A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other person is both an officer from the week (list from related compensation

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours					ustee)		organization	organizations	from the organization and related organizations	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)		
J Sedwick Sollers III Trustee	4 00	х						0	0	0	
Sandra E Taylor Trustee	1 00	х						0	0	0	
Preston M White Trustee (beginning 01/19)	1 00	х						0	0	0	
Susan P Wilmerding Trustee	1 00	х						0	0	0	
Peter L Woicke Trustee (through 10/18)	1 00	×						0	0	0	
Stephen M Wolf Trustee (beginning 01/19)	1 00	х						0	0	0	

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145,603

189,277

168,212

149,286

5,678

13,586

7,486

6,812

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Susan P Wilmerding
Trustee
Peter L Woicke
Trustee (through 10/18)

William A Agee III

Chief Financial Officer

Katharene P Snavely

Thomas W Ackerman

Vice President-Education

Vice President - Development

Secretary

David A Fogle

......

and Independent Contractors (C) (A) (B) Name and Title Position (do not check more Average

Darcelle H Wilson

Director - Development

hours per

	week (list any hours for related organizations below dotted line) week (list any hours for related organizations below dotted line) person is both an o and a director/trus Officer Institutional Trustee	pers	both	n an	office		from the organization	from related organizations	compensation from the
		Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations			
Robert J Beach Vice President - Communications	40 00				х		147,407	0	22,042
Jon A Mueller Vice President - Litigation	40 00				х		200,008	0	7,275
Alison H Prost Executive Director, Maryland	40 00				х		135,089	0	21,454

40 00

......

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

than one box, unless

Χ

(D)

Reportable

compensation

126,753

(E)

Reportable

compensation

(F)

Estimated

amount of other

4,888

SCHEDUL Form 990 or 90EZ)		Complete if the o	Charity Statu rganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) e mpt charitable 990 or Form 99	organization or trust. 90-EZ.	a section	2018	
epartment of the T ternal Revenue Se ame of the oi	F3.102	► Go to	www.irs.gov/Forms	990 for the late	est information	Employer identific	Open to Public Inspection	
HESAPEAKE BAY	FOUNDATION IN	IC					acion namber	
Part I Re	eason for P	ublic Charity Stat	us (All organization	s must comple	ete this part.) S	52-6065757 See instructions.		
ne organization	n is not a priva	ate foundation because	e it is (For lines 1 thro	ugh 12, check o	nly one box)			
1	hurch, conven	tion of churches, or as	ssociation of churches	described in sec	tion 170(b)(1)	(A)(i).		
2	chool describe	d in section 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 9	990 or 990-EZ))			
A h	ospital or a co	operative hospital ser	vice organization desci	nbed in section	170(b)(1)(A)(iii).		
nar	ne, city, and s	tate	ed in conjunction with	·			· 	
	-	perated for the benefi Complete Part II)	t of a college or univei	rsity owned or of	perated by a gov	ernmental unit descri	bed in section 170	
		,	governmental unit de	scribed in sectio	on 170(b)(1)(A)(v).		
		hat normally receives (1)(A)(vi). (Complete	a substantial part of it Part II)	s support from a	ı governmental u	nıt or from the gener	al public described ii	
A c	ommunity trus	st described in sectio i	170(b)(1)(A)(vi)	(Complete Part I	Ι)			
	An agricultural research organization described in 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.							
fror Inv	m activities rel estment incom	lated to its exempt fur	(1) more than 331/3% octions—subject to certiess taxable income (leading)	taın exceptions,	and (2) no more	than 331/3% of its si	ipport from gross	
•			d exclusively to test for	r public safety S	See section 509	(a)(4).		
□ mo	re publicly sup	ported organizations	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se	ction 509(a)(2). See section 509(a		
Typ org	p e I. A suppor anization(s) th	ting organization oper	ated, supervised, or co	ontrolled by its s	upported organiz	zation(s), typically by		
ma	nagement of t		ervised or controlled in ation vested in the san and C.					
			supporting organization ions) You must com				ited with, its	
l ☐ Typ	pe III non-fu ctionally integ	nctionally integrate rated The organizatio	d. A supporting organi n generally must satis rt IV, Sections A and	zation operated fy a distribution	in connection wi requirement and	th its supported organ		
	•	•	ved a written determir	•		pe I, Type II, Type II	I functionally	
_		pe III non-functionally pported organizations	integrated supporting	organization	·			
			ipported organization(1			1 (2)	
	me of supported (ii) EIN (iii) Type of organization (described on lines 1- 10 above (see instructions))			(v) Amount of monetary support (see instructions)	(vi) Amount of other support (se instructions)			
				Yes	No			
tal							-	
	Reduction A	Act Notice, see the I	nstructions for	Cat No 11285	5F •	Schedule A (Form 9	1 90 or 990-F7) 201	

(b)(1)(A)(ix)

supported organization

instructions

Schedule A (Form 990 or 990-EZ) 2018

Page 2

III. If the organization fails to qualify under the tests listed below, please complete Part III.)								
Section A. Public Support								
Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total		
Gifts, grants, contributions, and membership fees received (Do not	19,527,320	22,603,162	20,937,874	26,494,920	26,413,351	115,976,627		

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part

	(or fiscal year beginning in) ▶	(4) 2017	(B) 2013	(0) 2010	(u) 2017	(e) 2010	(I) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	19,527,320	22,603,162	20,937,874	26,494,920	26,413,351	115,976,627
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	19,527,320	22,603,162	20,937,874	26,494,920	26,413,351	115,976,627
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column						6,844,034

Public support. Subtract line 5 from line 4

109,132,593

S	ection B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	19,527,320	22,603,162	20,937,874	26,494,920	26,413,351	115,976,627
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	820,571	1,442,649	834,067	1,230,371	1,256,278	5,583,936
9	Net income from unrelated business activities, whether or not the business is regularly carried on					0	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	14,526	59,339	24,860	35,729	77,625	212,079
11	Total support. Add lines 7 through 10						121,772,642
12	Gross receipts from related activities,	etc (see instruction	ons)			12	8,435,164

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,

Section C. Computation of Public Support Percentage

14 89 620 %

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))

15

90 220 %

15 Public support percentage for 2017 Schedule A, Part II, line 14

16a 33 1/3% support test-2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test-2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

▶□ box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test-2018. 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

10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.

Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Р	Part III Support Schedule for Organizations Described in Section 509(a)(2)							
	(Complete only if you c						ler Part II. If	
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	pelow, please co	omplete Part II.)		
30	Calendar year		43.554.5		413.004-		(0) =	
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received (Do not include any "unusual grants")							
2	Gross receipts from admissions,							
_	merchandise sold or services							
	performed, or facilities furnished in							
	any activity that is related to the							
_	organization's tax-exempt purpose Gross receipts from activities that are							
3	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 The value of services or facilities							
5	furnished by a governmental unit to							
	the organization without charge							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and							
_	3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified							
	persons that exceed the greater of							
	\$5,000 or 1% of the amount on line							
	13 for the year							
С	Add lines 7a and 7b							
8	Public support. (Subtract line 7c							
	from line 6)							
36	ection B. Total Support Calendar year			I	1		1	
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total	
9	Amounts from line 6							
10a	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties and							
b	income from similar sources Unrelated business taxable income							
D	(less section 511 taxes) from							
	businesses acquired after June 30,							
	1975							
C	Add lines 10a and 10b							
11	Net income from unrelated business							
	activities not included in line 10b, whether or not the business is							
	regularly carried on							
12								
	loss from the sale of capital assets							
	(Explain in Part VI)							
13	Total support. (Add lines 9, 10c, 11, and 12)							
14	First five years. If the Form 990 is for	r the organization	ı 's fırst, second, tl	nird, fourth, or fift	:h tax vear as a se	ction 501(c)(3) c	rganization.	
	check this box and stop here	3	, ,	, ,	,	(), ()	• □	
Se	ection C. Computation of Public	Support Perce	ntage				<u> </u>	
15	Public support percentage for 2018 (lin			column (f))		15		
16	Public support percentage from 2017 S					16		
	ection D. Computation of Investi					1 1		
<u> </u>	Investment income percentage for 201			line 13, column (f	·))	17		
18	Investment income percentage from 2	•		,	••	18		
	331/3% support tests—2018. If the		·	on line 14 and lin	ne 15 is more than		ne 17 is not	
							_	
	more than 33 1/3%, check this box and s							
b	33 1/3% support tests—2017. If the	-			•		_	
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anization	▶⊔_	
20	Private foundation. If the organization	on did not check a	box on line 14, 1	.9a, or 19b, check	this box and see	instructions	▶ □	

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of 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

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 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 Did the organization have any supported organization that does not have an IRS determination of status under section 509

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

3а 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 Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported

organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a

amendment to the organizing document) 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? Substitutions only. Was the substitution the result of an event beyond the organization's control?

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6

7

8

answer line 10b below

the organization had excess business holdings)

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

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 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 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 Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

9b which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	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	11 c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to 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, 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 organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting			
	organization	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
_	<u> </u>			
	ection D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		103	-140
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations		l	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions)		
	The organization satisfied the Activities Test Complete line 2 below	•		
	b			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test Answer (a) and (b) below.	į	Yes	No
	a 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		
	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 reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement			
,		2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	_		
	a 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	3h		

Page 6

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

4

Schedule A (Form 990 or 990-F7) 2018

Enter greater of line 2 or line 3

Schedule A (Form 990 or 990-EZ) (2018)

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines.

a Excess from 2014. **b** Excess from 2015. **c** Excess from 2016.

See instructions

d Excess from 2017.e Excess from 2018.

3_j and 4c

8 Breakdown of line 7

Additional Data

Software ID: Software Version:

EIN: 52-6065757

Name: CHESAPEAKE BAY FOUNDATION INC

Page 8

Schedule A (Form 990 or 990-EZ) 2018

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part

Part VI
Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

SCHEDULE C

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

EZ)

(Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

DLN: 93493132015040

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

	 Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B 									
	Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts 1-A and C below. Do not complete Part 1-B Section 527 organizations. Complete Part 1-A only.									
		n Form 990, Part IV, Line 4, or Form 9	90-FZ. Part VI. lin	e 47 (Lobb	vina Activ	vities'), then			
		have filed Form 5768 (election under s						В		
		have NOT filed Form 5768 (election ur								
		n Form 990, Part IV, Line 5 (Proxy Tax	k) (see separate ir	nstructions) or Form	990-	EZ, Part V, lin	ie 35c		
	xy Tax) (see separate instruction									
	Section 501(c)(4), (5), or (6) organiz	ations Complete Part III								
	ne of the organization SAPEAKE BAY FOUNDATION INC				Employer identification number					
CHE	SILESTI BITTE BITT TOOTBY THE					7				
Par	t I-A Complete if the organ	nization is exempt under section	n 501(c) or is	a section	527 org	aniz	ation.			
1	Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")									
2	Political campaign activity expenditures (see instructions)						\$			
3	Volunteer hours for political camp	aign activities (see instructions)								
Par	t I=B Complete if the organ	nization is exempt under section	on 501(c)(3).							
1	Enter the amount of any excise ta	x incurred by the organization under se	ection 4955		>	. \$	\$			
2										
3	If the organization incurred a sect	ion 4955 tax, did it file Form 4720 for t	this year?				☐ Yes	□ No		
4a	Was a correction made?						☐ Yes	Пио		
ь	If "Yes," describe in Part IV									
		nization is exempt under section	n 501(c), exce	pt sectio	n 501(c)	(3).				
1	Enter the amount directly expend-	ed by the filing organization for section	527 exempt funct	on activities	s 🕨	9	*			
2	Enter the amount of the filing org	anızatıon's funds contributed to other o	rganizations for se	ction 527 e	xempt		•			
	function activities				•	\$				
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and or	n Form 1120-POL,	lıne 17b	>	\$	\$			
4	Did the filing organization file For	m 1120-POL for this year?					☐ Yes	□ No		
5										
	(a) Name	(b) Address	(c) EIN	filing or funds If	unt paid fro ganization' none, ent -0-	's	(e) Amount contribution and prom directly delirectly delirectly delirectly delirectly are corganization enter	s received ptly and vered to a political in If none,		

				enter -0-		
1						
2						
3						
4						
5						
6						
For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ. Cat No 50084S Schedule C (Form 990 or 990-EZ) 2018						

e	Total exempt purpose expenditures (add lines 1c and	d 1d)	29,280,321				
f	Lobbying nontaxable amount Enter the amount from columns	n the following table in both	1,000,000				
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:					
	Not over \$500,000	20% of the amount on line 1e					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000					
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000					
	Over \$17,000,000	\$1,000,000					
g	Grassroots nontaxable amount (enter 25% of line 1f	250,000					
h	Subtract line 1g from line 1a If zero or less, enter -	0-	0				
i	Subtract line 1f from line 1c. If zero or less, enter -0	ract line 1f from line 1c. If zero or less, enter -0-					

act line 1f from line 1c If zero or less, enter -0 j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting ☐ Yes ☐ No section 4911 tax for this year?

4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period

(a) 2015

1,000,000

256,479

250,000

21,917

(b) 2016

1,000,000

239.848

250,000

19,234

(c) 2017

1,000,000

295,839

250,000

16,044

(d) 2018

1,000,000

314,167

250,000

9,234

Schedule C (Form 990 or 990-EZ) 2018

(e) Total

4,000,000

6,000,000

1,106,333

1,000,000

1,500,000

66,429

Calendar year (or fiscal year

beginning in)

Lobbying nontaxable amount

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Lobbying ceiling amount

2a

activity

Volunteers?

Part IV

Return Reference

1

(b)

Amount

(a)

No

Yes

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year C Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Supplemental Information

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

5

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

Supplemental Financial Statements

DLN: 93493132015040 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

private benefit?

(Form 990)

1 2

▶ 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. ▶ Go to www.irs.gov/Form990 for the latest information. **Employer identification number** CHESAPEAKE BAY FOUNDATION INC 52-6065757 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible ☐ Yes ☐ No

Pa	rt II Conservation Easements. Complete if the organization answered "Yes" on Fo	rm 990,	Part IV, line	7.				
1	Purpose(s) of conservation easements held by the organization (check all that apply)							
	\square Preservation of land for public use (e g , recreation or education) \square Preservation of a	n historic	ally important l	and area				
	✓ Protection of natural habitat □ Preservation of a	certified	historic structu	re				
	✓ Preservation of open space							
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the f	orm of a c	onservation					
	easement on the last day of the tax year		Held at the E	nd of the Year				
a	Total number of conservation easements	2a		12				
b	Total acreage restricted by conservation easements	2b		940 00				
С	Number of conservation easements on a certified historic structure included in (a)	2c						
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d						
3	Number of conservation easements modified, transferred, released, extinguished, or terminated b tax year ► 3	y the orga	nization during	; the				
4	Number of states where property subject to conservation easement is located >	2						
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No							
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 144 00							
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing const \$ 5,112	ervation ea	asements durin	g the year				
В	Does each conservation easement reported on line 2(d) above satisfy the requirements of section and section $170(h)(4)(B)(II)$?	170(h)(4))(B)(ı) ☑ Y	es 🗌 No				
9	In Part XIII, describe how the organization reports conservation easements in its revenue and exp balance sheet, and include, if applicable, the text of the footnote to the organization's financial sta the organization's accounting for conservation easements							
Par	Organizations Maintaining Collections of Art, Historical Treasures, or Otto Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	her Sim	ilar Assets.					
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue s art, historical treasures, or other similar assets held for public exhibition, education, or research in provide, in Part XIII, the text of the footnote to its financial statements that describes these items	n furtherar						
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue state historical treasures, or other similar assets held for public exhibition, education, or research in fur following amounts relating to these items							
((i) Revenue included on Form 990, Part VIII, line 1		▶ \$	0				
(i	ii)Assets included in Form 990, Part X		▶ \$	17,000				
2	If the organization received or held works of art, historical treasures, or other similar assets for fir following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	nancıal gaı	n, provide the					
а	Revenue included on Form 990, Part VIII, line 1		▶ \$					
b	Assets included in Form 990, Part X		▶ \$					
or I	Paperwork Reduction Act Notice, see the Instructions for Form 990.	o 52283D	Schedule I	D (Form 990) 2018				

Par	t III	Organizations Ma	aintaining Coll	lections of Art, I	Histori	ical Tı	reası	ures, or	Other 9	Similar A	ssets (con	tınued)	
3		g the organization's acqu s (check all that apply)	uisition, accessior	n, and other records	, check	any of	the fo	ollowing t	hat are a	significant	use of its co	llection	
а		Public exhibition d											
b		a G Decembry purposes only											
c		Preservation for future	generations										
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in												
5	Part XIII During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?												
				·	art or tr	ie orga	IIIIZati	on a cone	CCIOII.		☐ Yes	✓ N	lo
Pa	rt IV	Escrow and Custon Complete if the org X, line 21.			rm 990	, Part	IV, I	ine 9, or	reporte	d an amo	unt on For	m 990,	Part
1a	Is the	e organization an agent,	trustee, custodia	an or other intermed	liary for	contri	bution	ns or othe	r assets r	not			
		ded on Form 990, Part >			arar y 101	33112111			., 455665		☐ Yes		lo
ь	If "Y	es," explain the arrange	ment in Part XIII	and complete the f	ollowina	table		[Amount		_
c		nning balance						Ì	1c				_
d	_	tions during the year						Ì	1d				_
е		butions during the year						ŀ	1e				
f		ng balance						ŀ	1f				_
													_
2a		the organization include									_	L N	lo
b		es," explain the arrangei			•								
Pa	rt V	Endowment Fund	ds. Complete if										
	_			(a)Current year	(b) ₽	rior yea	$\overline{}$			(d)Three ye		Four yea	
	_	ning of year balance .		61,792,667		57,758	-	5	2,970,231	55	,313,607		209,935
		butions		70,804			5,335		663,804		912,345		142,680
		vestment earnings, gain	is, and losses	4,352,873		6,467	7,859		7,005,579		-306,112	1,	646,652
d	Grants	s or scholarships	•										
е		expenditures for facilitier ograms	es	3,201,058		3,009	9,668		2,881,473	2	,949,609	2,	685,660
f	Admın	istrative expenses .											
g	·			63,015,286		61,792	2,667	7 57,758,141 52,			,970,231	970,231 55,313,607	
2	Provi	ide the estimated percer	ntage of the curre	ent year end balance	e (line 1	g, colu	mn (a	ı)) held a:	 S				
а	Boar	d designated or quasi-er	ndowment 🟲	20 760 %									
b	Perm	nanent endowment 🕨	60 840 %										
С	Tem	porarily restricted endow	vment ▶ 18 4	.00 %									
Ĭ		percentages on lines 2a,											
За	Are t	here endowment funds	not in the posses	sion of the organiza	tion tha	t are h	eld ar	nd admini	stered for	the			
	orgai	nization by										Yes	No
	(i) u	nrelated organizations				•					3a(i		
		related organizations .									3a(ii)	No
b 4		es" on 3a(II), are the rel					· ·				. 3b		<u> </u>
4		ribe in Part XIII the inte			wrnent	iurias							
Pa	rt VI	Land, Buildings, a Complete if the ord			rm 000	Dart	T\/ l	ıno 11a	Soo For	m 000 D	art V Juno	10	
	Descr	ription of property	(a) Cost or oth		t or other	•			umulated d		, , , , , , , , , , , , , , , , , , , 	Book valu	ie
	5 0501	.p.s.s.r or property	(investme			(/				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
1 ~	Land					11 65	52,006	1				1.	1,652,006
	Land						74,037			13,143,062			4,230,975
	Buildir	· -				21,31	/ 4 ,U3/	1		13,143,002		14	7,230,9/5
		hold improvements						1					
		ment						1		7.0			
е	Other					12,11	14,476	1		7,862,132		4	4,252,344

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) .

Part VII	Investments—Other Securities. Complete if the See Form 990, Part X, line 12.	ne organization a	answered "Yes" on	Form 990, Part IV, line 11b.
	(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuation t or end-of-year market value
(1) Financial	derivatives			tor one or year market raise
(3) Other	neld equity interests	2, 22		
	nips/Alternative Investments	24,737,		F
(C) Beneficia	Interest in Perpetual Trust	3,223,	517	F
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column	(b) must equal Form 990, Part X, col (B) line 12)	27,960,8	880	
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on F	Form 990, Part I	V, line 11c. See Fo	orm 990, Part X, line 13.
	(a) Description of investment	(b) Book va	alue	(c) Method of valuation t or end-of-year market value
(1)				t of the of year market value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column	(b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX	Other Assets. Complete if the organization answered (a) Description), Part IV, line 11d S	See Form 990, Part X, line 15 (b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization a	neward 'Vas' or		>
	See Form 990, Part X, line 25.			.v, line fie of fil.
(1) Federal ır	(a) Description of liability		b) Book value	
Split Interest			825,936	
Interest Rate (3)	Swap Obligation		219,546	
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 25) r uncertain tax positions In Part XIII, provide the text of	► f the footnote to th	1,045,482 ne organization's fina	incial statements that reports the
	s liability for uncertain tax positions under FIN 48 (ASC 7			_

Schedule D (Form 990) 2018

Part XI

2

5

1

2

d

3

5

Part XIII

See Additional Data Table

Part XII

Page 4

4,193,344 29,606,573

230,400

29,836,973

30,369,934

1,320,013

230,400

29.280.321

Schedule D (Form 990) 2018

29,049,921

С	Recoveries of prior year grants				
d	Other (Describe in Part XIII)				
е	Add lines 2a through 2d				
3	Subtract line 2e from line 1				
4	Amounts included on Form 990, Part VIII, I				
а	Investment expenses not included on Form				
b	Other (Describe in Part XIII)				
С	Add lines 4a and 4b				

Donated services and use of facilities . . .

Other (Describe in Part XIII) . .

Add lines 2a through 2d .

Return Reference

Subtract line 2e from line 1 .

Prior year adjustments

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

Donated services and use of facilities

	2c
	2d
line 12, but not on line 1	
m 990, Part VIII, line 7b	4a
	4b

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Total expenses and losses per audited financial statements

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Supplemental Information

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2a

2b

2a

2b

2c

2d

4a

4b

Explanation

2e	
3	
4.	

2.851.053

910.076

432.215

230,400

910,076

409,937

230.400

2e

3

4c

5

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID: Software Version:

EIN: 52-6065757

Name: CHESAPEAKE BAY FOUNDATION INC.

A monetary value has not been placed on conservation easements, therefore, they are not included in financial

Supplemental Information

Part II, Line 9

Return Reference

statements

Explanation

Supplemental Information		
Return Reference	Explanation	
Part III, Line 4	A scale model of a Chesapeake Bay crabbing skiff hangs in the foyer of the Merrill Center It is a reminder that CBF's mission is to Save the Bay, which includes restoring its boun ty to levels that can support all the people who make a living on the Bay Greeting visito rs to the Merrill Center is a bronze and silver sculpture of an osprey, representing the f act that approximately one-quarter of all ospreys in the contiguous United States nest in the Chesapeake Bay region	

upplemental Information	
Return Reference	Explanation
art V, Line 4	Endowment funds are used for donor restricted projects as well as to fund unrestricted act ivities. Donor restricted endowments are used for education in general, field education, for arm operations, support and maintenance of facilities and boats, and restoration projects. It is the policy of the Foundation to spend 5% of a twelve quarter trailing average of the sum of accumulated investments.

Su

Supplemental Information	
Return Reference	Explanation
Part X, Line 2	For the years ended June 30, 2019 and 2018, the Foundation has documented its consideration of FASB ASC 740-10, Income Taxes, that provides guidance for reporting uncertainty in in come taxes and has determined that no material uncertain tax positions qualify for either recognition or disclosure in the financial statements

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Supplemental Information	
Return Reference	Explanation
Part XI, Line 2d - Other Adjustments	Special Event Expenses reported as an expense on the 409,937 financial statements and net ted against revenue on the Form 990, Part VIII, line 8b Unrealized gain on interest rate swap 22,278

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Supplemental Information	
Return Reference	Explanation
Part XII, Line 2d - Other Adjustments	Special Event Expenses reported as an expense on the 409,937 financial statements and net ted against revenue on the Form 990, Part VIII, line 8b

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efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493132015040

Inspection

2018

OMB No 1545-0047

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

Open to Public

Department of t	me rreasu
Internal Revenu	ie Service

(Form 990 or 990-EZ)

SCHEDULE G

Go to www irs gov/Form990 for instructions and the latest information Name of the organization

Employer identification number

HE	ESAPEAKE BAY FOUNDATION IN	IC						52-6065757	
P	Fundraising Activ	·	_			ered "Yes" on Fo	rm 990,	Part IV, line 1	7.
L	Indicate whether the organiz	ation raised funds thi	rough an	y of the fo	ollowin	g activities Check	all that ap	pply	
а	Mail solicitations			e	. 🗸	Solicitation of non-	-governm	ent grants	
b	✓ Internet and email solicit	ations		f	✓	Solicitation of gove	ernment g	rants	
c	✓ Phone solicitations			g	· 🗸	Special fundraising	gevents		
d	✓ In-person solicitations								
2a b	or key employees listed in Fo	orm 990, Part VII) or paid individuals or en	entity in tities (fur	connection	on with	professional fundr	aising ser	vices? 🗹 Ye	es 🗌 No er IS
i)	Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai custo cont	Did ser have ody or rol of outions?		Gross receipts from activity	(or re fundra	nount paid to etained by) iser listed in col (i)	(vi) Amount paid to (or retained by) organization
	Lautman Maska Neill & Company 1730 Rhode Island Ave NW Ste 301	Membership Consulting	Yes	No No		3,438,714		186,885	3,251,829
	Washington, DC 20036	Distal Canadhaa							
	Beaconfire Red 2300 Clarendon Blvd Ste 925	Digital Consulting		No		1,625,349		471,442	1,153,907
	Arlington, VA 22201								
ot	al	1		•		5,064,063		658,327	4,405,736

List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA,

che	dule G (Form 990 or 990-EZ) 2018					F	Page 3
.1	Does the organization conduct gaming	activities with nonmember	5?		☐ Yes	□Ne	
.2	Is the organization a grantor, beneficia formed to administer charitable gaming		member of a partnership or other entity		□Yes		
3	Indicate the percentage of gaming activ	vity conducted in					
а	The organization's facility			13a			%
b	An outside facility			13b			%
4	Enter the name and address of the pers	son who prepares the orga	nization's gaming/special events books and ri	ecords			
	Name ►						
	Address ►						
5a	Does the organization have a contract virevenue?	with a third party from who	om the organization receives gaming		□Yes	□No	
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by		anization ▶ \$ and th	ne			
С	If "Yes," enter name and address of the	e third party					
	Name ►						
	Address ▶						
6	Gaming manager information						
	Name ►						
	Gaming manager compensation ▶ \$						
	Description of services provided ▶						
	☐ Director/officer	☐ Employee	☐ Independent contractor				
7	Mandatory distributions						
а	Is the organization required under state retain the state gaming license?	e law to make charitable di	stributions from the gaming proceeds to		Yes	□No	
b	Enter the amount of distributions requirements in the organization's own exempt activities.		ated to other exempt organizations or spent		53		
Pai	t IV Supplemental Informatio	n. Provide the explanat	rions required by Part I, line 2b, column licable. Also provide any additional info				 S.
_	Return Reference		Explanation				

Schedule G (Form 990 or 990-EZ) 2018

DLN: 93493132015040 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number CHESAPEAKE BAY FOUNDATION INC. 52-6065757 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization 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 (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Schedule I (Form 990) 20 <mark>1</mark>	.8					Page 2		
	Other Assistance to e duplicated if addition		als. Complete If the org	anızatıon answered "Yes'	on Form 990, Part IV, line 22			
(a) Type of grant		(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance		
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
Part IV Supplen	nental Information	on. Provide the info	ormation required in	Part I, line 2; Part III	, column (b); and any other a	dditional information.		
Return Reference	Explanation	Explanation						
Part I, Line 2		Grant agreements require detailed project reports that are reviewed by departmental Financial Managers before payments are made. Program Managers will also review and approve the Grantee's Project Performance according to the details of the grant						

Schedule I (Form 990) 2018

Additional Data

City of Hopewell

103 South Hopewell Street Hopewell, VA 23860 Elizabeth River Project

Portsmouth, VA 23704

475 Water Street Suite C103A

Software ID: Software Version: **EIN:** 52-6065757

54-6001354

54-1663058

Name: CHESAPEAKE BAY FOUNDATION INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations a

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation
organization		ıf applıcable	grant	cash	(book, FMV, appraisal,
or government				assistance	other)

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation
organization		ıf applıcable	grant	cash	(book, FMV, appraisal,
or government				assistance	other)

Government

501(c)(3)

70,000

5,001

and Domesti	ic Governments.
mount of non-	(f) Method of valuation
cach	(book FMV appraisal

(g) Description of (h) Purpose of grant non-cash assistance or assistance

VA Lafayette oyster

restoration

Hopewell VA restoration

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Pennsylvania State University 24-6000376 11,203 Systemic Solutions Government

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

ın PA

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

(b) EIN

401 Rider II Buildg 227 West Beaver Ave 401 State College, PA 168014819					Environmental Literacy & Supporting Clean Water Initiatives in the Susquehanna Watershed	
Quantified Ventures LLC	46-5296778	Other	138,942		Bringing Pay for Succes	s

1875 Connecticut Ave NW 10th Models to Agricultural Conservation and Washington, DC 20009 Stormwater Compliance

if applicable (book, FMV, appraisal, organization arant cash non-cash assistance or assistance or government other) assistance Red Barn Consulting Inc Other 29,188 Promoting Regional 41-2024926 grazing and Bringing 3050 Yellow Goose Road Lancaster, PA 176011818 Pay for Success Models

(e) Amount of non-

(f) Method of valuation

(a) Description of

(h) Purpose of grant

ın PA

to Agricultural Conservation and Stormwater Compliance ın PA Rettew Associates Inc 23-1712637 Other 26.080 Bringing Pay for Success

Models to Agricultural 3020 Columbia Avenue Lancaster, PA 17603 Conservation and Stormwater Compliance

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

(b) EIN

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Shore Rivers Inc 26-3187608 501(c)(3) 9.073 Choptank River Habitat Focus Area Oyster 114 S Washington Street Suite 301 restoration

Easton, MD 21601 Virginia Forage & Grasslands 54-1061472 501(c)(3) 10.600

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Crewe, VA 23930

Promoting Regional Council grazıng 3599 Indian Oak Road

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

52-1257057 501(c)(3) 6.154 World Resources Institute

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Promoting Regional 10 G Street NE Suite 800 grazing Washington, DC 20002

efil	le GRAPHIC pr	rint - DO NOT PROCESS	As Filed Dat	a -	DLN: 934	19313	32015	040			
Sch	nedule J	С	ompensat	ion Information	40	1B No	1545-0	0047			
(Fori	m 990)		Compensa ganization answ	Trustees, Key Employees, and Hig ated Employees vered "Yes" on Form 990, Part IV n to Form 990.	hest , line 23.	20	18	3			
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.g</u>		instructions and the latest infor	mation.		pen to Public Inspection				
Nar	me of the organiza				Employer identificat						
CHE	ESAPEAKE BAY FOUN	IDATION INC			52-6065757						
Pa	rt I Questi	ons Regarding Compens	ation		32 0003737						
							Yes	No			
1a				f the following to or for a person liste ly relevant information regarding the							
	First-class	s or charter travel		Housing allowance or residence for	personal use						
		companions	닏	Payments for business use of perso							
		nification and gross-up paymen	ts 📙	Health or social club dues or initiati							
	☐ Discretion	nary spending account	Ц	Personal services (e g , maid, chau	ffeur, chef)						
Ь		xes in line 1a are checked, did t all of the expenses described ab		ollow a written policy regarding payn nplete Part III to explain	nent or reimbursement	1b					
2				or allowing expenses incurred by all r, regarding the items checked in line	- 1-2	2					
	directors, truste	es, officers, including the CEO/	executive Directo	r, regarding the items checked in line	e la?						
3	organization's C	EO/Executive Director Check a	Ill that apply Don	ed to establish the compensation of t not check any boxes for methods CEO/Executive Director, but explain							
	✓ Compensa	ation committee		Written employment contract							
		ent compensation consultant	<u>~</u>	Compensation survey or study							
	☑ Form 990	of other organizations	\checkmark	Approval by the board or compensa	ation committee						
4	During the year related organiza		990, Part VII, Se	ection A, line 1a, with respect to the f	iling organization or a						
а	Receive a sever	ance payment or change-of-cor	ntrol payment?			4a		No			
b		r receive payment from, a supp		lified retirement plan?		4b	Yes	-110			
С	•	r receive payment from, an equ	•	•		4c		No			
	If "Yes" to any o	of lines 4a-c, list the persons ar	nd provide the app	olicable amounts for each item in Par	t III						
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations	must complete lines 5-9.							
5	For persons liste		on A, line 1a, did	the organization pay or accrue any							
а	The organization	n?				5a		No			
b	Any related orga					5b		No			
	If "Yes," on line	5a or 5b, describe in Part III									
6		ed on Form 990, Part VII, Section on tingent on the net earnings o		the organization pay or accrue any							
а	The organization	n?				6a		No			
b	Any related orga					6b		No			
	-	6a or 6b, describe in Part III									
7		ed on Form 990, Part VII, Secti escribed in lines 5 and 6? If "Ye		the organization provide any nonfixe ort III	d	7	Yes				
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe	8		No			
9	If "Yes" on line 53 4958-6(c)?	8, did the organization also follo	ow the rebuttable	presumption procedure described in	Regulations section	9		140			
For F	Panerwork Redu	iction Act Notice, see the In	structions for Fo	orm 990. Cat No	50053T Schedule J	(Forn	1 990)	2018			

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

Note. The sum of column (A) Name and Title	`		of W-2 and/or 1099-MIS		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1 William C Baker President	(i)	226,480	150	9,384	9,384	12,624	258,022	0
rresident	(ii)	0	0	0	0	0	0	0
2 William A Agee III Secretary	(i)	139,861	148	5,594	5,594	84	151,281	0
Secretary	(ii)	0	0	0	0	0	0	0
3 David A Fogle Chief Financial Officer	(i)	164,629	148	24,500	12,535	1,051	202,863	0
Cilier Fillaticial Officer	(ii)	0	0	0	0	0	0	0
4 Katharene P Snavely Vice President - Development	(i)	150,064	148	18,000	6,337	1,149	175,698	0
vice President - Development	(ii)	0	0	0	0	0	0	0
5 Thomas W Ackerman	(i)	143,377	148	5,761	5,761	1,051	156,098	0
Vice President-Education	(ii)	0	0	0	0	0	0	0
6 Robert J Beach	(i)	137,763	163	9,481	6,083	15,959	169,449	0
Vice President - Communications	(ii)	0	0	0	0	0	0	0
7 Jon A Mueller	(i)	178,286	148	21,574	7,191	84	207,283	0
Vice President - Litigation	(ii)	0	0	0	0	0	0	0
8 Alison H Prost	(i)	128,057	163	6,869	5,495	15,959	156,543	0
Executive Director, Maryland	(ii)	0	0	0	0	0	0	0
	(,							

hedule J (Form 990) 2018 Page 3							
Part III Supplemental Inform	Part III Supplemental Information						
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information							
Return Reference	Explanation						

A \$10,000 contribution was made to David A Fogle's 457F plan

Part I, Line 4b

Return Reference	Explanation
e 7	In addition to the bonuses listed on Schedule J, Part II, Darcelle H Wilson's compensation on Part VII of the 990, included a bonus of 163

Part I, Line

ef	ile GRAPHIC print - DO NOT	PROCESS As	Filed Data -									DLN: 9	34931	3201	5040
	te: To capture the full contei	nt of this docum	ent, please sele	ct landscape mode	(11" x 8.	5") wł	nen p	rinting.							
	hedule K	Sur	nlemental	Information o	n Tav₋F	vem	nt B	Ronde			OMB No 1545-0047				
(F	orm 990)			wered "Yes" to Form					criptions,			?	01	R	
		•		s, and any additional	information				• ,						
	artment of the Treasury rnal Revenue Service		▶Go to www.	► Attach to Form 990 irs.gov/Form990 for		nforma	tion.						n to Pu spectio		
Nam	ne of the organization		, cc tc <u>m</u>							Emplo	yer ıden	tification			
CHE	ESAPEAKE BAY FOUNDATION INC									52-60	65757				
Pā	art I Bond Issues									•					
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue p	rice	(f) Description	on of purpose	(g) De	feased			(i) Pool	
												behalf of issuer		financing	
										Yes	No	Yes	No	Yes	No
Α	Maryland Economic Development Corporation	52-1376562		10-01-2013	6,1	95,000	Refun	d 1998 Bond	ds		X		X		X
	Corporation														
Pā	Proceeds														
						١		E	3		;			D	-
1	Amount of bonds retired					3,097	7,846								
	Amount of bonds legally defease														
3	Total proceeds of issue					6,195	5,000								
4	Gross proceeds in reserve funds														
	Capitalized interest from proceed														
	Proceeds in refunding escrows .														
<u> 7</u>	Issuance costs from proceeds .														
8	Credit enhancement from procee														
9	Working capital expenditures from	<u> </u>													
10	Capital expenditures from proceed Other spent proceeds														-
11	Other unspent proceeds					3,097	7,154								
12	Year of substantial completion .				20	00									
13	rear or substantial completion :			• •	Yes	00 No		Yes	No	Yes	No		Yes	$\overline{}$	No
14	Were the bonds issued as part of	a current refunding	ıssue?		X	140	<u>'</u>	165	140	165	NO		ies	'	<u> </u>
15	Were the bonds issued as part of	an advance refundi	ng issue?			X							-	+	
16	Has the final allocation of procee				X										
17															
Pa	Private Business Use											<u> </u>			
						١		E	3	C				D	
					Yes	No	·	Yes	No	Yes	No		Yes		No
1 —	Was the organization a partner in financed by tax-exempt bonds? .	<u> </u>				Х									
2	Are there any lease arrangement property?			e of bond-financed		×									
Ear	Panerwork Peduction Act Notice				Cal	. No. 50	1103E		<u> </u>			chadula	K /For	m 990	1 2018

counsel to review any research agreements relating to the financed property?

organization, or a state or local government

Rebate not due yet?

Exception to rebate?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

За

6

Part IV

b

C

Arbitrage

Page 2

D

Schedule K (Form 990) 2018

No

Yes

0 %

0 %

0 %

В

No

Yes

C

No

Yes

Х

Χ

Χ

No

Χ

Χ

Χ

Χ

b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?				
С	Are there any research agreements that may result in private business use of bond-financed property?	×			
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside				

Α

Yes

Χ

Χ

Х

Yes

Х

No

Explanation

The Bond Year Five (First Installment) Arbitrage Rebate Compliance Report was completed on April 24, 2018 with an Evaluation Date of September 30, 2018

R

No

Yes

No

Yes

Χ

Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Page 3

D

No

Yes

Were gross proceeds invested in a guaranteed investment contract

Schedule K (Form 990) 2018

requirements of section 148? . . .

Return Reference

Schedule K. Part IV, line 2d

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

(GIC)?

period?

Part VI

efile GRAPHI	C print - DC	NOT PRO	CESS	As Fi	led Data -					DL	N: 93	4931	320	15040
Schedule L (Form 990 or 990	-EZ) ► Con	plete if the	organi	ization a	nswered "Yes	on Form 9	d Person 90, Part IV, li	nes 2	25a, 2	25b, 26		MB No	1545	-0047
				► Attac	h to Form 99	0 or Form 99						20	1	8
Department of the Tre Internal Revenue Serv	I	•	• G o to <u>и</u>	<u>vww.irs.</u>	gov/Form99C	tor the late	st informatior	1.			C	Open Insp		
Name of the org	anızatıon	C						Er	nplo	yer ide	ntifica			
										5757				
							d 501(c)(29) or r 25b, or Form '				ne 40b			
) Name of dis						lified person an		(c) [escript	ion of	(d) Cor	rected?
					(organization			tr	ansactı	on	Y	es	No
_								+						
								_						
Part II Loc	ans to and/ nplete if the o orted an amou	or From I rganization a unt on Form ship (c) Pur	nteres nswered 190, Par	ted Per d "Yes" or t X, line!	rsons. The form 990-EZ	rganızatıon .	88a, or Form 99	00, Pa (g)	•	line 26 (I Appror		(janiza i)Writ ireem	ten
				То	From			Yes	No	Yes	No	Yes		No
 Total					•	<u> </u> ▶ \$								
					ested Perso		line 27.							
(a) Name of Inter		(b) Relation	nship b	etween and the	(c) Amount		(d) Type o	of assi	stand	e	(e) Pu	rpose (of ass	stance
												<u> </u>		
For Paperwork Red	uction Act Not	ice, see the T	nstructio	ons for Fo	rm 990 or 990-I	Z. C:	at No 50056A		Sci	nedule !	(Form	990 ~	- 000-	EZ) 2018

(1) Whitescarver Natural Resources Management LLC (WNRM)	Bobby Whitescarver, owner of WNRM and husband of Jeanne Hoffman (board)	,	Whitescarver Natural Resources Management, LLC was a subcontractor to CBF		No		
Part V Supplemental Information	•						
Provide additional information for responses to questions on Schedule L (see instructions)							

Return Reference

Sch L, Part IV, Transaction Details

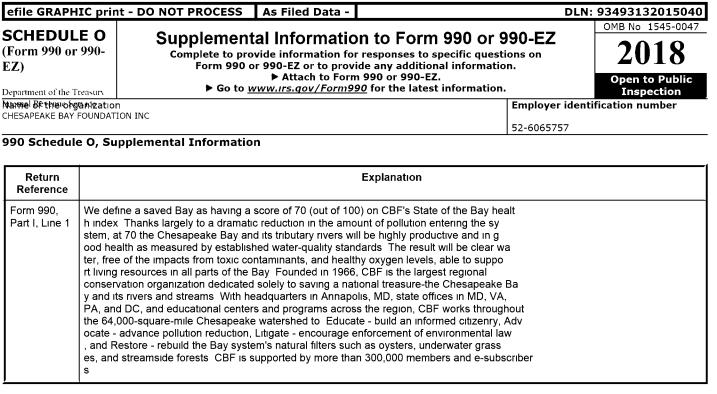
Mr. Whitescarver was chosen as a subcontractor for his outstanding record of providing guidance and technical expertise regarding agriculture best management practices during his 32 year career with the Natural Resources Conservation Service. His first subcontract with CBF was signed in 2011, long before his

Schedule I (Form 990 or 990-F7) 2018

wife became a CBF board member

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493132015040 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2018 ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** CHESAPEAKE BAY FOUNDATION INC 52-6065757 Part I **Types of Property** (a) (b) (c) (d) Check If Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g ${f 1}$ Art—Works of art . . . 1,024 Fair market value Χ 2 Art—Historical treasures 3 Art—Fractional interests Books and publications Χ 120 Fair market value Clothing and household 850 Fair market value Χ goods Cars and other vehicles Boats and planes . . Intellectual property . . 100 1,465,630|Fair market value Securities—Publicly traded . Χ 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . Securities—Miscellaneous . Qualified conservation contribution—Historic structures **14** Oualified conservation contribution—Other . . Real estate—Residential . 16 Real estate—Commercial . 17 Real estate—Other . . Collectibles . . . 18 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ (Χ 31 21,280 Fair market value Equip /supp) Χ 26 Other ▶ (22 8,410 Fair market value Food & bev) 27 Other ▶ (Χ 4,003 Fair market value Prizes) 28 Other ▶ (_ Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a Nο **b** If "Yes," describe the arrangement in Part II 31 Yes Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Yes b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2018) Cat No 51227J

Schedule M (Form 990) (2018)	Page 2					
	tion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part umber of contributions, the number of items received, or a combination of both. Also complete					
Return Reference	Explanation					
Part I, Column (b)	The number of contributions received was reported in column B on part I					
Part I, Line 32b	When necessary, licensed boat brokers are used to sell donated boats that are not used for operations					
	Schedule M (Form 990) (2018)					



Return Reference	Explanation
Form 990, Part III, Line 4a	Environmental Protection and Restoration (EPR), continued from page 2. To achieve its objectives, the department utilizes a team of lawyers, water quality and restoration scientists, outreach experts, citizen organizers, lobbyists, and policy specialists with expertise in fisheries, pollution reduction, land use, and agriculture. Their focus is local, state, and federal government policies, private sector practices, and citizen engagement. The Program develops and employs strategies and tactics designed to define the necessary governmental policies and programs, create the needed "political will" to ensure implementation of these policies and programs, and organizes CBF members to interact with decision-makers. When appropriate, the department uses the law as a tool to protect and preserve the Chesa peake Bay.

Return Reference	Explanation
Form 990, Part III, Line 4b	Education, continued from page 2 Designed to engage tomorrow's environmental leaders, the se students now participate in CBF events, share what they learned with peers, and create projects in their communities to better the environment. In addition, the Education Depart ment conducts professional learning courses for educators throughout Maryland, Virginia, P ennsylvania, and the District of Columbia. Known as Chesapeake Classrooms, these courses p rovide teachers first-hand experience on local waterways and help them to develop lesson p lans that incorporate Bay studies. The department also teaches principals and school admin istrators through our Principal Environmental Leadership Courses. These courses increase s upport for school-wide environmental education programs. Furthermore, the department helps to educate elected officials, policy makers, journalists, and other community leaders and advocates through on-the-water field experiences. These trips inform influential members of the community about the issues facing the Bay and the ways that they can help further the

990 Schedule O, Supplemental Information

Return

Reference	Explaination
Form 990, Part III, Line 4c	Communications, continued from page 2 Communications' tactics are to develop well-researc hed messages and deliver them through integrated channels, including publications such as CBF's member magazine, brochures, and regular and special reports, earned, paid, or donat ed media, digital media, including the CBF website, social media, and outbound e-mails, an d any other forms of direct or indirect communications with our members and the public at large. The Communications Department is organized around four primary functional areas or eative services, media, digital communications, and integrated communications/marketing.
1	r caute sertioss, media, digital communications, and integrated communications/marketing

Explanation

Return Reference	Explanation	
Form 990, Part VI, Section B, line 11b	An independent audit firm was engaged to conduct the financial statements' audit and to as sist in preparing the Form 990. The Chief Financial Officer and Finance staff directly par ticipated in preparing the form, drafting responses to questions and reviewing the Form 99. O in draft. The Chief Financial Officer then reviewed it with the President and Chairman of the Audit and Finance Committee. The 990 was provided to the Audit and Finance Committee, comprised of Board of Trustee members, for their review and comments, after which it was sent to the full Board before being electronically filed with the IRS.	

Return

Reference		
Form 990, Part VI, Section B, Inne 12c	Each Trustee, officer, key employee and employees in positions to obligate CBF are require d to review a copy of the conflict of interest policy annually and complete a disclosure f orm identifying any relationship positions or circumstances which he or she believes could contribute to a conflict. The conflict of interest disclosure form is completed, signed a nd returned to the Chief Financial Officer who notifies the Chairman of the Audit and Fina nce Committee and the General Counsel of any concerns. This process is also covered in ori entation sessions held for new Trustees as well as for new employees. If items arise durin g Board meetings that are conflicts of interest, the board member having possible conflict s of interest cannot vote or participate in Board or Committee deliberations on the subject or be counted toward meeting a quorum. However, they may answer questions	

Explanation

Doturn

Reference	Explanation
Form 990, Part VI, Section B, line 15	During the annual budget approval meeting of the Audit and Finance Committee of the Board of Trustees, the Committee reviews and approves the salary and any proposed pay increase for the President and key employees. Compensation related decisions are documented within the minutes. The committee will provide this information to the full board for approval. The President's last compensation review took place in September 2019. Generally, compensation for all staff is independently reviewed and determined annually based on performance evaluation, and analysis of comparable data obtained from industry resources and peer organizations. An overall increase pool, based on market data, is approved by the Committee for use in the process. In addition, the Chief Financial Officer and Vice President of Human Resources informally review and approve all staff alignment to ensure consistency and continuity of various positions within the appropriate pay grades and ranges.

Evolunation

Reference	<u> </u>
	CBF's governing documents and conflict of interest policy are available to the public upon request using contact information on the website. Audited financial statements, the Form

Explanation

Section C,
line 19

1990, and the Annual Report can be found on CBF's website Audited financial statements and
the Form 990 are also filed with state charitable solicitation registrations, and are als
o available through not-for-profit internet portals such as Guidestar and Charity Navigato

990 Schedule O, Supplemental Information Return Explanation Reference

Form 990,
Part XI, line
Unrealized gain on interest rate swap 22,278