DLN: 93493067005391

OMB No. 1545-0047

2019

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

Department of the Treasury

Return of Organization Exempt From Income Tax

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

Open to Public Inspection \blacktriangleright Go to $\underline{www.irs.gov/Form990}$ for instructions and the latest information.

	i iceveni	2010 -	I .	ning 07-01-2019 , and ending 06-	20. 2020			
			C Name of organization	ing 07-01-2019 , and ending 00	30-2020	D Employer i	dentifi	ication number
	ck if ap _l dress cl	plicable:	FUND FOR EDUCATIONAL EXCELLENCE	CE INC				cation number
	me cha	-				52-112940	2	
□ Init	tial retu	ırn	Doing business as					
		terminated/				E Telephone n	umher	
	ended		900 NORTH CHARLEC CEREET CEE 40	il is not delivered to street address) Room/s	uite			
⊔ Apı	plication	n pending				(410) 685-	8300	
			City or town, state or province, count BALTIMORE, MD 21201	ry, and ZIP or foreign postal code				
						G Gross receip		3,302,111
			F Name and address of principal CHUCK ADKINS	officer:	H(a) Is t	his a group returi	n for	
			800 NORTH CHARLES ST STE 400)		ordinates?		□Yes 🗹 No
			BALTIMORE, MD 21201			all subordinates uded?		☐ Yes ☐No
Tax	k-exem	pt status:	☑ 501(c)(3) ☐ 501(c)() ◄ (i	nsert no.) 4947(a)(1) or 527	If "I	No," attach a list.	(see	instructions)
W	ebsite	e:► WW	/W.FFEE.ORG		H(c) Gro	up exemption nu	mber	>
(Forn	n of org	ganization:	: 🗹 Corporation 🗌 Trust 🔲 Assoc	iation ☐ Other ►	L Year of for	mation: 1984 M		of legal domicile:
						1112		
Pa	irt I		mary					
			scribe the organization's mission or	most significant activities: EXPANDS RESOURCES, IDENTIFIES AN	D ACCELERA	TES SOLUTIONS	ΔΝΟ	RECOGNIZES
ų				TIMORE CITY PUBLIC SCHOOLS EXPER				
=	_							
Ě								
Acuviues & Governance	١ , ,	^haalı +hi	is boy • D if the organization disc	ontinued its operations or disposed of	mara than 2E	'0/ of its not asso	t o	
5				body (Part VI, line 1a)			S.	19
ර උ			•	the governing body (Part VI, line 1b)			4	18
	l		•	endar year 2019 (Part V, line 2a)			5	211
			, ,	essary)			6	0
3	l		•	VIII, column (C), line 12		• •	7a	0
	l					•	-	
	D I	vet unrei	ated business taxable income from	Form 990-T, line 39			7b	0
					-	Prior Year		Current Year
햧	l		tions and grants (Part VIII, line 1h)			23,964,584	-	18,110,415
Ravenue	l	-	service revenue (Part VIII, line 2g)			0	ļ	0
Ğ.			ent income (Part VIII, column (A), lir	• •		127,078		191,696
	l		venue (Part VIII, column (A), lines 5	, , , , , , , , , , , , , , , , , , , ,		0		0
				t equal Part VIII, column (A), line 12)		24,091,662		18,302,111
	13 0	Grants ar	nd similar amounts paid (Part IX, co	lumn (A), lines 1–3)		1,781,898		2,843,374
	14 E	Benefits p	paid to or for members (Part IX, col	umn (A), line 4)		0		0
8	15 9	Salaries,	other compensation, employee ber	nefits (Part IX, column (A), lines 5–10)		3,343,336		5,406,349
€ SE	16 a l	Professio	nal fundraising fees (Part IX, colum	ın (A), line 11e)		0		0
Expenses	b⊤	Fotal fundr	raising expenses (Part IX, column (D), lin	ne 25) ▶248,160				
D)	17 (Other exp	penses (Part IX, column (A), lines 1	la-11d, 11f-24e)		7,708,937		10,344,415
	18 ⊺	Total exp	enses. Add lines 13–17 (must equa	al Part IX, column (A), line 25)		12,834,171		18,594,138
	19 F	Revenue	less expenses. Subtract line 18 from	m line 12		11,257,491		-292,027
5 9					Beginnir	ng of Current Year		End of Year
net Assets or Fund Balances								
Ba			ets (Part X, line 16)			22,874,981		23,667,148
2 6	21 7	Total liab	ilities (Part X, line 26)			1,781,405		2,853,663
Zű	22 N	Vet asset	s or fund balances. Subtract line 2	1 from line 20		21,093,576		20,813,485
	rt II		ature Block					
				ned this return, including accompanying Declaration of preparer (other than off				
	nowled		if, it is crac, correct, and complete.	beclaration of preparer (other than on	icci) is based	on an imormacio	11 O1 V	men preparer nas
		l k						
		Signatu	* ure of officer			021-03-08 ate		
Sign		Joignace	are or officer			dic		
lere	:		ADKINS CHIEF FINANCIAL OFFICER					
		<u> </u>	r print name and title	T6		T		
		P	rint/Type preparer's name		Date 2021-03-08	heck if PTIN	I 528850)
Paic		<u> </u>	DEMPO SOUTO DO	<u>l</u>	s.	elf-employed		
-	oare	.	irm's name DEMBO JONES PC			ïrm's EIN ► 52-107	3331	
Jse	Onl	у 🔚	irm's address ► 8850 STANFORD BLVD S	STE 2000	P	hone no. (410) 290	-0770	
			COLUMBIA, MD 21045					
/lav/+	he IDC	discuss		n above? (see instructions)	I		V	es 🗆 No
ıay t	באז ביו	uiscuss	uns recurr with the preparer snow	n apove: (see instructions)			ا لت	€2 □ NO

Form	990 (2	019)					Page 2
Pa	rt III	Statement	of Program Servic	e Accomplis	hments		
		Check if Scheo	lule O contains a respo	nse or note to	any line in this Part III .		🗆
1	Briefly	describe the o	rganization's mission:				
						CELERATES SOLUTIONS, AND REC AND EQUITABLE EDUCATION.	OGNIZES EXCELLENCE SO
2	the pri	or Form 990 or	990-EZ?		vices during the year wh	nich were not listed on	☐ Yes ☑ No
_		•	se new services on Sch				
3	service	es?	cease conducting, or m se changes on Schedul		changes in how it condu	cts, any program	☐ Yes ☑ No
4	Sectio	n 501(c)(3) and		ns are required	to report the amount o	argest program services, as meas f grants and allocations to others,	
4a	(Code:) (Expenses \$	4,007,583	including grants of \$) (Revenue \$)
	See Ad	ditional Data					,
4b	(Code:	ditional Data) (Expenses \$	1,661,744	including grants of \$	3,250) (Revenue \$)
	See Au	dicional Data					
4c	(Code:) (Expenses \$	2,783,444	including grants of \$) (Revenue \$)
	See Ad	ditional Data					
	(Code:) (Expenses \$	9,526,312	including grants of \$	2,840,124) (Revenue \$)
4d			es (Describe in Schedu	•		24.) (2	
	(Expe			uding grants of	·	24) (Revenue \$)
<u>4e</u>	Total	program serv	ice expenses ►	17,979,0	83		Form 990 (2019)

18

19

Pai	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? <i>If "Yes," complete Schedule C, Part I</i>	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 $\ref{20}$.	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? <i>If "Yes," complete Schedule D.</i> Part 21	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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III 3	8		No
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? <i>If "Yes," complete Schedule D, Part V</i>	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	
	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 2	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	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 2	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🥦	11e	Yes	
	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	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
	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		No

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

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

lines 1c and 8a? If "Yes," complete Schedule G, Part II

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Nο

No

Nο

18

19

20a

20b

21

Yes

orm 9	990 (2019)			Page 4
Part	Checklist of Required Schedules (continued)			
			Yes	No
	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
	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? <i>If "Yes," complete Schedule J</i>	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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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? <i>If "Yes," complete Schedule L,</i> Part I	25b		No
	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> 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):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
	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
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
	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
	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		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
	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 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Pari	Statements Regarding Other IRS Filings and Tax Compliance		'	
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 269	$\overline{}$	Yes	No

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

Par	tV Statements Regarding Other IRS Filings and Tax Compliance (continued)			rage 3
	Enter the number of employees reported on Form W-3, Transmittal of Wage and			
	Tax Statements, filed for the calendar year ending with or within the year covered by			
L	this return	2b	Yes	
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		103	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country: ▶			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No ——
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
		7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form	_		
	1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	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?	15		No
16	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? . If "Yes," complete Form 4720, Schedule O.	16		No

01111	330 (2	015)			rage
Par	t VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 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	" respo	onse to i	lines
Se	ction	A. Governing Body and Management			
				Yes	No
1a		the number of voting members of the governing body at the end of the tax year 19			
	body,	re are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee or r committee, explain in Schedule O.			
b	Enter	the number of voting members included in line 1a, above, who are independent 1b 18			
2		ny officer, director, trustee, or key employee have a family relationship or a business relationship with any other , director, trustee, or key employee?	2		No
3		e organization delegate control over management duties customarily performed by or under the direct supervision cers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did th	e organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did th	e organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6		e organization have members or stockholders?	6		No
7a		e organization have members, stockholders, or other persons who had the power to elect or appoint one or more person of the governing body?	7a		No
b		ny governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or ns other than the governing body?	7b		No
8		e organization contemporaneously document the meetings held or written actions undertaken during the year by llowing:			
а	The g	overning body?	8a	Yes	
b	Each o	committee with authority to act on behalf of the governing body?	8 b	Yes	
9		re any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the ization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction	B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code		
				Yes	No
		e organization have local chapters, branches, or affiliates?	10a		No
	and b	s," did the organization have written policies and procedures governing the activities of such chapters, affiliates, ranches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	form?		11a	Yes	
		be in Schedule O the process, if any, used by the organization to review this Form 990			
		e organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were conflic	officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to ts?	12b	Yes	
С		e organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in ule O how this was done</i>	12c	Yes	
13	Did th	e organization have a written whistleblower policy?	13	Yes	
14		e organization have a written document retention and destruction policy?	14	Yes	
15	Did th	e process for determining compensation of the following persons include a review and approval by independent os, comparability data, and contemporaneous substantiation of the deliberation and decision?			
		ganization's CEO, Executive Director, or top management official	15a	Yes	
b		officers or key employees of the organization	15b	Yes	
		s" to line 15a or 15b, describe the process in Schedule O (see instructions).			
	taxab	e organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a e entity during the year?	16a		No
b	in joir	s," did the organization follow a written policy or procedure requiring the organization to evaluate its participation t venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt with respect to such arrangements?	16b		
		C. Disclosure			
17	List th	e states with which a copy of this Form 990 is required to be filed▶ MD			
18		n 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s available for public inspection. Indicate how you made these available. Check all that apply.			
		wn website 🗹 Another's website 🗹 Upon request 🗌 Other (explain in Schedule O)			
19		be in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest, and financial statements available to the public during the tax year.			
20		the name, address, and telephone number of the person who possesses the organization's books and records: CK ADKINS 800 NORTH CHARLES STREET SUITE 400 BALTIMORE, MD 21201 (410) 685-8300			
			F	orm 99	0.(201)

Part VII

(17) MICHELE HONG

DIRECTOR

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part $\mbox{VII}\,\,$.

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax

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

of reportable compensation from the organization	n and any relate	ed orgai	nizati	ons.						,,000
• List all of the organization's former directo organization, more than \$10,000 of reportable co See instructions for the order in which to list the	ompensation fro	m the								
Check this box if neither the organization no	•		ion c	omp	ens	ated a	anv	current officer. dire	ctor, or trustee.	
(A) Name and title	(B) Average hours per week (list any hours	Position that pers	on (do an on on is	(C) o not e bo both	t che ox, u h an or/tr	eck m Inless office ustee	ore er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	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)	organization and related organizations
(1) BETSY NELSON CHAIR	1.00	Х		х				0	0	0
(2) BETH ANN FELDER VICE CHAIR	1.00	х		х				0	0	0
(3) JIM MATHIAS VICE CHAIR	1.00	х		х				0	0	0
(4) ADINA AMITH DIRECTOR	1.00	Х						0	0	0
(5) ILENE BERMAN DIRECTOR	1.00	х						0	0	0
(6) JEAN E LEWIS DIRECTOR	1.00	х						0	0	0
(7) ROGER SCHULMAN PRESIDENT & CEO	40.00	Х		х				201,882	0	9,511
(8) SCOTT ROBERT WILSON DIRECTOR	1.00	х						0	0	0
(9) DR MAXINE JOHNSON WOOD SECRETARY	1.00	Х		х				0	0	0
(10) ABHIJEET BHUTRA DIRECTOR	1.00	Х						0	0	0
(11) CINDA HUGHES TREASURER	1.00	Х		х				0	0	0
(12) DORA DANIEL DIRECTOR	1.00	х						0	0	0
(13) SARA MILSTEIN DIRECTOR	1.00	Х						0	0	0
(14) KIMBERLY J WIGGINS DIRECTOR	1.00	Х						0	0	0
(15) JILL FEINBERG DIRECTOR	1.00	х						0	0	0
(16) MELANIE HOOD WILSON DIRECTOR	1.00	х						0	0	0
	1 00			\vdash	 	 				

1.00

Section B. Independent Contractors Section B. Independent Contractors that received more than \$100,000 of compensation from the organization and related organizations greater than \$150,000? If "res," complete Schedule J for such individual for Section B. Independent Contractors	Form 990 (2019)											Page 8
Name and title Average nour per part of the check more han one box, unless person director/crustee) Average director/crustee Average director/crustee) Average director/crustee		i i	ey Em	ploy			d Hiç	he؛		1	ntinued)	
organizations below cotted by the property of		Average hours per week (list any hours	than o	one bo ooth a	lo not lox, u an off tor/t	ot che unles fficer truste	ss pers r and a tee)	son a	Reportable compensation from the organization	Reportable compensation from related organizations	Estim amount comper from	nated of other nsation n the
Indicate		organizations below dotted	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			rela	ited
Section B. Sub-Total	DIRECTOR	1.00	×							0 0		0
X 131,464 0 0 0 0 0 0 0 0 0	DIRECTOR	1.00	x							0 (0
X 154,136 0 0 C EDUTY DIRECTOR 40.00 X 112,982 0 C EDUTY DIRECTOR 40.00 X 112,982 0 C EDUTY DIRECTOR 40.00 X 112,982 0 C EDUTY DIRECTOR 10 Sub-Total	SENIOR PROGRAM MANAGER	40.00	ļ				X		131,46	4 0		0
22 JANELLE GENDRARO 40.00 X 112,982 0 (2	` <i>`</i>	40.00	<u> </u>		'	'	x	'	154,13	6	٥	0
1b Sub-Total	(22) JANELLE GENDRANO						X		112,98	2 (,	0
c Total from continuation sheets to Part VII, Section A	DEPUTY DIRECTOR							Ľ				
c Total from continuation sheets to Part VII, Section A			<u> </u>			-	<u> </u>	-	<u> </u>	<u> </u>	<u> </u>	
c Total from continuation sheets to Part VII, Section A												
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 4 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	c Total from continuation sheets to Part V	/II, Section A				•	•		522.164			2.544
of reportable compensation from the organization ▶ 4 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual												9,511
Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual			Jiose ii.		1000				eu more than \$10			
line 1a? If "Yes," complete Schedule J for such individual	3 Did the organization list any former office	er, director or t	rustee,	key	emp	oloye	e, or l	high	est compensated (employee on	Yes	No
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	line 1a? If "Yes," complete Schedule J for	such individual	/ . .	·	•	•		٠.		3	<u> </u>	No
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) Description of services Compensation STRATEGIC LEADERSHIP PARTNERS IN EDUCATI TOWER HILL RD SOW, NH 03304 STRATEGIC SIGNS LIBRARY DESIGN LIBRARY DESIGN 147,044 1305 FALLS ROAD 200 SALTIMORE, MD 21209 HANOVER RESEARCH COUNCIL LADI WILSON BLVD 9TH FLOOR RRILINGTON, VA 22203 EDSCALE LLC BROS COVENT GARDEN TERRACE DLNEY, MD 20832 LEEVATION EDUCATIONAL CONSULTING GROUP CONSULTING 111,705 R806 FURMAN PARKWAY RIVERDALE, MD 20737 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of	organization and related organizations gre										↓ Yes	
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) (C) (C) (C) (C) (C) (C												No
from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Name and business address STRATEGIC LEADERSHIP PARTNERS IN EDUCATI TOWER HILL RD BOW, NH 03304 STRATEGIST LEADERSHIP PARTNERS IN EDUCATI TOWER HILL RD BOW, NH 03304 STRATEGIST LEADERSHIP PARTNERS IN EDUCATI TOWER HILL RD BOW, NH 03304 STRATEGIST LEADERSHIP PARTNERS IN EDUCATI TOWER HILL RD BOW, NH 03304 STRATEGIST LEADERSHIP PARTNERS IN EDUCATI TOWER HILL RD BOW, NH 03304 STRATEGIST LEADERSHIP PARTNERS IN EDUCATI TOWER HILL RD BOW, NH 03304 STRATEGIST LEADERSHIP PARTNERS IN EDUCATI STRATEGIST LEADERSHIP PARTNERS STRATEGIST LEADERSHIP STRATEGIST LEADERSHI	Section B. Independent Contractors	<u> </u>			_	_		_				
Name and business address Description of services Compensation TRATEGIC LEADERSHIP PARTNERS IN EDUCATI CONSULTING STRATEGIC LEADERSHIP PARTNERS IN EDUCATI STRATEGIC LEADERSHIP PARTNERS IN EDUCATI STRATEGIC LEADERSHIP PARTNERS STRATEGIC LEADERSHIP ST											nsation	
STRATEGIC LEADERSHIP PARTNERS IN EDUCATI L TOWER HILL RD SOW, NH 03304 KIRK DESIGNS LIBRARY DESIGN 147,044 S305 FALLS ROAD 200 SALTIMORE, MD 21209 4ANOVER RESEARCH COUNCIL L401 WILSON BLVD 9TH FLOOR RICHINGTON, VA 22203 EDSCALE LLC CONSULTING 123,600 2803 COVENT GARDEN TERRACE DLNEY, MD 20832 ELEVATION EDUCATIONAL CONSULTING GROUP S806 FURMAN PARKWAY RIVERDALE, MD 20737 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of		(A)					-	-	1	(B)		
30W, NH 03304 XIRK DESIGNS LIBRARY DESIGN 147,044 3305 FALLS ROAD 200 3ALTIMORE, MD 21209 HANOVER RESEARCH COUNCIL CONSULTING 135,000 H401 WILSON BLVD 9TH FLOOR ARLINGTON, VA 22203 EDSCALE LLC CONSULTING 123,600 2803 COVENT GARDEN TERRACE DLNEY, MD 20832 ELEVATION EDUCATIONAL CONSULTING GROUP CONSULTING 111,705 8806 FURMAN PARKWAY RIVERDALE, MD 20737 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of	STRATEGIC LEADERSHIP PARTNERS IN EDUCATI	USINESS audi Coo			—	_		—		·	Compe	
LIBRARY DESIGN 147,044 3305 FALLS ROAD 200 3ALTIMORE, MD 21209 HANOVER RESEARCH COUNCIL LIBRARY DESIGN 135,000 CONSULTING 135,000 LIBRARY DESIGN 147,044 CONSULTING 135,000 LIBRARY DESIGN 147,044 CONSULTING 135,000 LIBRARY DESIGN 147,044 CONSULTING 135,000 LIBRARY DESIGN 147,044 LIB	1 TOWER HILL RD											
BALTIMORE, MD 21209 HANOVER RESEARCH COUNCIL H	KIRK DESIGNS								LIBRARY DES	JIGN		147,044
H401 WILSON BLVD 9TH FLOOR ARLINGTON, VA 22203 EDSCALE LLC CONSULTING 123,600 2803 COVENT GARDEN TERRACE DLNEY, MD 20832 ELEVATION EDUCATIONAL CONSULTING GROUP CONSULTING 111,705 2806 FURMAN PARKWAY RIVERDALE, MD 20737 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of	6305 FALLS ROAD 200 BALTIMORE, MD 21209											
EDSCALE LLC CONSULTING 123,600 2803 COVENT GARDEN TERRACE DLNEY, MD 20832 ELEVATION EDUCATIONAL CONSULTING GROUP CONSULTING 111,705 2806 FURMAN PARKWAY RIVERDALE, MD 20737 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of	HANOVER RESEARCH COUNCIL 4401 WILSON BLVD 9TH FLOOR								CONSULTING	ı		135,000
DLNEY, MD 20832 ELEVATION EDUCATIONAL CONSULTING GROUP CONSULTING 8806 FURMAN PARKWAY RIVERDALE, MD 20737 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of	EDSCALE LLC								CONSULTING	i	+	123,600
8806 FURMAN PARKWAY RIVERDALE, MD 20737 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of	OLNEY, MD 20832											
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of	ELEVATION EDUCATIONAL CONSULTING GROUP 6806 FURMAN PARKWAY								CONSULTING	ı		111,705
	2 Total number of independent contractors (in	ncluding but not	t limited	d to tl	hose	e list	ed abo	ove)	who received mo	re than \$100,000 o	f	

orm 9 Part		(2019) Statement	of F	Revenue						Page 9
					respo	onse or note to any	/ line in this Part VIII		(0)	🗆
							(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
. s	18	a Federated campa	igns	· . [1a			revenue		312 - 314
Contributions, Gifts, Grants and Other Similar Amounts	ı	b Membership due:	s.	. [1 b					
š, Gr Amo	•	c Fundraising even		Ļ	1 c					
Sifts Iar 7	(d Related organizae Government grants		Ļ	1d	<u> </u>				
ns, (imi	'	All other contribution		Ļ	1e	<u> </u>				
ntion er S	'	and similar amount above			1f	18,110,415				
ë ë	!	g Noncash contributio	ns in	cluded in	1g					
Sont		h Total. Add lines	1a-1	f		>				
						Business Code	18,110,415			
	2a									
ne ne										
Program Service Revenue	b									
ice I	С									
Serv	d									
ram										
Prog	е									
	f	All other program	serv	rice revenue.						
		Total. Add lines 2						T	1	
	3	Investment income similar amounts)		luding divide			191,69	5		191,696
		Income from invest			mpt bo		<u> </u>			
	5	Royalties	$\dot{\Box}$	(i) Rea	• il	(ii) Personal	<u> </u>			
	6-	Gross rents	6a	()						
		Less: rental	Ua							
		expenses Rental income	6b							
	С	or (loss)	6с							
	C	Net rental income	or ((ii) Ohbar				
	7a	Gross amount		(i) Securi	ties	(ii) Other	-			
		from sales of assets other	7a							
	b	than inventory Less: cost or	<u> </u>							
	_	other basis and sales expenses	7b							
	С	Gain or (loss)	7c							
	c	Net gain or (loss)	•			· · · •				
<u>e</u>	8a	Gross income from fu (not including \$	ındra	ising events of						
Ven.		contributions reporte See Part IV, line 18			8a					
Re	b	Less: direct expen	ses		8b					
Other Revenue	c	: Net income or (los	s) fr	om fundraisi	ing ev	ents 🕨				
	9a	Gross income from	gami	ing activities.						
		See Part IV, line 19			9a					
		Less: direct expen : Net income or (los			9b activit	ies \blacktriangleright				
	10	aGross sales of inve returns and allowa	entor	ry, less s	10a					
	b	Less: cost of good	s sol	ld	10b					
	C	Net income or (los Miscellaneo			invent	ory ► Business Code	T			
	11		us K	evenue		Pasiliess Code				
	b	,								
	C									
	,	All other revenue								
		Total. Add lines 1				>				
	12	: Total revenue. S	ee ir	nstructions .			18,302,111	1	0	0 191,696
							10,302,11	<u>+1</u>	<u> </u>	U 191,696

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must co	omplete all columns	All other organization	ns must complete colu	ımn (A).
Check if Schedule O contains a response or note to an		_	ns must complete cold	\square
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,843,374	2,843,374		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	209,827	193,579	9,666	6,582
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	3,972,982	3,665,331	183,028	124,62
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits	914,283	843,485	42,119	28,67
10 Payroll taxes	309,257	285,309	14,247	9,70
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	73,742	72,455	726	56
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion	178,603	178,603		
13 Office expenses	69,369	59,965	6,301	3,10
14 Information technology	14,255	11,545	1,816	89
15 Royalties				
16 Occupancy	154,538	122,825	21,248	10,46
17 Travel	360,009	359,171	561	27
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	25,098	25,098		
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PROFESSIONAL FEES	7,399,815	7,270,706	72,815	56,29
b SUPPLIES	1,051,964	1,046,023	3,981	1,96
c TRAINING AND EDUCATION	363,493	363,493	0	
d MEALS AND ENTERTAINMENT	343,182	341,220	1,314	64
e All other expenses	310,347	296,901	9,073	4,37
25 Total functional expenses. Add lines 1 through 24e	18,594,138	17,979,083	366,895	248,160
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.		. ,		·

Form 990 (2019)

2

3

Fund Balances

ō 29

Assets 30

27

28

31

32

33

(B)

End of year

Beginning of year

347,889

12,206,553

9,814,178

24,766

109,527

366,912

5,156

22,874,981

1,764,905

16.500

1

2

3

4

5

6 7

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10c

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12 13

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22 23

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27

28

29

30

31

32

33

0 25

1.781.405

1,054,961

20,038,615

21,093,576

22,874,981

Page **11**

1,275,987

10,197,374

11,662,689

19,721

122,043

384,178

5,156

23,667,148

2,011,963

841.700

2.853.663

1.185,434

19,628,051

20,813,485

23,667,148

Form 990 (2019)

Check if Schedule O contains a response or note to any line in this Part IX .		
	П	
		Regin

Cash-non-interest-bearing Savings and temporary cash investments . . .

Pledges and grants receivable, net . . . Accounts receivable, net Loans and other payables to any current or former officer, director, trustee,

key employee, creator or founder, substantial contributor, or 35% controlled Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). Notes and loans receivable, net Inventories for sale or use . . Prepaid expenses and deferred charges .

10a 10b

basis. Complete Part VI of Schedule D b Less: accumulated depreciation Investments—publicly traded securities .

Assets 10a Land, buildings, and equipment: cost or other 233,791 111,748 11 12 Investments—other securities. See Part IV, line 11 . . .

13 Investments—program-related. See Part IV, line 11 14 Intangible assets . 15 Other assets. See Part IV, line 11 . . . 16 **Total assets.** Add lines 1 through 15 (must equal line 34) .

17 Accounts payable and accrued expenses . 18

Grants payable . 19 Deferred revenue . . . 20

Tax-exempt bond liabilities . . .

Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

21 22

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

Liabilities 23 24 25

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

Unsecured notes and loans payable to unrelated third parties .

26 Total liabilities. Add lines 17 through 25 . .

Organizations that follow FASB ASC 958, check here <a> \square and

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

Organizations that do not follow FASB ASC 958, check here > \(\begin{align*} \text{and} \\ \text{and} \end{align*}

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

Retained earnings, endowment, accumulated income, or other funds

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single
Audit Act and OMB Circular A-133?

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.

Form 990 (2019)

Additional Data

Software ID:

Software Version:

EIN: 52-1129402

Name: FUND FOR EDUCATIONAL EXCELLENCE INC.

Form 990 (2019)

Form 990, Part III, Line 4a: IN AN EFFORT TO HELP STUDENTS DEVELOP THE KNOWLEDGE AND SKILLS THEY NEED TO PURSUE THE FUTURE THAT CALLS THEM, BALTIMORE CITY PUBLIC SCHOOLS HAS DEVELOPED BUILDING A GENERATION: CITY SCHOOLS' BLUEPRINT FOR SUCCESS. BASED ON RESEARCH AND CONVERSATIONS WITH HUNDREDS OF STAKEHOLDERS, THE BLUEPRINT FOCUSES ON THREE AREAS TO HELP STUDENTS REACH THEIR GOALS: STUDENT WHOLENESS; LITERACY; AND STAFF LEADERSHIP. THESE AREAS GO HAND IN HAND: IF STUDENTS ARE MOTIVATED AND EXCITED ABOUT LEARNING. HAVE THE SKILLS TO THINK CRITICALLY, ANALYZE DEEPLY, AND EXPRESS THEMSELVES POWERFULLY, AND HAVE ADULTS AROUND THEM WHO ENCOURAGE THEM TO PERSIST AND EXCEL, THEY CAN PROGRESS TOWARD HIGH SCHOOL GRADUATION AND POSTSECONDARY SUCCESS.

Form 990, Part III, Line 4b: MARYLAND OUT OF SCHOOL TIME (MOST) IS A AFTERSCHOOL NETWORK COMMITTED TO IMPROVING THE QUALITY OF AFTERSCHOOL AND SUMMER LEARNING OPPORTUNITIES FOR ALL YOUNG PEOPLE. THE ORGANZIATION HAS ESTABLISHED QUALITY STANDARDS, BUILT INNOVATIVE LEARNING COMMUNITIES, AND EXECUTED

SUCCESSFUL ADVOCACY CAMPAIGNS TO IMPROVE FUNDING AND POLICY. THIS PROGRAM IS A FISCALLY SPONSORED CLIENT.

BALTIMORE'S PROMISE IS A DATA-DRIVEN, CITY-WIDE COLLABORATIVE COMMITTED TO PRIORITIZING & IMPROVING HEALTH, EDUCATION & CAREER READINESS OUTCOMES FOR CITY YOUTH, THIS PROGRAM IS A FISCALLY SPONSORED CLIENT.

Form 990, Part III, Line 4c:

efil	e GR/	<u>APHIC prii</u>	nt - DO NOT PROCES	S As Filed Data -	DLN: 9	DLN: 93493067005391		
SCI	HED	ULE A	Dublia	Charity Statu	e and Dul	hlic Sunn	ort	OMB No. 1545-0047
	m 99		Complete if the	organization is a sect 4947(a)(1) nonexe Attach to Form	tion 501(c)(3) o empt charitable 990 or Form 99	organization or trust. 00-EZ.	a section	2019
		the Treasury	► Go to <u>www.</u>	<i>irs.gov/Form990</i> for i	nstructions and	I the latest info	ormation.	Open to Public Inspection
Nam	e of th	ne organiza	tion KCELLENCE INC				Employer identific	ation number
							52-1129402	
	rt I		for Public Charity St a private foundation beca				See instructions.	
1	n yannz		onvention of churches, or	•	•		(A)(i)	
2		•	scribed in section 170(t					
3			or a cooperative hospital s		,	, ,		
4		·	·	_			•	ntor the beenitely
7	Ш	name, city,	esearch organization ope and state:	ated in conjunction with	a nospital descri	ibed in Section .	170(D)(1)(A)(III). E	nter the hospital's
5			ation operated for the ber (iv). (Complete Part II.)	efit of a college or unive	rsity owned or օր	perated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	tate, or local government	or governmental unit de	escribed in sectio	on 170(b)(1)(<i>A</i>	()(v).	
7	✓		ation that normally receive (O(b)(1)(A)(vi). (Compl		s support from a	governmental ι	init or from the gener	al public described in
8			ty trust described in sect	•	(Complete Part I	I.)		
9			ural research organization ant college of agriculture					ege or university or a
10		from activit investment	ation that normally receiv ties related to its exempt income and unrelated bu See section 509(a)(2).	functions—subject to cer siness taxable income (l	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross
11			ation organized and opera		r public safety. S	See section 509	(a)(4).	
12		more public	ation organized and opera ly supported organization through 12d that describ	ns described in section 5	509(a)(1) or se	ction 509(a)(2). See <mark>section 509</mark> (a	
a		Type I. A so	supporting organization op n(s) the power to regular Part IV, Sections A and	perated, supervised, or c y appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
b		Type II. A manageme	supporting organization s nt of the supporting organ plete Part IV, Sections	supervised or controlled in it is a same in the same i			• • • • • • • • • • • • • • • • • • • •	_
c		Type III f	unctionally integrated. organization(s) (see instru	A supporting organizatio				ited with, its
d		Type III n	on-functionally integra integrated. The organiza i). You must complete I	ted. A supporting organ tion generally must satis	ization operated	in connection wi	th its supported organ	
e		Check this	box if the organization re- or Type III non-functiona	ceived a written determir	nation from the I		pe I, Type II, Type II	I functionally
f	Enter		of supported organization		_		<u> </u>	
g			ing information about the	<u> </u>				
	(i) N	Name of supported of the second of the secon		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
			I					
Tota			tion Act Notice, see the	<u> </u>	Cat. No. 11285			<u> </u> 90 or 990-EZ) 2019

Р	art III Support Schedule for						
	(Complete only if you cl						er Part II. If
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)		
30	Calendar year	() 2015	(1) 2016	() 2247	(1) 2010		(O.T.)
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.").						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
•	organization's benefit and either paid						
_	to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
L	3 received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6.)						
Se	ection B. Total Support		1				Г
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975.						
С	Add lines 10a and 10b.						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on.						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
12	(Explain in Part VI.) Total support. (Add lines 9, 10c,						
13	11, and 12.).						
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>
	check this box and stop here						▶ ⊔
	ection C. Computation of Public S			! (6))		1 1	
15	Public support percentage for 2019 (lin		•			15	
16	Public support percentage from 2018 S	-	<u> </u>			16	
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17	
17 10	Investment income percentage for 201	-		-		17	
18 10-	331/3% support tests—2019. If the		•			18 33 1/3% and lin	e 17 is not
	more than 33 1/3%, check this box and s						
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the						
ט	not more than 33 1/3%, check this box	-			•		_
20	Private foundation. If the organization	-	-				
	ritvate foundation. If the organization	ni ulu not check a	a DOX ON TIME 14, I	.a, or iad, check	, unis pox and see I	HSGRUCGONS	. 📂 📖

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

6

7

8

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,	
	describe the designation. If historic and continuing relationship, explain.	1

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.

3a 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.

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

3с

10b

Schedule A (Form 990 or 990-EZ) 2019

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 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

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported 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? 5b

5c Substitutions only. Was the substitution the result of an event beyond the organization's control?

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

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

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

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

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," answer line 10b below. 10a

	edule A (101111 550 01 550 E2) 2015			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	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		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		
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	-		
2	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	2		
	organization.			
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	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations		v	
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
_		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax			
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see 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.	ſ	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		
ı	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? <i>Provide details in Part VI</i> .	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		

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O Check here if the organization satisfied the Integral Part Test as a qualifying true.			. Part VIV See
	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (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		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions	
7	Total annual distributions. Add lines 1 through 6.	

7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to wh details in Part VI). See instructions	nich the organization is respor	nsive (provide	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations	(i)	(ii) Underdistributions	(iii) Distributable

8	Distributions to attentive supported organizations to wh details in $\bf Part\ VI)$. See instructions	ich the organization is respons	sive (provide	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019:			_

9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
b From 2015			
c From 2016			
d From 2017			

f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2019 distributable amount		
i Carryover from 2014 not applied (see instructions)		
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4 Distributions for 2019 from Section D, line 7:		
<u></u> \$		
Applied to underdistributions of prior years		
b Applied to 2019 distributable amount		
c Remainder. Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to		

e From 2018.

d Excess from 2018. e Excess from 2019.

j Remainder. Subtract lines 39, 31, and 31 from 31.		
4 Distributions for 2019 from Section D, line 7:		
<u> \$ </u>		
Applied to underdistributions of prior years		
b Applied to 2019 distributable amount		
c Remainder. Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.		
7 Excess distributions carryover to 2020. Add lines 3j and 4c.		

	See instructions.		
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.		
7	Excess distributions carryover to 2020. Add lines 3j and 4c.		
8	Breakdown of line 7:		
а	Excess from 2015		
b	Excess from 2016		
	Excess from 2017		

Schedule A (Form 990 or 990-EZ) (2019)

Additional Data

Software ID: Software Version:

EIN: 52-1129402

Name: FUND FOR EDUCATIONAL EXCELLENCE INC

Schedule A (Form 990 or 990-EZ) 2019

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).

instructions).

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

SCHEDULE C (Form 990 or 990-

EZ)

5

Political Campaign and Lobbying Activities

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

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

OMB No. 1545-0047

DLN: 93493067005391

Inspection

Department of the Treasury ▶Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. • Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. • Section 527 organizations: Complete Part I-A only. If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of the organization **Employer identification number** FUND FOR EDUCATIONAL EXCELLENCE INC 52-1129402 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) 2 3 Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 ☐ Yes □ No Was a correction made? ☐ Yes ☐ No If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b....... Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds. If none, enter and promptly and -0-. directly delivered to a separate political organization. If none, enter -0-. 2

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)		(b)	
activity.	Yes	No	,	Amoun	ıt
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a Volunteers?		No			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	┪		
c Media advertisements?	Yes		┪	17	75,36
d Mailings to members, legislators, or the public?	Yes		+		1,46
e Publications, or published or broadcast statements?		No	+		
f Grants to other organizations for lobbying purposes?		No	+		
g Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		+	8	33,27
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes		+		1,70
i Other activities?	Yes		+		5,17
j Total. Add lines 1c through 1i			+		6,98
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No			-,
b If "Yes," enter the amount of any tax incurred under section 4912		'''	┥		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			-		
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5) 0	r sect	rion		
501(c)(6).	(3), 0	i sece			
(-)(-)(-)				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		ſ	1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		Ī	2		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?					
	· · · · · · · · · · · ·		3		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part	(5), o	r sect	ion !	5 01 (c)(6
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), o	r sect	ion !	 5 01 (c)(6
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."	(5), o	r sect	ion !	5 01 (c)(6
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	(5), o III-A	r sect	ion !	5 01 (c)(6
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	(5), o III-A	r sect	ion !	5 01 (c)(6
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	(5), o III-A 1 2a 2b	r sect	ion !	501(c)(6
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	(5), o III-A 1 2a 2b 2c	r sect	ion !	501(c)(6
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	(5), o III-A 1 2a 2b	r sect	ion !	501(c)(6
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." 1 Dues, assessments and similar amounts from members 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). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . 4 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	(5), o III-A 2a 2b 2c 3	r sect	ion !	501(c)(6
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	(5), o III-A 1 2a 2b 2c 3	r sect	ion !	501(c)(6
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." 1 Dues, assessments and similar amounts from members 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). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . 4 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? 5 Taxable amount of lobbying and political expenditures (see instructions)	(5), o III-A 2a 2b 2c 3	r sect	ion !	501(c)(6
Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	(5), o IIII-A 2a 2b 2c 3	r sect	tion !		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." 1 Dues, assessments and similar amounts from members 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). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . 4 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? 5 Taxable amount of lobbying and political expenditures (see instructions)	(5), o IIII-A 2a 2b 2c 3	r sect	tion !		

RESOURCES NECESSARY TO SUPPORT POLICY AND PRACTICE RESULTING IN INCREASED ACHIEVEMENT FOR BALTIMORE CITY PUBLIC SCHOOL STUDENTS.

SCHEDULE D

DLN: 93493067005391

OMB No. 1545-0047

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Open to Public

2019

Department of the Treasury

(Form 990)

Interi	nal Revenue Service	<u>1990</u> for instructions and the latest infor	mation. Inspection
	ame of the organization ND FOR EDUCATIONAL EXCELLENCE INC		Employer identification number
Đ	art I Organizations Maintaining Donor Advis	sed Funds or Other Similar Funds o	52-1129402
	Complete if the organization answered "Ye	s" on Form 990, Part IV, line 6.	Accounts.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex		
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?	or donor advisor, or for any other purpose o	
Pa	Complete if the arganization anguered "Vo	ell on Form 000 Port IV line 7	
1	Complete if the organization answered "Ye Purpose(s) of conservation easements held by the organ		
-	Preservation of land for public use (e.g., recreation	_ ' ' ' '	historically important land area
			historically important land area
	☐ Protection of natural habitat	☐ Preservation of a co	ertified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	qualified conservation contribution in the form.	m of a conservation Held at the End of the Year
а	Total number of conservation easements		2a
b	,	L	2b
С	Number of conservation easements on a certified historic	c structure included in (a)	2c
d	Number of conservation easements included in (c) acqui structure listed in the National Register	red after 7/25/06, and not on a historic	2d
3	Number of conservation easements modified, transferre tax year >	d, released, extinguished, or terminated by t	he organization during the
4	Number of states where property subject to conservatio	n easement is located >	
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds		of violations,
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing co	nservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, ▶ \$	handling of violations, and enforcing conserv	ation easements during the year
8	Does each conservation easement reported on line $2(d)$ and section $170(h)(4)(B)(ii)$?		70(h)(4)(B)(i)
9	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the	footnote to the organization's financial state	nse statement, and
Pa	the organization's accounting for conservation easemen rt III Organizations Maintaining Collections	of Art, Historical Treasures, or Othe	er Similar Assets.
_	Complete if the organization answered "Ye If the organization elected, as permitted under SFAS 11		toward and halance cheet works of
1a	art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finan	public exhibition, education, or research in fu	
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for publ following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		▶\$
	(ii)Assets included in Form 990, Part X		•
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS 1	cal treasures, or other similar assets for finar	
а			▶\$
b			<u> </u>

Cat. No. 52283D

Schedule D (Form 990) 2019

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

d Equipment .

Par	t IIII	Organizations M	aintaining Colle	ections of	Art, Histo	rical T	reas	ures, or Other	Similar Assets	(continued)	
3		g the organization's acq s (check all that apply):		, and other r	ecords, check	any of	the fo	ollowing that are a	significant use of it	s collection	
а		Public exhibition			d		Loar	or exchange prog	rams		
b		Scholarly research			е		Othe	er			
С		Preservation for future	e generations								
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.										
5	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?										
	rt IV	Complete if the or X, line 21.	ganization answe	ered "Yes"					d an amount on		
1a		e organization an agent ded on Form 990, Part I							_	es 🗆 N	lo
b	If "Y	es," explain the arrange	ement in Part XIII a	and complet	e the followin	a table:			Amount	:	
С		nning balance				=		1c			
d	_	tions during the year .						1d			_
е		ibutions during the year									_
f		ng balance						4.5			_
		_							Lille o D		_
2a		the organization include								es ∐ N	10
b		es," explain the arrange		Check here	if the explana	tion has	beer	provided in Part)	Ш ⊔		
ł c	rt V	Endowment Fund Complete if the org		ered "Yes"	on Form 99	0 Part	TV I	ine 1∩			
		complete if the or	gamzation answ	(a) Current		Prior yea			(d) Three years back	(e) Four yea	ars back
1 a	Begini	ning of year balance .	[3	30,870	325	,858	316,533	297,700		318,106
b	Contri	butions									
С	Net in	vestment earnings, gair	ns, and losses		20,262	34	1,704	34,385	42,362		14,402
d	Grants	s or scholarships	. [19,500	15,000		25,000
е		expenditures for facilition	es		23,510	29	9,692	4,410	7,379		8,808
f	Admin	nistrative expenses .	[1,150	1,150		1,000
g	End of	f year balance	[3	27,622	330	,870	325,858	316,533		297,700
2	Provi	ide the estimated perce	ntage of the currer	nt year end l	palance (line	1g, colu	mn (a	ı)) held as:			
а		d designated or quasi-e	ndowment >	<i>,</i> 	•	.	•	•			
b	Perm	nanent endowment 🕨	***************************************		•						
c		 porarily restricted endov	wment >								
Ī	The	percentages on lines 2a	, 2b, and 2c should	d equal 100%	% .						
3а		there endowment funds nization by:	not in the possess	sion of the or	ganization th	at are h	eld ar	nd administered for	r the	Yes	No
	(i) u	ınrelated organizations							3	Ba(i)	No
		related organizations .							3	a(ii)	No
b		es" on 3a(ii), are the re	-				? .			3b	
4		cribe in Part XIII the inte			's endowment	funds.					
Pa	rt VI				on Form 00	Λ D±	T\	ino 11a Cas Fai		no 10	
	Descr	Complete if the or ription of property	ganization answer (a) Cost or other		on Form 99 (b) Cost or othe					ne 10. (d) Book valu	ie
	שכטכו	ipaon or property	(investmen		(=) 5556 01 0011	54515 ()	(a) / tosamalacea o		(a) book valu	
1-	ا میدا										
	Land										
b	Bullair	ngs									

233,791

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

122,043

122,043

111,748

	(a) Description of security or category	(b)		od of valuation:
	(including name of security)	Book value	Cost or end-c	f-year market value
	al derivatives			
	Their equity interests			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Colum	In (b) must equal Form 990, Part X, col. (B) line 12.) Investments—Program Related.	•		
Lett ATTT	Complete if the organization answered 'Yes' on Form 990, I	Part IV, li		
	(a) Description of investment		(b) Book value	(c) Method of valuation: Cost or end-of-year market
(1)				value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	nn (b) must equal Form 990, Part X, col.(B) line 13.)		•	
	Other Assets. Complete if the organization answered 'Yes' on Form 990, P		<u> </u>	
		art IV ur	e 11d. See Form 990 D	art X. line 15.
	(a) Description	art IV, IIr	e 11d. See Form 990, P.	(b) Book value
		art IV, III	e 11d. See Form 990, P.	
(2)		art IV, IIr	e 11d. See Form 990, P.	
(2)		art IV, IIr	e 11d. See Form 990, P.	
(1) (2) (3) (4)		art IV, IIr	e 11d. See Form 990, P.	
(2) (3) (4) (5)		art IV, IIr	e 11d. See Form 990, P.	
(2) (3) (4) (5) (6)		art IV, IIr	e 11d. See Form 990, P.	
(2) (3) (4) (5) (6) (7)		art IV, IIr	e 11d. See Form 990, P.	
(2) (3) (4) (5) (6) (7) (8)		art IV, IIr	e 11d. See Form 990, P.	
(2) (3) (4) (5) (6) (7) (8) (9)	(a) Description	art IV, IIr	e 11d. See Form 990, P.	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9)	(a) Description (imm (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities.			(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9)	(a) Description (in property of the second			(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X	(a) Description (imn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part Y, Part Y, Part Y, Col.(B) line 15.)			(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Columnation of the columnation	(a) Description (mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes			(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal (1) PPP LOA (2)	(a) Description (mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes			(b) Book value (b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal (1) PPP LOA (2) (3)	(a) Description (mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes			(b) Book value (b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X) 1. (1) Federal (1) PPP LOA (2) (3) (4)	(a) Description (mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes			(b) Book value (b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X) 1. (1) Federal (1) PPP LOA (2) (3) (4) (5)	(a) Description (mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes			(b) Book value (b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X) 1. (1) Federal (1) PPP LOA (2) (3) (4) (5) (6)	(a) Description (mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes			(b) Book value (b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X) 1. (1) Federal (1) PPP LOA (2) (3) (4) (5) (6) (7)	(a) Description (mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes			(b) Book value (b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Columnation of the columnation of the columnatio	(a) Description (mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes			(b) Book value (b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X) 1. (1) Federal (1) PPP LOA (2) (3) (4) (5) (6) (7) (8) (9)	(a) Description (mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability income taxes		e 11e or 11f.See Form	(b) Book value (b) Book value

2

а

b

5

1

2

C

d

е

b

5

Part XIII

See Additional Data Table

3 4

Part XII

Schedule D (Form 990) 2019

Page 4

11,936

18,302,111

18,302,111

18,594,138

d Other (Describe in Part XIII.) 2d 2e е Subtract line **2e** from line **1** 3 3 4

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.

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . 4a

b Add lines **4a** and **4b** C

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 . . .

Donated services and use of facilities . . .

Prior year adjustments

Subtract line 2e from line 1

Add lines **4a** and **4b**

Supplemental Information

Other (Describe in Part XIII.) . . .

Add lines 2a through 2d .

Return Reference

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

Recoveries of prior year grants

4b

2a 2b

2c

2d

4a 4b

Explanation

2a

2b

2c

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

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

11.936

4c 5

2e

3 18,594,138 4c 5 18.594.138 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

Schedule D (Form 990) 2019

chedule D (Forn	n 990) 2019	Page 5
Part XIII	Supplemental Info	rmation (continued)
Return Reference		Explanation

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

EIN: 52-1129402

Name: FUND FOR EDUCATIONAL EXCELLENCE INC.

Explanation

THE ORGANIZATION'S INCOME TAX RETURNS ARE SUBJECT TO POSSIBLE FEDERAL EXAMINATION. GENERAL

Return Reference

Supplemental Information

PART X. LINE 2: THE FUND IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS CLASSIFIED BY THE INTERNAL REVENUE SERVICE AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION. ACCORDINGLY, NO PROVISION FOR INCOME TAXES IS MADE IN THE FINANCIAL STATEMENT S. THE FUND FOLLOWS THE PROVISIONS OF ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES UNDER THE INCOME TAXES TOPIC OF THE CODIFICATION. THE CODIFICATION REQUIRES THE EVALUATION OF TAX P OSITIONS, WHICH INCLUDES MAINTAINING ITS TAX-EXEMPT STATUS AND THE TAXABILITY OF ANY UNREL ATED BUSINESS INCOME, AND DOES NOT ALLOW RECOGNITION OF TAX POSITIONS WHICH DO NOT MEET A "MORE-LIKELY-THAN-NOT" THRESHOLD OF BEING SUSTAINED BY THE APPLICABLE TAX AUTHORITY. MANAG EMENT DOES NOT BELIEVE IT HAS TAKEN ANY TAX POSITIONS THAT WOULD NOT MEET THIS THRESHOLD.

LY FOR THREE YEARS AFTER THEY ARE FILED.

Supplemental Information				
Return Reference	Explanation			
	THE PERMANENT ENDOWMENT CONSISTS OF ONE DONOR RESTRICTED FUND ESTABLISHED TO PROVIDE A SOURCE OF INCOME TO RECOGNIZE TEACHER ACHIEVEMENT.			

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I

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

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

OMB No. 1545-0047

DLN: 93493067005391

Open to Public

Department of the Treasury Internal Revenue Service	► Attach to Form 990. ► Go to <u>www.irs.gov/Form990</u> for the latest information.						
Name of the organization FUND FOR EDUCATIONAL EXCEL	LENCE INC					Employer identific	ation number
		and Anniatana				52-1129402	
		and Assistance		#1	£		
Does the organization mai the selection criteria used	to award the grants	or assistance?				ce, and	☑ Yes 🗌 N
2 Describe in Part IV the org							
Part II Grants and Other that received more	Assistance to Don than \$5,000. Part I	nestic Organizations a I can be duplicated if ad	ind Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes	on Form 990, Part IV, line	21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of sect3 Enter total number of other							98 102
5 Enter total number of other				C-+ N- 50055			102

(Form 990)

Page **2**

Schedule I (Form 990) 2019

Schedule I (Form 990) 2019

(2) (3) (4)

(5) (6) (7) Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Explanation

Return Reference

GRANTS ISSUED - SCHEDULE I. TERMS OF ALL GRANTS ARE OUTLINED IN AWARD LETTERS AND MONITORED BY DESIGNATED PROGRAM STAFF. ALL GRANTS REQUIRE A FINAL NARRATIVE AND

FISCAL REPORT. GRANTS WITH MULTIPLE PAYMENTS REQUIRE BOTH INTERIM AND FINAL NARRATIVES AND FISCAL REPORTS. THE ORGANIZATION REPORTS ALL PART I, LINE 2 GRANTS TO ORIGINAL FUNDING SOURCE ANNUALLY.

Additional Data

BALTIMORE CITY PUBLIC

200 E NORTH AVENUE

611 N MONTFOR AVE BALTIMORE, MD 21202

BALTIMORE, MD 21202 FUSION PARTNERSHIPS INC

SCHOOLS

Software ID: **Software Version: EIN:** 52-1129402 Name: FUND FOR EDUCATIONAL EXCELLENCE INC

orm 330/3chedale 1, rate	zz/ Granco ana	Other Assistance to	o Donnescie Organiza	cionis ana Bonnese	C GOVERNMENT
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuatio (book, FMV, appraisa other)

501(C)(3)

(a) Name and address of organization or government (b) EIN (c) IRC section if applicable (d) Amount of cash grant (book, FMV, appraise other) (f) Method of valuation (book, FMV, appraise other)	Torin 330,0 chedule 1, Ture	LL, Grants and	Other Assistance to	bonnesac organiza	cions and bonicsc	c dovernments.
	organization	(b) EIN		l • *	cash	(book, FMV, apprais

Domestic Governments.						
nt of non-	(f) Method of valuation	(g) Desc				

cription of (h) Purpose of grant or assistance

ISUPPORT

91,514

119,900

non-cash assistance sal,

GRADE LEVEL READING

GRANT AND DISTRICT

SUMMER GRANT

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

52-2064235

52-2148413

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

SUMMER GRANT

SOCCER WITHOUT BORDERS	20-3786129	501(C)(3)	45,000		SUMMER
3700 EASTERN AVE					
BALTIMORE, MD 21224					

50,000

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

ACCESS ART INC 52-2275407 501(C)(3)

2446 WASHINGTON BLVD BALTIMORE, MD 21230

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 52-1336621 501(C)(3) 30.000 BANNER NEIGHBORHOODS ISUMMER GRANT COMMUNITY CORPORATION

SUMMER GRANT

55.000l

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

501(C)(3)

2911 PULASKI HIGHWAY BALTIMORE, MD 21224

52-1925614

CIVIC WORKS INC.

2701 ST LO DRIVE BALTIMORE, MD 21213

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) PARKS & PEOPLE FOUNDATION 52-1349346 501(C)(3) 50.000 SUMMER GRANT INC 2100 LIBERTY HEIGHTS

ISUMMER GRANT

50,000

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

501(C)(3)

2100 LIBERTY HEIGHTS AVENUE BALTIMORE, MD 21217

520 PARK AVE APT 409 BALTIMORE, MD 21201

POP INC

37-1762917

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) ST VINCENT DE PAUL OF 52-0597056 501(C)(3) 110.000 ISUMMER GRANT

CENTER

2405 LINDEN AVE BALTIMORE, MD 21217

BALTIMORE INC 2305 N CHARLES ST SUITE 300 BALTIMORE, MD 21218	32 0337030	301(0)(0)	110,000		SO THE COUNTY
ST FRANCIS NEIGHBORHOOD	52-0968759	501(C)(3)	55,000		SUMMER GRANT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government BALTIMORE SOUASHWISE INC 26-2194077 501(C)(3) 20.000 ISUMMER GRANT

3600 CLIPPER MILL ROAD SUITE 103 BALTIMORE, MD 21211	()()	·		

10 E NORTH AVE 3RD FLOOR BALTIMORE, MD 21202

CODE IN THE SCHOOLS INC. 46-2234897 25.000l 501(C)(3) ISUMMER GRANT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 501(C)(3) 70.000 LIVING CLASSROOMS 52-1369524 ISUMMER GRANT COLINIDATION INC

DENT EDUCATION INC	02.0702102	F01(C)(2)	105.000		Γ
802 S CAROLINE ST BALTIMORE, MD 21231					

2927 E BALTIMORE ST BALTIMORE, MD 21224

ISUMMER GRANT DENT EDUCATION INC 82-0782182 501(C)(3) 105.0001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 52-2129371 501(C)(3) 10.000 SUMMER GRANT THE BALTIMORE YOUTH ALLIANCE INC

6101 LOCH RAVEN BLVD SUITE 408 BALTIMORE, MD 21239

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

3355 KESWICK RD SUITE 104 BALTIMORE, MD 21211

501(C)(3) ART WITH A HEART 52-2227996 25,000 ISUMMER GRANT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government INTERSECTION OF CHANGE 52-2002294 501(C)(3) 40.000 ISUMMER GRANT

1947 PENNSYLVANIA AVENUE BALTIMORE, MD 21217			·		
THE BOYS AND GIRLS CLUBS	26-4371125	501(C)(3)	15,000		SUMMER GRANT

1201 S SHARP STREET NO 302 BALTIMORE, MD 21230

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) WIDE ANGLE YOUTH MEDIA 52-2276602 501(0)(3) 55 nonl SUMMER GRANT

INC 2601 N HOWARD ST SUITE 160 BALTIMORE, MD 21218	32-2270002	301(0)(3)	33,000		SOFFILK GRANT
PATTERSON PARK PUBLIC	27-2919916	501(C)(3)	45,250		OPERATING AND

SUMMER GRANT

PATTERSON PARK PUBLIC CHARTER SCHOOL 27 NORTH LAKEWOOD AVE

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

ENOCH PRATT FREE LIBRARY OF BALTIMORE CITY 400 CATHEDRAL STREET BALTIMORE, MD 21201	52-6001143	501(C)(3)	17,500		SUMMER GRANT
HOLISTIC LIFE FOUNDATION	03-0375886	501(C)(3)	25,000		FACILITATION/CITY

INC ISPRINGS EMS GRANT 2601 N HOWARD ST SUITE 140

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 52-1121163 501(C)(3) 10.000 NATIONAL AQUARIUM INC ISUMMER GRANT

PIER 3 - 501 EAST PRATT STREET BALTIMORE, MD 21202

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

BALTIMORE, MD 21218

VILLAGE LEARNING PLACE INC. 52-2109848 501(C)(3) 35.000l SUMMER GRANT 2521 SAINT PAUL ST

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 52-0897806 501(C)(3) 29.350 STRONG CITY BALTIMORE IMPROVING EDUCATION 3503 N CHARLES STREET 3 IGRANT AND SUMMER

BALTIMORE, MD 21218

ASSOCIATED CATHOLIC 52-0591538 501(C)(3) 80,000

CHARITIES INC 1966 GREENSPRING DRIVE

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

SUITE 200

TIMONIUM, MD 21093

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 45-2536579 501(C)(3) 35.000l DIGITAL HARBOR ISUMMER GRANT

SUMMER GRANT

5.000

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

501(C)(3)

FOUNDATION 1045 LIGHT ST BALTIMORE, MD 21230

ADELANTE LATINA INC.

2907 W STRATHMORE AVE BALTIMORE, MD 21209

46-4288885

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 47-3524536 501(C)(3) 35.000l SUMMER GRANT PROJECT PNEUMA INC 25 W FAYETTE STREET

HASKINS CTR BALTIMORE, MD 21201

40 WEST ASSISTANCE AND 52-1992160 501(C)(3) 15.000l COVID19 PRIVATE REFERRAL FUNDS 4711 FDMONDSON AVENUE BALTIMORE, MD 21229

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government 9 PRIVATE

IFUNDS

700 W 40TH STREET BALTIMORE, MD 21211	52-16/6/51	501(C)(3)	12,000		FUNDS
ADOPT A BLOCK INC	52-1758039	501(C)(3)	15,000		COVID19 PRIVATE

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

1607 CROMWELL BRIDGE RD

(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 organization grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 119 FUNDS

AN END TO IGNORANCE	81-4922824	501(C)(3)	15,000		COVID1
401 EAST LAFAYETTE AVENUE					
BALTIMORE, MD 21202					

1600 GUILFORD AVENUE BALTIMORE, MD 21202

BALTIMORE MONTESSORI INC 20-5520487 501(C)(3) 50,000 SUMMER FUNDING

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) 46 5000600 E04(6)(3) 25 222 CLIMANAED ELINIDANIC

FOUNDATION INC 7 FAIRVIEW AVE CATONSVILLE, MD 21228	46-5003638	501(C)(3)	35,000		SUMMER FUNDING
BLACK MENTAL HEALTH	52-1359540	501(C)(3)	5,000		COVID19 SUPPORT

ALLIANCE FOR EDUCATION AND CONSULTATION 900 W FAYETTE STREET 22111

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 52-1372972 501(C)(3) 30.000 CASA DE MARYLAND INC ICOVID19 SUPPORT 8151 15TH AVENUE

HYATTSVILLE, MD 20783

CENTER FOR URBAN FAMILIES 52-2142708 501(C)(3) 25,000
INC
2201 NORTH MONROE STREET

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

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

CHURCH

1922 COLFAX STREET SCHUYLER, NE 68661

THE BALTIMORE CHILD FIRST AUTHORITY INC 3904 HICKORY AVENUE SUITE 200 BALTIMORE, MD 21211	52-1992391	501(C)(3)	9,500		COVID19 SUPPORT
CHRIST UNITED METHODIST	05-0605921	501(C)(3)	5,000		COVID19 SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 06-1710518 501(C)(3) 15.000l COVID19 SUPPORT COMMUNITY LAW IN ACTION INC

COVID19 SUPPORT

15.000l

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

501(C)(3)

520 W FAYETTE ST BALTIMORE, MD 21201
COMPREHENSIVE HOUSING ASSISTANCE INC

5809 PARK HEIGHTS AVENUE BALTIMORE, MD 21215 23-7097000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) EMPOWERMENT TEMPLE INC 74-3118708 501(C)(3) 15.000l COVID19 SUPPORT 59 BLOOMING GROVE NEW WINDSOR, NY 12553

TURNPIKE FELLS POINT CREATIVE

52-1919988 501(C)(3) 5.000 COVID19 SUPPORT ALLIANCE INC 3134 FASTERN AVENUE BALTIMORE, MD 21224

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 35-2064875 501(C)(3) 15.000l FISHES AND LOAVES INC ICOVID19 SUPPORT

FISHES AND LOAVES INC 35-20648/5 501(C)(3) 15,000 COVID19 SUPPORT 56545 TWIN BRANCH DR MISHAWAKA, IN 46565 GOVANS ECUMENICAL 52-1767577 501(C)(3) 5,000 COVID19 SUPPORT 1010 E 33RD STREET

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 01-0949585 501(C)(3) 5.000 GREEN STREET ACADEMY INC ISUMMER FUNDING 125 N HILTON STREET

BALTIMORE, MD 21229 HEALTH CARE FOR THE 52-1576404 501(C)(3) 5.0001 HOMELESS.

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

COVID19 SUPPORT 421 FALLSWAY BALTIMORE, MD 21202

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 52-0962588 501(C)(3) 15.000l HUMANIM INC ICOVID19 SUPPORT 6355 WOODSIDE COURT

6355 WOODSIDE COURT
COLUMBIA, MD 21046

ITALIAN CULTURAL CENTER 52-2169101 501(C)(3) 15,000
INC
PO BOX 39801

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) JEWISH COMMUNITY 52-0607909 501(C)(3) 13.440 COVID19 SUPPORT

SUMMER FUNDING

SERVICES INC 5750 PARK HEIGHTS AVENUE BALTIMORE, MD 21215	(-)(-)			

20.000

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

501(C)(3)

81-2737275

KEYS EMPOWERS INC.

7501 LIBERTY ROAD GWYNN OAK, MD 21207

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) TOUNG HODVING HNIVED SITY 52-0505110 E01(C)(3) an nonl CHMMED EHNIDTING

1526 N FREEMONT AVENUE BALTIMORE, MD 21217

2701 NORTH CHARLES ST STE 300 BALTIMORE, MD 21218	32-0393110	301(0)(3)	20,000		SOMMER TONDING
LITTLE FLOWERS EARLY CHILD AND DEVELOPMENT CENTER INC	83-0502889	501(C)(3)	10,000		COVID19 SUPPORT

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

MANNA HOUSE INC 435 EAST 25TH STREET BALTIMORE, MD 21218	52-0822574	501(C)(3)	15,000		COVID19 SUPPORT
MARYLAND NEW DIRECTIONS INC	52-1021365	501(C)(3)	5,000		COVID19 SUPPORT

2700 NORTH CHARLES STREET BALTIMORE, MD 21218

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 52-1326863 501(C)(3) 15.000l COVID19 SUPPORT MARYLAND PHILANTHROPY NETWORK

SUMMER FUNDING

2 FAST READ STREET 2ND FLOOR BALTIMORE, MD 21202

35,000

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

501(C)(3)

20-3366845

MUSE 360

847 N HOWARD ST BALTIMORE, MD 21201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 27-2393482 501(C)(3) 20.000 SUMMER FUNDING NEXT ONE UP FOUNDATION INC

PO BOX 22503 BALTIMORE, MD 21203 NO BOUNDARIES COALITION 30-0788872 501(C)(3) 15.000l INC

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

BALTIMORE, MD 21217

COVID19 SUPPORT 1808 PENNSYLVANIA AVENUE

(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 (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 38-3663310 501(C)(3) 60.000 OPERATION WARM INC. WEINBERG LIBRARIES 6 DICKINSON DRIVE

CHADDS FORD, PA 19317

TIMONIUM, MD 21094

SISTERS CIRCLE INC 52-2335639 501(C)(3) 15.000l SUMMER FUNDING PO BOX 84

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 52-1034466 501(C)(3) 35.000l COVID19 SUPPORT SOUTHEAST COMMUNITY DEVELOPMENT CORP 3323 FASTERN AVENUE

BALTIMORE, MD 21224 52-1729460 501(C)(3) 5.000 COVID19 SUPPORT ST AMBROSE HOUSING AID

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

CENTER INC 321 FAST 25TH STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government TAHIRIH JUSTICE CENTER 54-1858176 501(C)(3) 5.000 COVID19 SUPPORT

WEINBERG LIBRARIES

6402 ARLINGTON BOULEVARD				
SUITE 300				
FALLS CHURCH, VA 22042				

50.000

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

501(C)(3)

THE MARYLAND BOOK BANK

PO BOX 41551 BALTIMORE, MD 21203 46-2714742

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government THE MOVEMENT TEAM 47-1338734 501(C)(3) 15.000l ICOVID19 SUPPORT 876 LOWE ROAD

MIDDLE RIVER, MD 21220 THE URBAN ALLIANCE 52-1938443 501(C)(3) 15.000l FOUNDATION

2030 O STREET NW WASHINGTON, DC 20009

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

SUMMER FUNDING

(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, non-cash assistance organization grant cash or assistance assistance other) or government ID19 SUPPORT

UEMPOWER OF MD	46-2801700	501(C)(3)	15,000		COVID
760 RITCHIE HIGHWAY					İ
SEVERNA PARK, MD 21146					

3219 VICKERS RD BALTIMORE, MD 21216

WOMEN IN TRANSISTION 71-0916438 501(C)(3) 25,000 SUMMER FUNDING

(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 (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government COVID19 SUPPORT/

Y IN CENTRAL MARYLAND INC 52-0591699 501(C)(3) 55.000l 303 W CHESAPEAKE AVENUE SUMMER FUNDING BALTIMORE, MD 21204

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

RANDALLSTOWN, MD 21133

4MYCITY INC 84-2908913 501(C)(3) 15.000l COVID19 SUPPORT 9113 SUNSET RIDGE ROAD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) ARCHDIOCESE OF BALTIMORE | 52-0591535 501(C)(3) 250.000 DISTRICT SUPPORT

CHANCERY INC 320 CATHEDRAL STREET BALTIMORE, MD 21201					
BALTIMORE ECONOMIC	83-4678938	501(C)(3)	17.750		COVID19 S

369 REDWOOD COURT BENSALEM, PA 19020

9 SUPPORT ADVANCEMENT MOVE INC

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government BELLXCEL 04-3182053 501(C)(3) 40.000 ISUMMER FUNDING 1 LINITY/EDCITY AVENUE

WESTWOOD, MA 02090					
BREATH OF GOD LUTHERAN CHURCH	52-0668167	501(C)(3)	10,000		COVID19 SUPPORT

141 SOUTH CLINTON STREET BALTIMORE, MD 21224

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) CAMP PUH'TOK FOR BOYS AND 26-0214249 501(C)(3) 10.000 SUMMER FUNDING GIRLS INC

| GIRLS INC | 17433 BIG FALLS ROAD | MONKTON, MD 21111 | CHURCH OF THE GUARDIAN | 52-0747600 | 501(C)(3) | 15,000 | COVID19 SUPPORT | ANGEL | COVID19 SUPPORT

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

2629 HUNTINGDON AVENUE BALTIMORE, MD 21211

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) 82-4416947 501(C)(3) 15.000 CITY OF REFUGE BALTIMORE COVID19 SUPPORT INC 901 PONTIAC AVENUE BALTIMORE, MD 21225 EAST BALTIMORE COMMUNITY 26-4739632 501(C)(3) 15.000 COVID19 SUPPORT

EAST BALTIMORE COMMUN SCHOOL DBA ELMER A HENDERSON A JH PARTNERSHIP S 2100 ASHLAND AVENUE

BALTIMORE, MD 21205

(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 assistance other) 52-1871443 501(C)(3) 5,000 COVID19 SUPPORT FAYETTE STREET OUTREACH

BAPTIST CHURCH

1142 NORTH FULTON AVENUE BALTIMORE, MD 21217

29 NORTH SMALLWOOD STREET BALTIMORE, MD 21223					
FIRST MOUNT CALVARY	52-1510829	501(C)(3)	12,000		COVID19 SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 83-0864360 501(C)(3) 13.000l COVID19 SUPPORT GREENMOUNT WEST COMM CENTER FOUND 1634 GUILFORD AVENUE

BALTIMORE, MD 21202 83-1053881 501(C)(3) 15.000l COVID19 SUPPORT HARLEM PARK COMMUNITY

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

DEV CORP

1121 WEST LANVALE STREET BALTIMORE, MD 21217

(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, non-cash assistance organization grant cash or assistance assistance other) or government 9 SUPPORT

HEARTSMILES INC HEARTSMILES LLC BALTIMORE, MD 21206	47-4613778	501(C)(3)	10,000		COVID19 SUPPORT
HUNGRY HARVEST LLC	46-5578991		15.000		COVID19 SUPPORT

101 WEST DICKMAN STREET BALTIMORE, MD 21230

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 46-3954353 501(C)(3) 15.000l INHERITANCE INC ISUMMER FUNDING 5811 MORAVIA ROAD

BALTIMORE, MD 21206

KINGDOM LIFE CHURCH 71-1052079 501(C)(3) 15,000

APOSTOLIC 504 ANNABEL AVENUE

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

BALTIMORE, MD 21225

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 52-1774175 501(C)(3) 10.000 KOINONIA BAPTIST CHURCH ISUMMER FUNDING

KOINONIA BAPTIST CHURCH BALTIMORE, MD 21206 LIBERTY GRACE CHURCH OF 26-2431013 501(C)(3) 15.000l GOD INC

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

COVID19 SUPPORT 3400 COPLEY ROAD BALTIMORE, MD 21133

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) MENTODING MENTODS INC 17-2128066 E01(C)(3) 5 0001 LCOVID10 SUBBORT

3447 CARRIAGE HILL CIRCLE RANDALLSTOWN, MD 21133	47-3138966	301(0)(3)	3,000		COVIDIA 20110KI
MEDICAL EDUCATION RESOURCES INIVITATIVE FOR TEENS INC DBA MERIT BALTIMORE	47-1139530	501(C)(3)	20,000		COVID19 SUPPORT

1 NORTH HAVEN STREET BALTIMORE, MD 21224

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 52-0591483 501(C)(3) 15.000l MT WASHINGTON PEDIATRIC ICOVID19 SUPPORT HOSPITAL ENUE

ICOVID19 SUPPORT

5.000

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

501(C)(3)

1708 WEST ROGERS AVE
BALTIMORE, MD 21209
NUEVA VIDA INC

801 NORTH PITT STREET ALEXANDRIA, VA 22314

54-1943145

(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 assistance other) or government ID19 SUPPORT

COVID19 SUPPORT

OUTCAST FOOD NETWORK 8205 ROCKDALE AVENUE MILFORD MILL, MD 21244	82-2848271	501(C)(3)	14,100		COVID
MILI OND MILL, MD 21244					

15.000

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

501(C)(3)

SO WHAT ELSE INC.

1 PRESERVE PARKWAY ROCKVILLE, MD 20852 27-1219231

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 52-0884640 501(C)(3) 17.500 ST VERONICA ROMAN SUMMER FUNDING CATHOLIC CONGREGATION 806 CHERRY HILL ROAD

BALTIMORE, MD 21225 THE BROKEN WALL 47-1865416 501(C)(3) 12.000 COVID19 SUPPORT COMMUNITY CHURCH

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

5521 MEDWICK GARTH SOUTH BALTIMORE, MD 21228

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 52-2225030 501(C)(3) 10.000 THE CHILDREN'S PEACE ISUMMER FUNDING CENTER INC

4 FAST UNIVERSITY PARKWAY BALTIMORE, MD 21218

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

BALTIMORE, MD 21215

THE LAZARUS RITE INC. 46-3314981 501(C)(3) 15.000l ICOVID19 SUPPORT PO BOX 67184

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 52-6002033 15.000l UNIVERSITY OF MARYLAND ISUMMER FUNDING BALTIMORE A ST 220 NORTH ARCH STREET BALTIMORE, MD 21201

COVID19 SUPPORT

15.000l

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

UNIVERSITY OF MD

620 WEST LEXINGTON STREET BALTIMORE, MD 21201

BALTIMORE SPA

52-6002033

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 93	49306	7005	391		
Sch	nedule J	Co	mpensati	ion Information	OI	MB No.	1545-0	0047		
(For	m 990)	For certain Office	hest							
		Complete if the org	Compensa anization answ	ited Employees ered "Yes" on Form 990, Part IV,	line 23.	2019				
▶ Attach to Form 990.										
•	al Revenue Service	₽ do to <u>www.ns.go</u>	<i>V/1 01111990</i> 101	mistructions and the latest miori	lation.	Open (Insp	ectio			
	me of the organiza				Employer identifica	tion nu	ımber			
1011	D TOK EDOCATIONS	AL EXCLELENCE INC			52-1129402					
Pa	rt I Questi	ons Regarding Compensat	tion							
							Yes	No		
1a				the following to or for a person listed y relevant information regarding thes						
		s or charter travel		Housing allowance or residence for p						
	_	companions	님	Payments for business use of persor						
		nification and gross-up payments	; <u> </u>	Health or social club dues or initiation Personal services (e.g., maid, chauff						
	LI Discretion	nary spending account	Ш	Personal services (e.g., maid, chaun	reur, cher)					
b				follow a written policy regarding payr ve? If "No," complete Part III to expla		1b				
2				or allowing expenses incurred by all	0.102	2				
	directors, truste	es, officers, including the CEO/E	xecutive Director	r, regarding the items checked on Lin	elar					
3				d to establish the compensation of th	e					
				not check any boxes for methods CEO/Executive Director, but explain in	n Part III.					
		ation committee	✓	Written employment contract						
	Independ	ent compensation consultant	✓	Compensation survey or study				1		
	☐ Form 990	of other organizations	\checkmark	Approval by the board or compensat	tion committee					
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the fil	ling organization or a					
а	Receive a sever	ance payment or change-of-cont	rol payment? .			4a		No		
b				ified retirement plan?		4b		No		
c				nsation arrangement?		4c		No		
	If "Yes" to any o	of lines 4a-c, list the persons and	I provide the app	licable amounts for each item in Part	III.					
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9						
5			_	the organization pay or accrue any						
	compensation c	ontingent on the revenues of:								
а	The organization	1?				5a		No		
b						5b		No		
_	,	5a or 5b, describe in Part III.								
6		ed on Form 990, Part VII, Section on the net earnings of		the organization pay or accrue any						
а	-	1?				6a		No		
b						6 b		No		
7	•	6a or 6b, describe in Part III.	n Alino ta didu	the organization provide any nonfixed	1					
7				rt III		7		No		
8	subject to the in	nitial contract exception describe	d in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," de				N		
9	If "Yes" on line	8, did the organization also follo	w the rebuttable	presumption procedure described in l	Regulations section	8		No		
For F		iction Act Notice, see the Ins			0053T Schedule J		1 990)	2019		

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

For each individual whose compensation must be reported on Schedule J. report compensation from the organization on row (i) and from related organizations, described in the

(A) Name and Title			of W-2 and/or 1099-MIS	C compensation	(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)(i)-(D)	column (B) reported as deferred on prior Form 990	
1 ROGER SCHULMAN PRESIDENT & CEO	(i)	201,882	0	0	0	9,511	211,393	0	
	(ii)	0	0	0	0	0	0	0	
2 JULIA BAEZ EXECUTIVE DIRECTOR	(i)	154,136	0	0	0	0	154,136	0	
	(ii)	0	0	0	0	0	0	0	



efile GRAPHIC print - DO NOT PROCESS								93493067005391
SCHEDULE O (Form 990 or 990- EZ) Department of the Treasury Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ Complete to provide information for response for Form 990 or 990-EZ Complete to provide information for response for Form 990 or							OMB No. 1545-0047 2019 Open to Public Inspection	
Name! & the of gard action FUND FOR EDUCATIONAL EXCELLENCE INC 990 Schedule O, Supplemental Information						Employer 52-112940		fication number
Return Reference	Explanation							
FORM 990, PART VI, SECTION B, LINE 11B	T VI, ^ TION B, TION B							

990 Schedule O, Supplemental Information

Return Explanation

Reference

FORM 990,	ANY BOARD MEMBER, EMPLOYEE, OR VOLUNTEER SHALL PROMPTLY REPORT IN WRITING TO THEIR APPROPR
PART VI,	IATE SUPERVISOR (OR, IN THE CASE OF A BOARD MEMBER, TO THE PRESIDENT OF THE BOARD) ANY ACT
SECTION B,	UAL OR CONTEMPLATED TRANSACTION WHICH MAY INVOLVE A CONFLICT OF INTEREST. EACH BOARD MEMBE
	R, EMPLOYEE, AND VOLUNTEER SHALL COMPLETE A QUESTIONNAIRE RELATING TO THIS POLICY UPON ASS
	OCIATION WITH THE FUND FOR EDUCATIONAL EXCELLENCE AND THEREAFTER WHEN CHANGES OCCUR OR UPO
	N REQUEST.

990 Schedule O, Supplemental Information

Return Explanation

Deference

Reference	
FORM 990,	THE COMPENSATION ARRANGEMENTS MUST BE APPROVED IN ADVANCE, BEFORE ANY PAYMENT IS MADE, BY
PART VI,	THE APPROVAL BODY OF THE FUND COMPOSED ENTIRELY OF INDIVIDUALS WHO DO NOT HAVE A CONFLICT
SECTION B,	OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENTS. WHEN THE APPROVAL BODY IS CONSI
LINE 15	DERING COMPENSATION TO COVERED INDIVIDUALS, IT MUST RELY ON COMPARABLE DATA THAT DEMONSTRA
	TES THE FAIR MARKET VALUE OF THE COMPENSATION IN QUESTION.

Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990, PART VI, SECTION C, LINE 19

Return Explanation

990 Schedule O, Supplemental Information

	11010101100	
ľ	FORM 990,	THE ORGANIZATION DOES HAVE A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AU
	PART VI,	DIT, REVIEW, OR COMPILATION OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT AC
	LINE 11B	COUNTANT. THE OVERSIGHT AND SELECTION PROCESS HAVE NOT CHANGED FROM THE PRIOR YEAR.