DLN: 93493087005010 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019 D Employer identification number B Check if applicable THE UNITED WAY OF CENTRAL MARYLAND INC □ Address change 52-0591543 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 1800 WASHINGTON BOULEVARD NO 340 ☐ Amended return (410) 547-8000 ☐ Application pending City or town, state or province, country, and ZIP or foreign postal code BALTIMORE, MD 21230 G Gross receipts \$ 32,029,522 Name and address of principal officer H(a) Is this a group return for FRANKLYN D BAKER ☐Yes **☑**No subordinates? 1800 WASHINGTON BOULEVARD NO 340 H(b) Are all subordinates BALTIMORE, MD 21230 ☐ Yes ☐No ıncluded? **☑** 501(c)(3) ☐ 501(c)() **◄** (insert no) 4947(a)(1) or □ 527 If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW UWCM ORG L Year of formation 1925 M State of legal domicile K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities UNITE AND ENGAGE OUR COMMUNITIES TO IMPROVE PEOPLE'S LIVES Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 38 4 38 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 137 Total number of volunteers (estimate if necessary) 6 12,342 Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 29,230,379 25,062,562 Ravenua Program service revenue (Part VIII, line 2g) . 2,525 29,979 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,173,233 820,095 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 108,608 25,019 30,431,156 26,021,244 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 16,396,651 5,108,991 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 8,225,034 9,268,856 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . 54,000 b Total fundraising expenses (Part IX, column (D), line 25) ▶3,358,436 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 4,838,769 14,026,676 29,514,454 28,404,523 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 916,702 -2,383,279 Net Assets or Fund Balances Beginning of Current Year End of Year 35,965,374 34,543,861 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 10,483,243 9,800,890 22 Net assets or fund balances Subtract line 21 from line 20 . 25,482,131 24,742,971 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign Here FRANKLYN D BAKER PRESIDENT & CEO Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2020-03-24 P00644231 Paid self-employed Firm's name SB & COMPANY Firm's EIN ► 20-2153727 Preparer Use Only Firm's address ▶ 10200 GRAND CENTRAL AVE SUITE 250 Phone no (410) 584-0060 OWINGS MILLS, MD 21117 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2	018)								Page 2				
Pa	rt III	Statement	of Program Servic	e Accomplis	hments									
		Check if Sched	dule O contains a respo	onse or note to a	any line in this Part III					✓				
1	Briefly		rganization's mission		·									
BECO FAMI SUCO FIND	ME SEL LY STAE CESSFUL STABLE	F-SUFFICIENT BILITY IS AT TH IN SCHOOL, E E EMPLOYMENT	BY FOCUSING ON THE IE DESCRIPTION OF O ENSURING INDIVIDUA	BUILDING BLO RGANIZATION N LS, CHILDREN A BUGH INCOME T	NITIES TO IMPROVE P CKS OF A BETTER LIFE MISSION HEART OF TH ND FAMILIES HAVE A O COVER THE BASICS,	E EDUCATION, I HIS WORK, WHI SAFE, AFFORDA	EMPLOYMENT, HOU CH INCLUDES HELF BLE PLACE TO CALI	SING AND F PING CHILDF L HOME, HE	IEALTH REN BE LPING I	PEOPLE				
2		_	undertake any significa - 990-EZ?		vices during the year w	vhich were not li	sted on	□Ye	s 🗹 i	No				
	If "Yes	If "Yes," describe these new services on Schedule O												
3	Did th	Did the organization cease conducting, or make significant changes in how it conducts, any program services?												
	services?													
	If "Yes	If "Yes," describe these changes on Schedule O												
4	Sectio	n 501(c)(3) and		ons are required	nts for each of its three to report the amount ported				enses					
4a	(Code) (Expenses \$	10,519,959	including grants of \$	3,839,73	4) (Revenue \$)					
	See Ad	ditional Data												
4b	(Code) (Expenses \$	1,591,983	including grants of \$	405,50	0) (Revenue \$)					
	See Ad	dıtıonal Data												
4c	(Code) (Expenses \$	959,135	ıncludıng grants of \$	863,75	7) (Revenue \$)					
	See Ad	ditional Data												
	See A													
4d	Other	program servic	es (Describe in Schedi	ule O)										
	(Expe	nses \$	10,006,206 incl	uding grants of	\$) (Revenue	\$)						
4e	Total	program serv	ice expenses >	23,077,2	83									

Form	990 (2018)			Page 3
Par	Checklist of Required Schedules			
	7 11 12 14 14 14 14 14 14 14 14 14 14 14 14 14	-	Yes	No
_	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? **	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	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		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	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? If "Yes," complete Schedule D, Part III	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? If "Yes," complete Schedule D, Part V 🕏	10	Yes	
	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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	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 🥞	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 2	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 🕏	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🔁	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	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	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1° If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than #5 000 of grants or other accistance to or for democtic individuals on Bort IV	ı T		

22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

Nο

22

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Par	Checklist of Required Schedules (continued)			
3	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23	Yes Yes	No
	Schedule J	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		
5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
7	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
В	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	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	20-		NI -
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,	28a		No
c	Part IV	28b		No
	officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M *	29	Yes	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30		No
	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? If "Yes," complete Schedule R, Part I	33		No
ŀ	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
ia	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
Ь	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
•	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	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 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	
	Statements Regarding Other IRS Filings and Tax Compliance			

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

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

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

117

1a

1b

If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Yes

Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7с Nο d If "Yes," indicate the number of Forms 8282 filed during the year 7d | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e No 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . No

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

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

c Enter the amount of reserves on hand

Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during 8 9a Did the sponsoring organization make any taxable distributions under section 4966? . . . 9a **b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . 9h Section 501(c)(7) organizations. Enter a 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

7g

7h

15

No

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11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders . 11a **b** Gross income from other sources (Do not net amounts due or paid to other sources

11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers.

a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 13a

Enter the amount of reserves the organization is required to maintain by the states in 13b which the organization is licensed to issue qualified health plans

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

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

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

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

13c

rm 9	990 (2018)			Page
Part	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	ines 🗸
Sec	ction A. Governing Body and Management			
_		\longrightarrow	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 38			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 38			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
5	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
Ь.	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a '	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
		\Box	Yes	No
a	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
la	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
}	Did the organization have a written whistleblower policy?	13	Yes	
	Did the organization have a written document retention and destruction policy?	14	Yes	
	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			

а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	2.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			

in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt

Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest

State the name, address, and telephone number of the person who possesses the organization's books and records

lacksquare Own website $\ \square$ Another's website $\ \square$ Upon request $\ \square$ Other (explain in Schedule O)

▶JAMES MCINTYRE 1800 WASHINGTON BLVD BALTIMORE, MD 21230 (410) 547-8000

List the States with which a copy of this Form 990 is required to be filed▶

policy, and financial statements available to the public during the tax year

Section C. Disclosure

17

19

20

Form **990** (2018)

16b

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

compensation from the organization ▶ 4

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F)

Page 8

(A) Name and Title	(B) Average hours per		on (do							(E)			
	week (list any hours	Position (do not check more than one box, unless person is both an officer and a director/trustee) Position (do not check more than one box, unless person is both an officer and a director/trustee) Reportable compensation compensation from relate organization (W- organization			compensation from related organizations (V	٧-							
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	eekoldwe key	Highest compensatemplovee	Former	2/1099	9-MISC)	2,1033 HISCY		related organizations	
		ડ િ	โกแรกษ์		ID.	pensated							
See Additional Data Table													
											+		
											+		
											_		
											+		
1b Sub-Total		<u> </u>				 					\perp		
c Total from continuation sheets to P d Total (add lines 1b and 1c)	•					>		1,0	065,463		D		173,713
2 Total number of individuals (including of reportable compensation from the			e liste	ed at	oove	e) who	rece	eived mor	e than \$1	00,000			
												Yes	No
3 Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i> .										employee on	3		No
4 For any individual listed on line 1a, is organization and related organization individual										n the			
5 Did any person listed on line 1a recei									ion or indi	vidual for	4	Yes	
services rendered to the organization	· ·	lete Sch	edule	J to	r su	ch per	son	• •	· · ·		5		No
 Section B. Independent Contract Complete this table for your five high from the organization Report compe 	est compensate										npen	sation	
	(A) and business addre		,		9					(B) ription of services		(C Comper	
UNITED WAY WORLDWIDE (UWAMERICA)									MEMBERSHI	•			544,498
P O BOX 418607 BOSTON, MA 022418607													
IDFIVE 81 MOSHER ST 3RD FL					_				ADVERTISIN SERVICES	IG/MARKETING			407,400
BALTIMORE, MD 21217 UPIC SOLUTIONS INC									CLOUD & CF	RM SERVICES			260,638
334 BEECHWOOD RD STE403 FT MITCHELL, KY 41017 HARGROVE INC									EVENT RENTALS 112,6				112,631
ONE HARGROVE DRIVE LANHAM, MD 20706													

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

	CHECK II SCHEUUP	e o contains a respi	onse or note to any	(A) Total revenue	(B) Related of exempt function	or :	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a Federated campaign	ns 1a	249,012		revenue	:		512 - 514
nts nts	b Membership dues		213,612					
Grai nou	c Fundraising events		480,507					
ß, (An	d Related organizatio							
<u>a</u> e	e Government grants (co		2,001,120					
ns,	f All other contributions,							
Contributions, Gifts, Grants and Other Similar Amounts	and similar amounts no above 9 Noncash contribution in lines 1a - 1f \$	_ <u>11</u>	22,331,923					
Con and	h Total. Add lines 1a-	-1f	•	25,062,562	2			
J.			Business	Code	12.067			12.06
Service Revenue	2a MANAGEMENT TRAINING			900099	13,867 6,900			6,900
æ	b TRANSITIONAL SERVICE			900099	6,212			6,212
₹ C	c MARYLAND CLIFF BENEF	TITS		900099	3,000			3,000
Š	d WALK-A-MILE			900099	3,000			3,000
Program	е ———							
Togı	f All other program se	rvice revenue		l 29,979				
<u>a</u>	gTotal. Add lines 2a-2	f	•	29,979				
	3 Investment income (in similar amounts).	ncluding dividends,	interest, and other	306,7	779			306,779
	4 Income from investme		ond proceeds					<u> </u>
	5 Royalties							
		(ı) Real	(II) Personal					
	6a Gross rents	29,442						
	b Less rental expenses	0	<u> </u>	1				
	c Rental income or (loss)	29,442		-				
	d Net rental income or	r (loss)]] 29,4	142			29,442
	- Nee Tental medine of	(i) Securities	(II) Other	1				
	7a Gross amount from sales of assets other than inventory	6,159,364						
	b Less cost or other basis and sales expenses	5,646,048						
	C Gain or (loss)	513,316			216			F12 214
	d Net gain or (loss) . 8a Gross income from fi		<u> </u>	513,3	510			513,316
<u>e</u>	(not including \$	480,507 of						
E E	contributions reporte See Part IV, line 18		105,439					
Rev	b Less direct expenses		362,230	1				
Other Revenue	c Net income or (loss)	from fundraising ev	ents	-256,7	791			-256,79
o ŧ	9a Gross income from g See Part IV, line 19							
	b Less direct expense:							
	c Net income or (loss)		ies	-				
	10aGross sales of invent returns and allowand	ory, less es a						
	b Less cost of goods s	sold b		1				
	c Net income or (loss)			-				
	Miscellaneous	Revenue	Business Code			350 63		
	11a DESIGNATION FEE		900099	250,9	928	250,928		
	b MISCELLANEOUS IN	COME	900099	85,0)29	85,029		
	d All other revenue .							

335,957

335,957

26,021,244

e Total. Add lines 11a-11d .

12 Total revenue. See Instructions

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all co	olumns All other orga	inizations must comp	elete column (A)	_
Check if Schedule O contains a response or note to any	line in this Part IX .			<u> U</u>
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) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	5,108,991	5,108,991		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,169,921	644,746	310,561	214,614
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	6,688,503	4,342,067	722,866	1,623,570
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	220,615	131,321	39,130	50,164
9 Other employee benefits	563,464	356,951	82,703	123,810
10 Payroll taxes	626,353	374,065	92,736	159,552
11 Fees for services (non-employees)				
a Management				
b Legal	40,870	26,755	13,931	184
c Accounting	74,005		74,005	
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)	924,985	657,565	246,777	20,643
12 Advertising and promotion	108,165	51,032	5,132	52,001
13 Office expenses	302,354	183,368	59,191	59,795
14 Information technology	322,829	180,729	67,825	74,275
15 Royalties				
16 Occupancy	451,902	368,327	85,513	-1,938
17 Travel	171,529	79,766	49,362	42,401

43,914

284,261

357,198

9,146,417

890,664

744,787

116,950

45,846

28,404,523

28,098

179,340

234,433

9,146,417

504,683

333,452

116,950

28,227

23,077,283

15,816

38,006

43,891

13,864

7,495

1,968,804

66,915

78,874

385,981

397,471

10,124 3,358,436

Form 990 (2018)

18 Payments of travel or entertainment expenses for any federal, state, or local public officials . 19 Conferences, conventions, and meetings

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

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

20 Interest

expenses on Schedule O) a DESIGNATED REVENUE AND

b MARKETING EXPENSES

c MISCELLANEAS EXPENSE

d CLIENT ASSISTANCE

e All other expenses

23 Insurance .

21 Payments to affiliates

22 Depreciation, depletion, and amortization .

Form 990 (2018)

31

32

33

34

P	art X	Balance Sheet					1 490 11
		 Check if Schedule O contains a response or not 	e to ar	ny line in this Part IX			🗆
		·		,	(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		·		1	
	2	Savings and temporary cash investments		[1,089,812	2	793,223
	3	Pledges and grants receivable, net		. [11,418,625	3	8,763,223
	4	Accounts receivable, net		[222,707	4	295,810
	5	Loans and other receivables from current and for trustees, key employees, and highest compensa Part II of Schedule L		5			
ts	7	section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations of voluntary employees' beneficiary organizations of Part II of Schedule L	n 4958 tions c (see in	c(c)(3)(B), and of section 501(c)(9) structions) Complete		6	
ssets	8	Inventories for sale or use				8	
As	9	Prepaid expenses and deferred charges	· ·	i	363.831	9	378.104
	-	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	3,177,866	,		3,3,,,,,
	ь	Less accumulated depreciation	10 b	1,490,308	2,036,299	10 c	1,687,558
	11	Investments—publicly traded securities .			18,634,184	11	18,758,276
	12	Investments—other securities See Part IV, line	11 .		2,199,916	12	3,867,667
	13	Investments—program-related See Part IV, line	11 .			13	
	14	Intangible assets		[14	
	15	Other assets See Part IV, line 11		[15	
	16	Total assets.Add lines 1 through 15 (must equ	al line	34)	35,965,374	16	34,543,861
	17	Accounts payable and accrued expenses			10,244,657	17	8,202,603
	18	Grants payable				18	
	19	Deferred revenue				19	125,831
	20	Tax-exempt bond liabilities				20	
ý	21	Escrow or custodial account liability Complete F	art IV	of Schedule D		21	
Liabilities	22	Loans and other payables to current and former key employees, highest compensated employees					
jab		persons Complete Part II of Schedule L		22			
	23	Secured mortgages and notes payable to unrela	ted thi	rd parties	238,586	23	1,368,355
	24	Unsecured notes and loans payable to unrelated	third	parties		24	104,101
	25	Other liabilities (including federal income tax, pa and other liabilities not included on lines 17 - 24 Complete Part X of Schedule D		s to related third parties,		25	

	15	Other assets See Part IV, line 11		15	
	16	Total assets.Add lines 1 through 15 (must equal line 34)	35,965,374	16	34,5
	17	Accounts payable and accrued expenses	10,244,657	17	8,2
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
Š	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
jab		persons Complete Part II of Schedule L		22	
Γ	23	Secured mortgages and notes payable to unrelated third parties	238,586	23	1,3
	l				

10.483.243 9.800.890 26 **Total liabilities.**Add lines 17 through 25 . . 26

Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 17,502,420 27 27

Temporarily restricted net assets 6,883,546 28

15.666.016 7,397,905 28 29 1,096,165 29

Permanently restricted net assets

1,679,050 Organizations that do not follow SFAS 117 (ASC 958),

check here ▶ □ and complete lines 30 through 34.

31

32

33

34

25,482,131

35,965,374

24,742,971

34,543,861 Form **990** (2018)

Net Assets or Fund Balances Capital stock or trust principal, or current funds 30 30

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

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a

3b

No

Form 990 (2018)

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

.....

EIN: 52-0591543

Name: THE UNITED WAY OF CENTRAL MARYLAND INC

Form 990 (2018)

Form 990, Part III, Line 4a:

OBJECTIVE OF PROGRAM FOR OVER 90 YEARS, UNITED WAY OF CENTRAL MARYLAND (UNITED WAY) HAS BEEN A HUMAN SERVICE LEADER FOR THE REGION. ENCOURAGING ALL CENTRAL MARYLANDERS TO GIVE, ADVOCATE AND VOLUNTEER UNITED WAY IS DEDICATED TO HELPING INDIVIDUALS AND FAMILIES FACING POVERTY TO MEET THEIR BASIC NEEDS, STABILIZE AND ACHIEVE SELF-SUFFICIENT LIVES WE DO THIS THROUGH GRANTMAKING, COLLABORATION, PROMOTING VOLUNTEERISM AND ADVOCACY, AND MOBILIZING RESOURCES AS A TRUSTED FUNDRAISER ADDITIONALLY, UNITED WAY ADDRESSES LOCAL NEEDS AND CREATES IMPACT THROUGH TARGETED DÍRECT-SERVICE INITIATIVES UNITED WAY USES EXPERTISE, DATA, AND LOCÁL KNOWLEDGE TO BETTER UNDERSTAND THE ISSUES FACING CENTRAL MARYLANDERS AND TO MAKE INFORMED INVESTMENT AND PROGRAMMATIC DECISIONS AS PART OF THIS WORK, UNITED WAY CONVENES LOCAL STAKEHOLDERS AND ACTIVELY WORKS TO DEVELOP COLLECTIVE IMPACT STRATEGIES IN PARTNERSHIP WITH OTHER NONPROFIT ORGANIZATIONS AND GOVERNMENT AGENCIES UNITED WAY HAS MOVED BEYOND FUNDRAISING AND GRANTMAKING AND INTO CREATING INNOVATIVE DIRECT-SERVICE INITIATIVES THAT SUPPORT FAMILY STABILITY IN HIGH NEED COMMUNITIES UNITED WAY IMPLEMENTS EVIDENCE-BASED BEST PRACTICES AND INCUBATES PROMISING IDEAS IN THE AREAS OF EDUCATION, HOUSING, HEALTH, AND WORKFORCE DEVELOPMENT UNITED WAY GRANTMAKINGTHROUGH OUR GRANTMAKING, UNITED WAY WORKS TO SUSTAIN AND GROW THE CAPACITY OF COMMUNITY-BASED PARTNERS TO STRENGTHEN FAMILIES AND NEIGHBORHOODS, UNDERPINNING THE COMMUNITY SAFETY NET WE DIRECT FUNDING ANNUALLY TO APPROXIMATELY 100 NONPROFIT ORGANIZATIONS THROUGH GRANTS THAT TARGET SPECIFIC COMMUNITY NEEDS, MOST THROUGH A COMPETITIVE ALLOCATION PROCESS ADMINISTERED BY OUR VOLUNTEER PARTNERSHIP BOARDS IN FY19, UNITED WAY PROVIDED FIVE TYPES OF GRANTS COMMUNITY OPERATING GRANTS - ARE THE CULMINATION OF AN ANNUAL COMPETITIVE PROCESS IN WHICH HUNDREDS OF NONPROFIT ORGANIZATIONS APPLY FOR FUNDING THROUGH UNITED WAY'S SIX LOCAL PARTNERSHIP BOARDS, SERVING EACH OF CENTRAL MARYLAND'S JURISDICTIONS BALTIMORE CITY, ANNE ARUNDEL, BALTIMORE, CARROLL, HARFORD AND HOWARD COUNTIES FUNDS ARE ALLOCATED AMONG THE SIX JURISDICTIONS BASED ON RELATIVE POVERTY AND RELATIVE POPULATION PARTNERSHIP BOARD VOLUNTEERS USE THEIR LOCAL KNOWLEDGE AND SUBJECT MATTER EXPERTISE TO ASSESS WHERE UNITED WAY FUNDING AND OTHER SUPPORT IS MOST NEEDED THEY THEN EVALUATE APPLICATIONS AND RECOMMEND GRANTS OF UP TO \$30,000 EACH THEIR OPERATING GRANT RECOMMENDATIONS ARE THEN REVIEWED AND APPROVED BY THE UNITED WAY'S BOARD OF DIRECTORS - COMMUNITY RESPONSE GRANTS - UNITED WAY'S COMMUNITY RESPONSE GRANT APPLICATION IS AN OPPORTUNITY FOR NON-PROFIT HEALTH AND HUMAN SERVICE ORGANIZATIONS TO REQUEST UNITED WAY SUPPORT FOR URGENT, UNEXPECTED OR EMERGENCY ORGANIZATIONAL NEEDS UNITED WAY'S BOARD OF DIRECTORS AUTHORIZES ITS PARTNERSHIP BOARDS TO RESPOND THROUGHOUT THE YEAR TO REQUESTS FOR CRG FUNDING FROM LOCAL NONPROFITS AND AWARD GRANT AMOUNTS OF UP TO \$7,500 - DIRECTED GRANTS - ARE ALLOCATED BASED ON RECOMMENDATIONS FROM UNITED WAY PARTNERSHIP BOARDS, STAFF AND THE VOLUNTEER COMMUNITY UNITED WAY'S BOARD OF DIRECTORS APPROVES DIRECTED GRANTS TO CERTAIN HIGHLY QUALIFIED NONPROFIT ORGANIZATIONS THAT PROVIDE SPECIFIC HEALTH AND HUMAN SERVICES IN CENTRAL MARYLAND DIRECTED GRANTS ARE MADE ONLY TO ORGANIZATIONS THAT HAVE DEMONSTRATED STRONG PROGRAMMATIC AND FISCAL CAPACITY AND HAVE A TRACK RECORD FOR ACHIEVING OUTCOMES THESE FUNDS ARE USED TO MEET SPECIALIZED NEEDS IN THE COMMUNITY - PROGRAMMATIC GRANTS - ARE DISPERSED BY THE UNITED WAY ON BEHALF OF, AND FOR THE ADVANCEMENT OF, UNITED WAY'S IMPACT WORK IN EDUCATION, HEALTH, HOUSING, AND WORKFORCE DEVELOPMENT THE GRANTS REFLECT THE DIRECTION AND STRATEGY OF EACH PROGRAM BASED ON THE KNOWLEDGE AND EXPERTISE OF THE PROGRAM MANAGER, SENIOR UNITED WAY STAFF AND PARTNERSHIP BOARD MEMBERS UNITED WAY UTILIZES PROGRAMMATIC GRANTS TO DIRECT FUNDING TO ORGANIZATIONS WITH SPECIFIC EXPERTISE UNIQUELY RELATED TO OUR IMPACT WORK - EMERGENCY RELIEF GRANTS / SPONSORED GRANTS - UTILIZE FUNDS RAISED BY OR DONATED TO THE UNITED WAY FOR THE SOLE PURPOSE OF DISPERSING AID TO THE INDIVIDUALS, COMMUNITIES OR ORGANIZATIONS AFFECTED BY A SPECIFIC UNFORESEEN DISASTER OR EMERGENCY SUCH CRISES INCLUDE THE ELLICOTT CITY FLOODING OF 2018 FUNDING FOR THESE GRANTS IS DUE TO UNFORESEEN CIRCUMSTANCES, AND THUS THE AVAILABILITY, DISBURSEMENT, AND RECIPIENTS OF THESE GRANTS WILL VARY FROM YEAR TO YEAR GRANT ELIGIBILITY CRITERIAALL ELIGIBLE APPLICANTS APPLYING TO A COMPETITIVE PROCESS MUST PROVIDE - COPY OF THEIR IRS DETERMINATION LETTER - MOST RECENT COPY (WITHIN THE LAST TWO FISCAL YEARS) OF ONE OF THE FOLLOWING FINANCIAL DOCUMENTS - FINANCIAL AUDIT OF THEIR ORGANIZATION (PREFERRED FOR ALL ORGANIZATIONS AND REQUIRED FOR ORGANIZATIONS WITH ANNUAL REVENUES OF \$500,000 OR MORE) - FINANCIAL STATEMENT REVIEWED BY AN INDEPENDENT AUDITOR (ACCEPTABLE ONLY FOR ORGANIZATIONS WITH ANNUAL REVENUES OF LESS THAN \$500,000) - GOOD STANDING CERTIFICATE OF STATUS - FROM MARYLAND'S STATE DEPARTMENT OF ASSESSMENTS & TAXATION (SDAT) - CURRENT ROSTER OF THEIR BOARD OF DIRECTORSUNITED WAY'S GRANT ALLOCATION PROCESSUNITED WAY CONDUCTS A COMPREHENSIVE AND STRINGENT GRANT ALLOCATION PROCESS THAT UTILIZES THE EXTENSIVE EXPERIENCE OF STAFF AND RELIES ON THE KNOWLEDGE AND INSIGHT OF LOCAL PROFESSIONAL AND COMMUNITY LEADER VOLUNTEERS WHO LIVE OR WORK IN EACH RESPECTIVE JURISDICTION AND MAKE UP UNITED WAY'S LOCAL PARTNERSHIP BOARDS UNITED WAY UTILIZES THESE PARTNERSHIP BOARDS, ONE IN EACH OF THE SIX CENTRAL MARYLAND JURISDICTIONS, TO ADDRESS LOCAL NEEDS AS THEY RELATE TO THE OVERALL IMPACT GOALS OF UNITED WAY UNITED WAY ANNOUNCES AND PROMOTES ITS GRANT FUNDING OPPORTUNITIES THROUGH ITS WEBSITE, THROUGH EMAILS TO A COMPREHENSIVE REGIONAL LIST OF NON-PROFIT AGENCIES, AND THROUGH A NETWORK OF COMMUNITY PARTNERS, INCLUDING ITS PARTNERSHIP BOARD MEMBERS APPLICATIONS ARE REVIEWED BY STAFF TO ENSURE THAT APPLICANTS MEET ESTABLISHED ELIGIBILITY CRITERIA AND ARE THEN REVIEWED BY PARTNERSHIP BOARD MEMBERS WHO SCORE AND RANK THE APPLICATIONS USING ESTABLISHED GRANT REVIEW GUIDELINES PARTNERSHIP BOARDS ARE CONVENED TO REVIEW AND DISCUSS APPLICATION SCORES AND RANKINGS AND COME TO CONSENSUS ON FUNDING RECOMMENDATIONS EACH ORGANIZATION THAT RECEIVES A GRANT IS REQUIRED TO SUBMIT THE FOLLOWING -EXECUTED GRANT AGREEMENT SIGNED BY THE ORGANIZATION'S EXECUTIVE DIRECTOR/PRESIDENT/CEO - COPY OF MOST RECENT W-9 FORM - PATRIOT ACT COMPLIANCE FORM - LEGAL DISCLOSURE COMPLIANCE FORM - UNITED WAY'S 2-1-1 MARYLAND INFORMATION FORMGRANT REPORTING AND ACCOUNTABILITYUNITED WAY REQUIRES ALL GRANTEES TO SIGN AN AGREEMENT IN WHICH THE RECIPIENT IS HELD RESPONSIBLE FOR SPECIFIED DELIVERABLES UNITED WAY STAFF PROVIDES PERIODIC REPORTS TO THE PARTNERSHIP BOARDS AND BOARD OF DIRECTORS TO DEMONSTRATE THAT FUNDS ARE USED, PROGRAMMATICALLY AND FISCALLY, BY THE GRANTEES AS INTENDED COMMUNITY OPERATING GRANTS AND DIRECTED GRANTS ARE GRANTED FOR THE FISCAL YEAR AND BOTH HAVE NARRATIVE AND FISCAL REPORTING REQUIREMENTS, TWICE ANNUALLY FOR COMMUNITY OPERATING GRANTS, AND QUARTERLY FOR DIRECTED GRANTS UNITED WAY ALSO CONDUCTS SITE VISITS TO DIRECTED GRANT RECIPIENTS ORGANIZATIONS RECEIVING COMMUNITY RESPONSE GRANTS ARE REQUIRED TO SUBMIT A FINAL REPORT WHEN EXPENDITURES ARE COMPLETE UNITED WAY AND PARTNERSHIP BOARD MEMBERS MONITOR REPORTS TO ENSURE COMPLIANCE WITH GRANT AGREEMENTS AND ENSURE THAT FUNDS ARE BEING SPENT DOWN ACCORDINGLY GRANTS MUST BE EXPENDED BY THE END OF THE GRANT PERIOD CONTINUED FUNDING CAN BE SUSPENDED FOR NON-COMPLIANCE DONOR DESIGNATED - IN ADDITION TO THE GRANTS OUTLINED ABOVE, MORE THAN 2,100 NONPROFIT ORGANIZATIONS RECEIVE GRANT FUNDING THROUGH PRIVATE AND PUBLIC-SECTOR DESIGNATED GIFTS THROUGH THE UNITED WAY'S ANNUAL CAMPAIGN UNITED WAY ACTS AS A PASS-THROUGH FACILITATOR FOR THIS FUNDING AND DOES NOT ESTABLISH ELIGIBILITY CRITERIA FOR THESE FUNDS, NOR DOES IT MONITOR SPENDING OR REQUIRE REPORTING FROM ORGANIZATIONS RECEIVING THESE FUNDS UNITED WAY'S DIRECT SERVICE PROGRAMSUNITED WAY CONTINUES TO DEVELOP, STRENGTHEN AND EXPAND PROACTIVE INITIATIVES THAT PROVIDE INNOVATIVE SOLUTIONS AIMED AT STRENGTHENING INDIVIDUALS AND FAMILIES RESULTS OF PROGRAMS DURING FY2019, UNITED WAY AND ITS PARTNERS SERVED OVER 65,000 PEOPLE FROM DIVERSE BACKGROUNDS THROUGH ITS COMMUNITY OPERATING GRANTS, DIRECT GRANTS AND OTHER DIRECT SERVICE ACTIVITIES WHILE EACH DISTINCT AGENCY PROGRAM REPORTS TO UNITED WAY ON UNDUPLICATED CLIENTS SERVED. THE TOTAL COUNT OF CLIENTS SERVED BY ALL PROGRAMS COMBINED DOES NOT NECESSARILY REPRESENT UNDUPLICATED CLIENTS, AS A CLIENT MAY RECEIVE SERVICES FROM MORE THAN ONE DISTINCT AGENCY BASED ON CLIENTS THAT SELF-REPORTED, THE GENDER DISTRIBUTION WAS APPROXIMATELY 56% FEMALE AND 44% MALE

OBJECTIVE OF PROGRAM 2-1-1 MARYLAND IS AN ACCESSIBLE, FREE OF CHARGE, 24 HOURS A DAY INFORMATION AND REFERRAL SERVICE FOR THE STATE OF MARYLAND PEOPLE SEEKING INFORMATION ABOUT SERVICES SUCH AS FOOD ASSISTANCE, SHELTER, MEDICAL CARE, SUBSTANCE ABUSE TREATMENT, PROTECTION FROM

Form 990, Part III, Line 4b:

USING A COMPREHENSIVE DATABASE OF FEDERAL, STATE AND LOCAL SERVICES - BOTH GOVERNMENT AND NON-PROFIT 2-1-1 IS PART OF THE NATIONAL 2-1-1 SYSTEM AVAILABLE IN ALL 50 STATES, THE DISTRICT OF COLUMBIA, AND PUERTO RICO 2-1-1 SYSTEMS ARE INSTRUMENTAL IN IDENTIFYING NEEDS OR GAPS IN SERVICES, PROVIDING A MORE ACCURATE PICTURE OF LOCAL NEEDS AND EMERGING TRENDS RESULTS OF PROGRAM DURING FY 2019. 2-1-1 MARYLAND UNITED WAY HELPLINE ANSWERED 107.665 CALLS THE TOP SERVICES REQUESTED WERE UTILITY ASSISTANCE, HOUSING ASSISTANCE, LEGAL/TAX ASSISTANCE, INDIVIDUAL, FAMILY AND

DOMESTIC VIOLENCE, AND MANY MORE, CAN CALL THIS EASY TO USE HELPLINE AVAILABLE IN 150+ LANGUAGES, 2-1-1 CONNECTS CALLERS TO TRAINED, CERTIFIED CALL SPECIALISTS AT ONE OF FOUR NATIONALLY ACCREDITED CALL CENTERS IN MARYLAND WHO ASSESS THEIR NEEDS AND LINK THEM TO THE RIGHT SOLUTIONS

COMMUNITY SUPPORT, INCLUDING HOLIDAY ASSISTANCE, FOOD ASSISTANCE, AND HEALTH AND MENTAL HEALTH CARE THERE WAS A 13% INCREASE IN REQUESTS FOR HOUSING ASSISTANCE. A 41% INCREASE IN HEALTH AND MENTAL HEALTH RESOURCES, AND A 20% INCREASE IN FOOD REQUEST IN FY 19 OVER FY 18 2-1-1 WORKED WITH THE FUEL FUND OF MARYLAND TO PROVIDE EXPEDITED UTILITY ASSISTANCE TO LOW-INCOME BGE CUSTOMERS WHOSE SERVICES WERE OFF AND WHO HAD APPLIED FOR ENERGY ASSISTANCE THROUGH OHEP IN PARTNERSHIP WITH THE CASH CAMPAIGN OF MARYLAND, 2-1-1 WORKED TO INCREASE AWARENESS OF EITC AND

FREE TAX PREPARATION SITES 2-1-1 HANDLED OVER 19,000 CALLS FOR FREE TAX PREPARATION AND SCHEDULED OVER 9,000 FREE TAX APPOINTMENTS 2-1-1 WORKED WITH BGE HOMES TO PROVIDE HEATING SYSTEMS AND REPAIRS FOR THOSE IN NEED DURING THE WINTER MONTHS. OUR FOLLOW-UP SURVEYS DEMONSTRATED THAT

80% OF THE PEOPLE THAT CALLED IN TO 2-1-1 RECEIVED THE SERVICES THAT THEY WERE SEEKING

THE JOURNEY HOME IS BALTIMORE CITY'S PLAN TO MAKE HOMELESSNESS RARE AND BRIEF IN BALTIMORE CITY ACTING AS THE FISCAL AGENCY BEGINNING OCTOBER 2008, THE PLAN IS BUILT ON THE "HOUSING FIRST" MODEL SIMILAR PLANS ARE IN PLACE IN CITIES AROUND THE COUNTRY AND BEST PRACTICES COMPONENTS OF THE PLAN INCLUDE AFFORDABLE HOUSING, COMPREHENSIVE HEALTH CARE, INCOME AND EMPLOYMENT, AS WELL AS PREVENTIVE AND EMERGENCY SERVICES. THE PLAN BRINGS TOGETHER BUSINESSES, NOT-FOR-PROFITS, FAITH-BASED ORGANIZATIONS, AND CONCERNED CITIZENS TO ADDRESS THIS COMPLEX SOCIAL AND PUBLIC HEALTH CRISIS HOMELESSNESS IS NOT A PERMANENT CONDITION UWCM IS IN PARTNERSHIP WITH BALTIMORE CITY TO RAISE AWARENESS AND NEEDED RESOURCES

Form 990, Part III, Line 4c:

IN THE COMMUNITY WHERE THERE ARE NEARLY 2,300 INDIVIDUALS EXPERIENCING HOMELESSNESS ON ANY GIVEN NIGHT, MORE THAN 300 OF THESE ARE CHILDREN THE PLAN COVERS FOUR MAJOR AREAS HOUSING, HEALTH CARE, PREVENTION, AND EMERGENCY SERVICES IT INCLUDES 14 GOALS AND 48 SPECIFIC ACTIONS TO ACHIEVE THESE GOALS EACH ACTION HAS A SPECIFIC BENCHMARK HIGHLIGHTS OF THESE GOALS INCLUDE - INCREASE THE SUPPLY OF AND ACCESS TO AFFORDABLE HOUSING - IMPROVE THE HOMELESS RESPONSE SYSTEM - TRANSFORM THE SHELTER SYSTEM - INCREASE OPPORTUNITIES FOR EMPLOYMENT AND INCOME SUPPORTS

- CREATE AN AGENDA FOR RACIAL EQUITY THROUGH THIS PARTNERSHIP, UWCM HAS BEEN ABLE TO PROVIDE FUNDING FOR A HOUSING FLEX FUND WHICH IS USED TO

PROVIDE TOILETRIES. FURNISHINGS AND OTHER ESSENTIAL ITEMS TO FORMERLY HOMELESS INDIVIDUALS AND FAMILIES. WE HAVE ALSO FUNDED STREET OUTREACH AND A CONVALESCENT CARE PROGRAM FOR THOSE RELEASED FROM A MEDICAL FACILITY BUT HAVE NO HOME FOR FOLLOW UP CARE

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code) (Expenses \$ 856,421 including grants of \$) (Revenue \$ DESIGNATIONS PRIVATE SECTOR DONORS ARE ABLE TO DESIGNATE THEIR GIFT TO CHARITABLEAGENCIES (UNDER IRS CODE 501 (C) (3)) MONIES ARE DISTRIBUTED BASED ONRECEIVED DOLLARS TO THE DONOR'S DESIGNATED CHARITABLE ORGANIZATION OTHER THAN CERTIFICATION OF COMPLIANCE WITH THE PATRIOT ACT ANDVERIFICATION OF CHARITABLE STATUS, AGENCIES ARE NOT REVIEWED AND/

ORSELECTED BY UWCM DESIGNATED AGENCIES ARE NOT REQUIRED TO REPORT THEIROUTCOMES TO UWCM THE BREAKDOWN OF

DESIGNATIONS IS AS FOLLOWS DONORDESIGNATIONS TO UWCM IMPACT PARTNER AGENCIES THROUGH THE PRIVATE SECTOR CAMPAIGN

(Code 7.011,606 including grants of \$) (Revenue \$) (Expenses \$

DONOR DESIGNATIONS TO UWCM NON-PARTNER AGENCIES THROUGH THE PRIVATE SECTOR CAMPAIGN

I	orm 990, Part III - 4 Program Service Accomplishments (See the Instructions)									
	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.									

(Code) (Expenses \$ 2,138,179 including grants of \$) (Revenue \$

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

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

and Independent Contractors

MEMBER BOARD OF DIRECTORS

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ASHLEY CONLEY

RYAN COUDON

DONALD C FRY

DANA S GLOOR

SUSAN K GAUVEY JD

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	for related organizations below dotted line)		Institutional Trustee	10	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
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JEREL BRAGER MEMBER BOARD OF DIRECTORS	1 00	х						0	0	0

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MEMBER BOARD OF DIRECTORS		^								
STEPHEN E BUDORICK	1 00									Π
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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

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	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
ALVIN J GWYNN JR D MIN MEMBER BOARD OF DIRECTORS	1 00	×						0	0	0
ERNEST R GRECCO EMERITUS	1 00	×						0	0	0
MARIE HARTMAN MEMBER BOARD OF DIRECTORS	1 00	х						0	0	0
CHARLENE MOORE HAYES	1 00	×						0	0	0

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MARIE HARTMAN	
MEMBER BOARD OF DIRECTORS	
CHARLENE MOORE HAYES	
MEMBER BOARD OF DIRECTORS	

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JERMAINE JONES

BENJAMIN JORDAN

JULIE MCGOVERN

BRIAN M MCKEON

DONALD G KOHLHAFER

MEMBER BOARD OF DIRECTORS

MEMBER BOARD OF DIRECTORS

MEMBER BOARD OF DIRECTORS

MEMBER BOARD OF DIRECTORS

PATRICIA MCHUGH LAMBERT ESQ

MEMBER BOARD OF DIRECTORS

MEMBER BOARD OF DIRECTORS

and Independent Contractors

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

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

and Independent Contractors

MEMBER BOARD OF DIRECTORS

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BETH S PERLMAN

CHARLES B REULAND

LORI A ROBINSON

PETER B ROSENWALD II

SONJA SANTELISES

	any hours								organizations	from the	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
DOMINIQUE S MOORE ESQ	1 00										
MEMBER BOARD OF DIRECTORS		×						0	0	0	
TERRY F NEIMEYER PE	1 00										
MEMBER BOARD OF DIRECTORS		×						0	0	0	
CHRISTOPHER OVEN	1 00										
MEMBER BOARD OF DIRECTORS		×							U	0	
ELIZABETH R PAAL	1 00										
MEMBER BOARD OF DIRECTORS		×						1	0	0	

CHRISTOPHER OVEN	1 00	×				0	0	
MEMBER BOARD OF DIRECTORS		_ ^					Ŭ	
ELIZABETH R PAAL	1 00	l ↓				0	0	
MEMBER BOARD OF DIRECTORS		_ ^				,	o o	
LEONARD R PARRISH	1 00							
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organizations

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

	organizations below dotted line)		Institutional Trustee	key employee	Highest compensated	Former	MISC)	MISC)	related organizations
MICHAEL SMITH MEMBER BOARD OF DIRECTORS	1 00	×					0	0	0
LORI VILLEGAS MEMBER BOARD OF DIRECTORS	1 00	×					0	0	0
HUGO J WARNS III MEMBER BOARD OF DIRECTORS	1 00	X					0	0	0
ANTOINETTE WILLIAMS MEMBER BOARD OF DIRECTORS	1 00	×					0	0	0
CARYN YORK	1 00	×					0	0	0

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ANTOINETTE WILLIAMS
MEMBER BOARD OF DIRECTORS
CARYN YORK
MEMBER BOARD OF DIRECTORS

G MARK CHANEY

RENEE M CHRISTOFF

THOMASINA L HIERS

.......

SVP & CHIEF FINANCIAL OFFICER

TREASURER

SECRETARY

CHAIR-ELECT

FRANKLYN BAKER

PRESIDENT & CEO

JAMES MCINTYRE

and Independent Contractors

and Independent Contractors (A) (B) (C) (D) (E) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other

week (list

SVP & CHIEF OPERATING OFFICER

SVP & CHIEF PRINCIPAL GIFTS OFFICER

VP & CHIEF INFORMATION OFFICER

HOLLY HOEY

KAREN PATE

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

person is both an officer

from the

140,720

152,866

from related

(F)

compensation

15,962

32,372

	any hours and a director/trustee)							organization	organizations	from the	
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
STEPHEN J WOERNER CHAIR	1 00			х				0	0	0	
SANDRA MONCK SVP & CHIEF IMPACT OFFICER	50 00				×			142,327	0	18,608	
MARIE ELISE LEE SVP & CHIEF INNOVATION OFFICER	50 00				×			140,252	0	27,866	
MARTINA A MARTIN	50 00				Х			153,748	0	47,911	

50.00

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SCHEDUI Form 990 of 90EZ)	r	Com	plete if the o	Charity Statu rganization is a sect 4947(a)(1) nonexe ▶ Attach to Form! www.irs.gov/Form!	ion 501(c)(3) empt charitable 990 or Form 99	organization or trust. 90-EZ.	a section	2018 Open to Public		
epartment of the ' ternal Revenue S ame of the c	eruse	on		www.msiqov/10im.	<u> </u>		Employer identific	Inspection		
HE UNITED WAY	OF CENTRA	L MARYLAND	INC				52-0591543			
				us (All organization						
-		•		e it is (For lines 1 thro	•					
ш			•	ssociation of churches			(A)(i).			
2	school des	cribed in se	ction 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 9	990 or 990-EZ))				
A	hospital or	a cooperati	ve hospital ser	vice organization desci	rıbed ın section	170(b)(1)(A)(iii).			
na	me, city, a	and state	•	ed in conjunction with	·			· 		
	-	ion operated v). (Comple		t of a college or unive	rsity owned or o	perated by a gov	ernmental unit descri	bed in section 170		
A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
			mally receives [vi). (Complete	a substantial part of it Part II)	s support from a	a governmental u	ınıt or from the gener	al public described ir		
3	community	trust descr	ıbed ın sectio ı	170(b)(1)(A)(vi)	(Complete Part I	II)				
	An agricultural research organization described in 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university.									
fro inv	m activitie vestment i	es related to ncome and	ıts exempt fur unrelated busır	(1) more than 331/39 actions—subject to cer less taxable income (le amplete Part III)	taın exceptions,	and (2) no more	than 331/3% of its s	upport from gross		
				d exclusively to test fo	r public safety	See section 509	(a)(4).			
m	ore publicl	y supported	organizations	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se	ction 509(a)(2). See section 509(a			
Ty	rpe I. A su ganization	pporting org	ganızatıon oper	ated, supervised, or co	ontrolled by its s	supported organiz	zation(s), typically by			
m	anagemen	t of the supp		pervised or controlled in ation vested in the sare and C.						
				supporting organizatio				ated with, its		
☐ Ty fui	pe III nonctionally	n-function ntegrated	ally integrate The organizatio	 d. A supporting organi n generally must satis rt IV, Sections A and 	zation operated fy a distribution	in connection wi requirement and	th its supported orgai			
	•		•	ved a written determir	•		pe I, Type II, Type II	I functionally		
_	-		on-functionally organizations	integrated supporting	organization					
		_		upported organization((m) Amot - c	(A		
	e of suppo janization				(v) Amount of monetary support (see instructions)	(vi) Amount of other support (se instructions)				
					Yes No					
tal										
	k Dadusti	on Act Not	ico coo the T	 nstructions for	I Cat No 1128!	<u> </u> 5F •	 Schedule A (Form 9	 00 or 000-E7\ 201		

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

Page 2

97 940 %

Schedule A (Form 990 or 990-EZ) 2018

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part										
III. If the organization fails to qualify under the tests listed below, please complete Part III.)										
Section A. Public Support										
Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total				

S	ection A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	36,006,441	34,333,572	34,331,406	29,230,379	25,062,562	158,964,360
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	36,006,441	34,333,572	34,331,406	29,230,379	25,062,562	158,964,360
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5						158,964,360
-	from line 4 ection B. Total Support						
	Calendar year	()2044	(1.)2045	()2016	(1)2047	()2010	
	(or fiscal year beginning in) ▶	(a)2014	(b) 2015	(c)2016	(d) 2017	(e)2018	(f) Total
7	Amounts from line 4	36,006,441	34,333,572	34,331,406	29,230,379	25,062,562	158,964,360
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	293,258	333,538	359,248	493,645	336,221	1,815,910
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						160,780,270
12	Gross receipts from related activities,	etc (see instructio	ns)			12	
13	First five years. If the Form 990 is for	or the organization'	s first, second, thii	rd, fourth, or fifth	tax year as a sect	ion 501(c)(3) orga	nization,
	check this box and stop here					▶ □	

check this box and stop here .

98 870 %

14 15

Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage for 2017 Schedule A, Part II, line 14

and stop here. The organization qualifies as a publicly supported organization

16a 33 1/3% support test-2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

box and stop here. The organization qualifies as a publicly supported organization is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

▶□ 17a 10%-facts-and-circumstances test-2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 ▶□ organization

10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Р	Support Schedule for						
	(Complete only if you c						ler Part II. If
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	pelow, please co	omplete Part II.)	
30	Calendar year		43.50.5		413.004-		(0) =
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
_	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
36	ection B. Total Support Calendar year		I	I	1		1
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
b	income from similar sources Unrelated business taxable income						
D	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12							
	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for	r the organization	ı 's fırst, second, tl	nird, fourth, or fift	:h tax vear as a se	ction 501(c)(3) c	rganization.
	check this box and stop here	3	, ,	, ,	,	(), ()	• □
Se	ection C. Computation of Public	Support Perce	ntage				<u> </u>
15	Public support percentage for 2018 (lin			column (f))		15	
16	Public support percentage from 2017 S					16	
	ection D. Computation of Investi					1 1	
17	Investment income percentage for 201			line 13, column (f	·))	17	
18	Investment income percentage from 2	•			••	18	
	331/3% support tests—2018. If the		•	on line 14, and lin	ne 15 is more than		ne 17 is not
							► □
	more than 33 1/3%, check this box and s 33 1/3% support tests—2017. If the						
b	· · · · · · · · · · · · · · · · · · ·	-			•		_
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anization	▶⊔_
20	Private foundation. If the organization	on did not check a	box on line 14, 1	.9a, or 19b, check	this box and see	instructions	▶ □

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509

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

3а Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

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

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

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

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

amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

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

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

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

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answer line 10b below

the organization had excess business holdings)

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

complete Part I of Schedule L (Form 990 or 990-EZ)

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

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

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

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

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

9с

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

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

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

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	Page 5		
Pa	rt IV Supporting Organizations (continued)					
			Yes	No		
11	Has the organization accepted a gift or contribution from any of the following persons?					
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the					
	governing body of a supported organization?	11a				
b	A family member of a person described in (a) above?	11b				
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11 c				
S	ection B. Type I Supporting Organizations					
			Yes	No		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1				
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting					
	organization					
S	ection C. Type II Supporting Organizations					
			Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of					
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)					
	ection D. All Type III Supporting Organizations		Yes	No		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		103			
		1				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)					
		2				
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3				
S	ection E. Type III Functionally-Integrated Supporting Organizations		l			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	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	mstru	ctions)			
2	Activities Test Answer (a) and (b) below.		Yes	No		
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a				
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement					
,		2b				
3	Parent of Supported Organizations Answer (a) and (b) below.	2~				
	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	36				

Sched	ule A (Form 990 or 990-EZ) 2018			Page 6			
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	izations				
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.						
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
3	3 Other gross income (see instructions)						
4	Add lines 1 through 3	4					
5	Depreciation and depletion	5					
6	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)						
7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8					
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1					
a	Average monthly value of securities	1a					
b	Average monthly cash balances	1 b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	Discount claimed for blockage or other factors (explain in detail in Part VI)						
2	Acquisition indebtedness applicable to non-exempt use assets	2					
3	Subtract line 2 from line 1d	3					
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4					
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by 035	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
	Section C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2	Enter 85% of line 1	2					
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4	Enter greater of line 2 or line 3	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6					
7	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrat	ed Type III supporting or	ganızatıon (see			

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

c Remainder Subtract lines 4a and 4b from 4

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

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

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

See instructions

d Excess from 2017.e Excess from 2018.

3_j and 4c

8 Breakdown of line 7

Additional Data

Software ID:

Software Version:

EIN: 52-0591543

Name: THE UNITED WAY OF CENTRAL MARYLAND INC

Page 8

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

SCHEDULE D

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.

OMB No 1545-0047

DLN: 93493087005010

Open to Public

Department of the Treasury Internal Revenue Service

b Assets included in Form 990, Part X

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

(Form 990)

2

rna	al Revenue Service	► Go to <u>www.irs.g</u>	ov/Form990 for the	late	st information.		Ins	spection
laı	me of the organi	ization				Employer	identification	number
HE	UNITED WAY OF CE	NTRAL MARYLAND INC				52-059154	3	
'a	rt I Organiz	zations Maintaining Donor Advi	sed Funds or Othe	er Si	milar Funds o	r Accounts	5.	
	Complet	te if the organization answered "Ye						
			(a) Donor a	dvise	d funds	(b) Fu	nds and other	accounts
	Total number at e	,						
	55 5	of contributions to (during year)						
		of grants from (during year)						
	Aggregate value	·						
		ition inform all donors and donor adviso roperty, subject to the organization's ex		ssets	held in donor ad	vised funds a		Yes 🗌 No
		tion inform all grantees, donors, and do ses and not for the benefit of the donor					permissible	Yes 🗌 No
a I	rt III Conser	vation Easements. Complete if the	ne organization ansv	were	d "Yes" on Forn	า 990, Part	IV, line 7.	
	Purpose(s) of co	nservation easements held by the organ	nization (check all that	: appl	y)			
	☐ Preservatio	on of land for public use (e g , recreation	n or education) 📗 🗆] P	reservation of an	historically in	mportant land a	area
	☐ Protection	of natural habitat] P	reservation of a c	ertified histor	rıc structure	
	☐ Preservatio	on of open space						
		2a through 2d if the organization held a	qualified conservation	cont	ribution in the for		rvation d at the End o	f the Year
3		conservation easements			I	2a		i tilo real
b	Total acreage res	stricted by conservation easements				2b		
2	Number of conse	ervation easements on a certified histori	c structure included in	(a)		2c		
t		ervation easements included in (c) acqui n the National Register	red after 7/25/06, and	d not	on a historic	2d		
	Number of conset tax year ►	ervation easements modified, transferre	d, released, extinguisl	ned, d	or terminated by	the organizat	ion during the	
	Number of state	s where property subject to conservation	n easement is located	>				
		zation have a written policy regarding th t of the conservation easements it holds		, ınsp	ection, handling o	of violations,	☐ Yes	□ No
	Staff and volunte	eer hours devoted to monitoring, inspec	ting, handling of viola	tions	and enforcing co	nservation e	asements durır	g the year
	Amount of exper ▶ \$	nses incurred in monitoring, inspecting,	handling of violations,	, and	enforcing conserv	ation easem	ents during the	year
	Does each conse and section 170(ervation easement reported on line $2(d)(h)(4)(B)(H)^2$	above satisfy the requ	uirem	ents of section 1	70(h)(4)(B)(ı) Yes	□ No
	balance sheet, a	cribe how the organization reports cons nd include, if applicable, the text of the 's accounting for conservation easemen	footnote to the organ					
3 F	t IIII Organiz	zations Maintaining Collections	of Art, Historical	Trea	sures, or Oth	er Similar	Assets.	
	•	te if the organization answered "Ye						
3	art, historical tre	on elected, as permitted under SFAS 11 easures, or other similar assets held for XIII, the text of the footnote to its finar	public exhibition, educ	atıor	i, or research in f			
b	historical treasui	on elected, as permitted under SFAS 11 res, or other similar assets held for pub ts relating to these items						
(i) Revenue include	ed on Form 990, Part VIII, line 1				▶ \$		
(i	i)Assets included	ın Form 990, Part X				▶ \$		
•	If the organization	on received or held works of art, histori ts required to be reported under SFAS	•			ncial gain, pro	ovide the	
3	-	d on Form 990, Part VIII, line 1	•			▶ \$		

Cat No 52283D

Schedule D (Form 990) 2018

Par	t IIII	Organizations Ma	aintaining Col	lections of Art,	Histori	ical T	reas	ures, or	Other	Similar A	ssets (continued)
3		the organization's acq (check all that apply)	uisition, accessior	n, and other records	s, check	any of	the f	ollowing tl	hat are a	significant	use of its	collection	٦
а		Public exhibition			d		Loar	n or excha	inge prog	ırams			
b		Scholarly research			е		Othe	er					
С		Preservation for future	generations										
4	Provid Part >	de a description of the o	organization's col	ections and explain	how the	ey furtl	ner th	ne organiz	atıon's ex	empt purpo	ose in		
5		g the year, did the orga s to be sold to raise fur								ılar	☐ Ye	s 🗆	No
Pa	rt IV	Escrow and Cust Complete if the org X, line 21.			rm 990), Part	IV,	line 9, or	reporte	ed an amou	unt on F	orm 990), Part
1a		e organization an agent ded on Form 990, Part)		an or other interme	diary for	contri	butio	ns or othe	r assets i	not	☐ Ye	s 🗌	No
ь	If "Ye	es," explain the arrange	ment ın Part XIII	and complete the f	ollowing	table		Γ		Δ	mount		
С	Begin	ning balance							1c				
d	Addıt	ions during the year							1d				
е	Dıstrı	butions during the year	-					[1e				<u> </u>
f	Endın	g balance							1f				
2a	Did th	ne organization include	an amount on Fo	rm 990, Part X, line	21, for	escrow	or c	ustodial a	ccount lia	ıbılıty?	☐ Ye	s 🗆	No
Ь		s," explain the arrange									_		
Pa	rt V	Endowment Fund			•								
			·	(a)Current year	(b) P	rıor yea	r	(c)Two ye	ars back	(d)Three ye	ars back	(e)Four ye	ears back
1 a	Beginn	ing of year balance .		1,096,165		1,043	3,297		993,011		992,719		991,034
b	Contrib	outions											
c	Net inv	estment earnings, gair	ns, and losses	582,885		52	2,868		50,286		292		1,685
d	Grants	or scholarships											
е		expenditures for facilitie ograms	es										
f	Admını	strative expenses .											
g	End of	year balance		1,679,050		1,096	5,165		1,043,297		993,011		992,719
2	Provid	de the estimated percei	ntage of the curre	ent year end balance	e (line 1	g, colu	mn (a	a)) held as	5				
а	Board	d designated or quasi-e	ndowment 🟲										
b	Perm	anent endowment 🟲	100 000 %										
С	Temp	orarily restricted endov	vment 🟲										
	The p	ercentages on lines 2a	, 2b, and 2c shou	ld equal 100%									
3а		nere endowment funds	not in the posses	sion of the organiza	ation tha	t are h	eld aı	nd admini	stered fo	r the		Yes	No No
	-	related organizations									3	a(i)	No
		elated organizations .					٠. ٠					n(ii)	No
b		s" on 3a(II), are the rel			on Sche	dule R	γ.					3b	
4	Descr	ribe in Part XIII the inte	ended uses of the	organization's endo	owment :	funds					_		
Pa	rt VI	Land, Buildings,											
		Complete if the ord	ganization answ (a) Cost or oth			•		_					lue
	Descri	ption of property	(a) Cost or oth (investme	1 ' '	t or other	Dasis (otner)	(c) Acci	umulated d	lepreciation	(d) Book va	ilue
1 a	Land												
b	Buildin	gs [
c	Leaseh	old improvements				1,4	21,123	3		318,273			1,102,850
d	Equipm	nent				1,7	56,743	3		1,172,035			584,708
е	Other												
Tota	ıl. Add	lines 1a through 1e <i>(Co</i>	olumn (d) must ed	qual Form 990, Part	X, colui	mn (B)	, line	10(c)).		>			1,687,558

,	Investments—Other Securities. Complete if t	the organization answ	ered "Yes" on Form	1 990, Part IV, line 11b.
	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b) Book value		ethod of valuation d-of-year market value
(1) Financia	l derivatives			,
(3) Other		2.542.564		
(A) CHARITA		3,542,564		F
(C)	DRE COMMUNITY FOUNDATION	325,103		F
(D)				
(E)				
(F)				
(G)				
(H)				
		3,867,667		
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on			
	(a) Description of investment	(b) Book value		ethod of valuation d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7) ————				
(8)				
(9) ————				
Part IX	n (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization answere	ed 'Yes' on Form 990, Par	t IV, line 11d See Fo	rm 990, Part X, line 15
(1)	(a) Description	on		(b) Book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colu	mn (b) must equal Form 990, Part X, col (B) line 15)			. •
Part X	Other Liabilities. Complete if the organization See Form 990, Part X, line 25.	answered 'Yes' on For	m 990, Part IV, line	e 11e or 11f.
1.	(a) Description of liability	(b) Bo	ok value	
(1) Federal II	ncome taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>		
2. Liability fo	or uncertain tax positions. In Part XIII, provide the text	of the footnote to the org		

Part XI

2

а

b

3

4

b

c

Part XII

5

1

2

c

d

3

4

b

5

Part XIII

See Additional Data Table

Return Reference

Schedule D (Form 990) 2018

Page 4

9,146,417

416,448

19,258,106

9,146,417

28.404.523

Schedule D (Form 990) 2018

c d e

Net unrealized gains (losses) on investments

Amounts included on line 1 but not on Form 990, Part VIII, line 12

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 .

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 . .

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

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

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

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

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Add lines 2a through 2d

Supplemental Information

2c 2d

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2e 2,060,568 3 16,874,827

4a 4b 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. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

2a

2b

2c

2d

4a 4b

Explanation

2a

2b

9.146.417 4c

142,500

-15,900

289,848

9.146.417

2e

3

4c

5

285.572

1.774.996

26,021,244 19,674,554

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

Schedule D (Form 990) 2018

Additional Data

Software ID: Software Version:

EIN: 52-0591543

Name: THE UNITED WAY OF CENTRAL MARYLAND INC

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	PURPOSE OF ENDOWMENT FUNDS THE ENDOWMENT FUND OF UNITED WAY OF CENTRAL MARYLAND, INC (UWCM) HAS BEEN FORMED TO PROVIDE INDIVIDUALS, BUSINESSES, FOUNDATIONS AND OTHERS, THE OPPORTUN ITY TO DONATE CASH OR OTHER PROPERTIES TO UWCM THE FOLLOWING POLICY HAS BEEN ADOPTED BY THE UWCM BOARD OF DIRECTORS TO PROVIDE FOR THE UNIFORM ADMINISTRATION OF THE ENDOWMENT FUND THE BOARD RECOGNIZES THE IMPORTANCE OF ESTABLISHING STANDARDS FOR THE CREATION AND MANAGEMENT OF ENDOWED GIFTS TO UWCM TO ENSURE FISCAL INTEGRITY, ACCOUNTABILITY AND TRANSPARENCY, AND TO SUPPORT ACTIVE SOLICITATION OF GIFTS I ROLE OF ENDOWMENT THE UWCM ENDOWMENT RE PRESENTS PERMANENT FUNDS THAT PROVIDE LONG-TERM ECONOMIC SUSTAINABILITY FOR UWCM AND ITS PROGRAMS INCOME FROM ENDOWED FUNDS ALIGN UWCM TO CREATE CAPACITY TO DELIVER MISSION OVER TIME MAINTAIN INSTITUTIONAL STABILITY BUILD LONG-TERM RESOURCES FOR THE ORGANIZATI ON THAT PROVIDE THE CAPACITY TO RESPOND TO CRITICAL COMMUNITY NEEDS, AND TO ALLOW UWCM TO MAKE STRATEGIC INVESTMENTS IN COMMUNITY SERVICES AND RESOURCES II ROLE OF POLICIES THESE ENDOWMENTS POLICIES ARE DESIGNED TO DEFINE THE STANDARDS FOR ACQUISITION, ADMINISTRATION, MANAGEMENT AND REPORTING OF ENDOWED GIFTS, AND TO ANTICIPATE THE MOST COMMON ISSUES ENCOU NTERED IN MANAGING ENDOWED GIFTS IN THE EVENT THAT THESE STANDARDS DO NOT ANTICIPATE A SPECIFIC GIFT ISSUE, THE ENDOWMENT OVERSIGHT COMMITTEE SHALL DETERMINE THE RECOMMENDED COURS E OF ACTION

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	UWCM IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE C ODE IN ADDITION, UWCM QUALIFIES FOR CHARITABLE CONTRIBUTION DEDUCTIONS UNDER SECTION 170(B)(1)(A) AND HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A)(1) INCOME, WHICH IS NOT RELATED TO EXEMPT PURPOSES, LESS APPLICABLE DEDUC TIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE INCOME TAXES UWCM HAD NO UNRELATED BUSIN ESS INCOME FOR THE YEARS ENDED JUNE 30, 2019 AND 2018 WHEN TAX RETURNS ARE FILED, IT IS H IGHLY CERTAIN THAT SOME POSITIONS TAKEN WOULD BE SUSTAINED UPON EXAMINATION BY THE TAXING AUTHORITIES, WHILE OTHERS ARE SUBJECT TO UNCERTAINTY ABOUT THE MERITS OF THE POSITION TAKE N OR THE AMOUNT OF THE POSITION THAT WOULD BE ULTIMATELY SUSTAINED THE BENEFIT OF A TAX P OSITION IS RECOGNIZED IN THE FINANCIAL STATEMENTS IN THE PERIOD DURING WHICH, BASED ON ALL AVAILABLE EVIDENCE, MANAGEMENT BELIEVES IT IS MORE LIKELY THAN NOT THAT THE POSITION WILL BE SUSTAINED UPON EXAMINATION, INCLUDING THE RESOLUTION OF APPEALS OR LITIGATION PROCESSE S, IF ANY TAX POSITIONS TAKEN ARE NOT OFFSET OR AGGREGATED WITH OTHER POSITIONS TAX POSITIONS TAX POSITIONS THAT MEET THE MORE LIKELY THAN NOT RECOGNITION THRESHOLD ARE MEASURED AS THE LARGEST AMOUNT OF TAX BENEFIT THAT IS MORE THAN 50% LIKELY OF BEING REALIZED UPON SETTLEMENT WITH THE APPLICABLE TAXING AUTHORITY AS OF JUNE 30, 2019 AND 2018, AND FOR THE YEARS THEN END ED, THERE ARE NO MATERIAL UNRECOGNIZED/DERECOGNIZED TAX BENEFITS OR TAX PENALTIES OR INTER EST UWCM IS NO LONGER SUBJECT TO U S FEDERAL AND STATE INCOME TAX EXAMINATIONS BY AUTHOR ITIES BEFORE 2015

Supplemental Information								
Return Reference	Explanation							
PART XI, LINE 2D - OTHER ADJUSTMENTS	THE JOURNEY HOME BENEFIT EXCHANGE TRANSACTION ADJUSTMENT TO LANGENFELDER TRUST DIRECT FUNDRAISING EXPENSE IN-KIND REVENUE							

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	DESIGNATIONS TO AGENCIES AND PROVISION FOR BAD DEBT

Sı

Supplemental Information								
Return Reference	Explanation							
PART XII, LINE 2D - OTHER ADJUSTMENTS	THE JOURNEY HOME BENEFIT EXCHANGE TRANSACTION ADJUSTMENT TO LANGENFELDER TRUST DIRECT FUNDRAISING EXPENSE IN-KIND REVENUE							

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	DESIGNATIONS TO AGENCIES AND PROVISION FOR BAD DEBT

Sı

Return Reference Explanation

OVERHEAD RATIO CALCULATION THE OVERHEAD RATE FORMULA USED TO CALCULATE THE STANDARDIZED OVERHEAD FIGURES FOR INDIVIDUAL UNITED WAYS AND THE UNITED WAY SYSTEM AS A WHOLE IS OUTLINE D IN THE UNITED WAY WORLDWIDE FINANCIAL ISSUES COMMITTEE(FIC) FUNCTIONAL EXPENSES AND OVER DEPONDED TO THE OUTLINE OF THE OUTLINE OUTLINE OF THE OUTLINE OUTLINE OF THE OUTLINE OUT

Supplemental Information

HEAD REPORTING GUIDELINES NUMERATOR = MANAGEMENT & GENERÁL EXPENSES(PART IX, LINE 25, COL UMN C) + FUNDRAISING EXPENSES(PART IX, LINE 25, COLUMN D) DENOMINATOR = TOTAL REVENUE (PAR T VIII, LINE 12, COLUMN A) NUMERATOR 1,968,804 + 3,358,436 = 5,327,240 DENOMINATOR = 26,02

1.244 TAX RETURN OVERHEAD = 20 47%

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

Supplemental Information Regarding Fundraising or Gaming Activities

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

DLN: 93493087005010 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury

(Form 990 or 990-EZ)

Attach to Form 990 or Form 990-EZ. Internal Revenue Service ▶Go to www irs gov/Form990 for instructions and the latest information **Employer identification number** Name of the organization THE UNITED WAY OF CENTRAL MARYLAND INC 52-0591543 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply ✓ Mail solicitations Solicitation of non-government grants ✓ Internet and email solicitations ✓ Solicitation of government grants Phone solicitations ✓ Special fundraising events ✓ In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual (iii) Did (v) Amount paid to (ii) Activity (iv) Gross receipts (vi) Amount paid to fundraiser have or entity (fundraiser) (or retained by) from activity (or retained by) custody or fundraiser listed in organization control of col (i) contributions? No Yes Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

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

Schedule G (Form 990 or 990-EZ) 2018

DLN: 93493087005010 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number THE UNITED WAY OF CENTRAL MARYLAND INC 52-0591543 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 286 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

(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

PART 1, LINE 2 GRANT FUNDING IS CONTINGENT ON A FAVORABLE REVIEW BY UWCM OF THE GRANTEE'S MOST RECENT AUDIT AND FORM 990 AND AFFIRMATION OF 501(C)(3)

STATUS GRANTEES ARE ALSO REQUIRED TO PROVIDE PERIODIC (USUALLY SEMI-ANNUAL) REPORTS ON THEIR DELIVERABLES AND OUTCOMES AS SPECIFIED IN THE GRANT AGREEMENT UWCM REVIEWS THESE REPORTS AND MEETS PERIODICALLY WITH GRANTEES TO ENSURE THEIR PERFORMANCE MEETS EXPECTATIONS STAFF WORKS CLOSELY WITH AGENCIES ON CORRECTIVE PLANS OR MODIFICATIONS WHERE PERFORMANCE DEFICIENCIES ARE IDENTIFIED

ORGANIZATIONS LISTED IN SCHEDULE I, PART II. REPRESENT THOSE RECEIVING (1) IMPACT, EMERGENCY AND DIRECTED GRANTS AS APPROVED BY UWCM'S

SCHEDULE I, PART II

BOARD OF DIRECTORS AND PARTNERSHIP BOARDS, AND/OR (2) DONOR-DESIGNATED GIFTS MADE THROUGH VARIOUS CAMPAIGNS IN WHICH UWCM SERVES AS

FUNDRAISER AND FISCAL ADMINISTRATOR (UWCM'S PRIVATE SECTOR CAMPAIGN) Schedule I (Form 990) 2018

Additional Data

ABILITIES NETWORK INC

8503 LASALLE RD

TOWSON, MD 21286

ACCESS CARROLL INC

2 LOCUST LANE SUITE 301

WESTMINSTER, MD 21157

Software ID: **Software Version:**

52-6060453

20-2146701

EIN: 52-0591543 Name: THE UNITED WAY OF CENTRAL MARYLAND INC

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	
organization		ıf applıcable	grant	cash	(book, FMV, appraisal,	
or government				assistance	other)	

24,760

15,435

501 (C) (3)

501 (C) (3)

(h) Purpose of grant

(g) Description of non-cash assistance or assistance

DESIGNATED AND /OR

DESIGNATED AND /OR

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

GRANTED IN SUPPORT OF AGENCY PROGRAMS

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

DESIGNATED AND /OR IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

ACCESS HEARS 4102 UNDERWOOD RD BALTIMORE, MD 21218	47-4175242	501 (C) (3)	15,000		DESIGNATED AND /OR GRANTED IN SUPPORT OF AGENCY PROGRAMS

7.500

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

501 (C) (3)

2907 W STRATHMORE AVE BALTIMORE, MD 21209

46-4288885

ADELANTE LATINA

(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 or government other) assistance 54-0899463 501 (C) (3) 5.159 DESIGNATED AND /OR ALTERNATIVE HOUSE PO BOX 694 IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

DUNN LORING, VA 22027

ALZHEIMERS DISEASE & 52-1219428 501 (C) (3) 39,157

RELATED DISORDERS

GRANTED IN SUPPORT

DESIGNATED AND /OR

GRANTED IN SUPPORT

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

ASSOCIATION INC

1850 YORK RD STE D 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 (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 13-3039601 10.636 ALZHEIMER'S DISEASE & 501 (C) (3) DESIGNATED AND /OR RELATED DISORDER'S IGRANTED IN SUPPORT OF AGENCY PROGRAMS

ASSOCIATION INC. 225 N MICHIGAN AVE 17 CHICAGO, IL 60601 7,526 AMERICAN BREAST CANCER 52-2031814 501 (C) (3)

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

TOWSON, MD 21286

DESIGNATED AND /OR FOUNDATION GRANTED IN SUPPORT 1220 B EAST JOPPA RD -OF AGENCY PROGRAMS SUITE 332

(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 other) assistance AMERICAN CANCER SOCIETY 54-0515701 501 (C) (3) 22.910 DESIGNATED AND /OR

INC SOUTH ATLANTIC DIVISION 405 WILLIAMS CT STE 120 BALTIMORE, MD 21220			·		GRANTED IN SUPPORT OF AGENCY PROGRAMS
AMERICAN CIVIL LIBERTIES UNION FOUNDATION OF	23-7209538	501 (C) (3)	10,871		DESIGNATED AND /OR GRANTED IN SUPPORT

MARYLAND INC 3600 CLIPPER MILL RD STE

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

350

BALTIMORE, MD 21211

OF AGENCY PROGRAMS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 13-1623888 32.713 AMERICAN DIABETES 501 (C) (3) DESIGNATED AND /OR ASSOCIATION (BALTIMORE) IGRANTED IN SUPPORT 2002 CLIPPER PARK ROAD -OF AGENCY PROGRAMS

OF AGENCY PROGRAMS

2002 CLIPPER PARK ROAD SUITE 110
BALTIMORE, MD 21211

AMERICAN HEART 13-5613797 501 (C) (3) 31,817

ASSOCIATION MID-ATLANTIC DESIGNATED AND /OR GRANTED IN SUPPORT

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

AFFILIATE

4217 PARK PLACE CT GLEN ALLEN, VA 23060

(h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance AMEDICAN DED CDOCC 52-0106605 501 (C) (3) 100 171 DESTGNATED AND JOD

(f) Method of valuation

(a) Description of

OF AGENCY PROGRAMS

AMERICAN RED CROSS	22-0190002	301 (0) (3)	100,171		DESIGNATED AND JOK
DISASTER RELIEF -NATIONAL					GRANTED IN SUPPORT
#20012					OF AGENCY PROGRAMS
PO BOX 37243					
WASHINGTON, DC 20013					

AMERICAN RED CROSS OF THE 501 (C) (3) 277,161 53-0196605 DESIGNATED AND /OR CHESAPEAKE REGION #20012 IGRANTED IN SUPPORT

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

4800 MT HOPE DRIVE

BALTIMORE, MD 21215

(b) EIN

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

(f) Method of valuation

(a) Description of

(h) Purpose of grant

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

AMERICAN SOCIETY FOR THE	13-1623829	501 (C) (3)	11,709		DESIGNATED AND /OR
PREVENTION OF CRUELTY TO					GRANTED IN SUPPORT
ANIMALS					OF AGENCY PROGRAMS
PO BOX 96929					
WASHINGTON, DC 20077					

501 (C) (3) 30,599 ANNE ARUNDEL COUNTY CASA 52-1885500 DESIGNATED AND /OR

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

8 CHURCH CIRCLE STE H-103

ANNAPOLIS, MD 21401

INC

(b) EIN

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-6000878 501 (C) (3) 330,697 ANNE ARUNDEL COUNTY IDESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

PARTNERSHIP FOR CHILDRENYOUTH&FAMILIES			1	GRANTED IN SUPPORT OF AGENCY PROGRAMS
1 HARRY S TRUMAN PKWY ANNAPOLIS, MD 21401				

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

CENTER FOUNDATION INC.

2000 MEDICAL PARKWAY

ANNAPOLIS, MD 21401

ANNE ARUNDEL MEDICAL 52-1331298 501 (C) (3) 15,379 DESIGNATED AND /OR

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-0740597 501 (C) (3) 26.410 DESIGNATED AND /OR ARCHBISHOP CURLEY HIGH

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

SCHOOL IGRANTED IN SUPPORT 3701 SINCLAIR IN BALTIMORE, MD 21213

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

CATHOLIC SCHOOLS

BALTIMORE, MD 21201

320 CATHEDRAL ST

OF AGENCY PROGRAMS ARCHDIOCESE OF BALTIMORE 52-0591535 501 (C) (3) 123.597 DESIGNATED AND /OR

(book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance ADTUDITIC COLINDATION INC. 59-12/1670 501 (C) (3) 6 010 DECIGNATED AND /OD

(f) Method of valuation

(q) Description of

(h) Purpose of grant

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

AKTHKITIS FOUNDATION INC	30-13410/3	301 (0) (3)	0,010		DESIGNATED AND JOK
MARYLAND CHAPTER					GRANTED IN SUPPORT
9891 BROKEN LAND PKWY -					OF AGENCY PROGRAMS
SUITE 101					
COLUMBIA, MD 21046					

ARUNDEL LODGE INC 51-0169423 501 (C) (3) 7.589 DESIGNATED AND /OR

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

2600 SOLOMONS ISLAND RD

EDGEWATER, MD 21037

(b) EIN

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 52-1427774 501 (C) (3) 165.786 DESIGNATED AND /OR

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

ASSOCIATED BLACK CHARITIES IGRANTED IN SUPPORT 1114 CATHEDRAL ST OF AGENCY PROGRAMS BALTIMORE, MD 21201

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

CHARITIES OF BALTIMORE

320 CATHEDRAL ST 3RD FL

BALTIMORE, MD 21201

ASSOCIATED CATHOLIC 52-0591538 501 (C) (3) 973.673 DESIGNATED AND /OR

(a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance BACK ON MY EEET. 26-2100900 501 (C) (3) 28 772 DESIGNATED AND /OR

(f) Method of valuation

BALTIMORE CHAPTER 1017 E BALTIMORE ST STE 2016 BALTIMORE, MD 21202	20-210-380-9	301 (C) (3)	20,773		GRANTED IN SUPPORT OF AGENCY PROGRAMS

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

BALTIMORE, MD 21230

(b) EIN

86-1130456 501 (C) (3) 37,568 DESIGNATED AND /OR BALTIMORE ANIMAL RESCUE

AND CARE SHELTER INC. IGRANTED IN SUPPORT 301 STOCKHOLM ST OF AGENCY PROGRAMS

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance BALTIMORE CHILD ARUSE 52-1681279 501 (C) (3) 35 903 DESIGNATED AND /OR

(f) Method of valuation

(a) Description of

(h) Purpose of grant

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

BALLITIONE CHIED ADODE	3E 1001E/3	301 (0) (3)	33,303		DESIGN NED / OR
CENTER INC					GRANTED IN SUPPORT
2300 N CHARLES ST 4TH					OF AGENCY PROGRAMS
FLOOR					
BALTIMORE, MD 21218					

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

MUSEUM INC

35 MARKET PLACE

BALTIMORE, MD 21202

(b) EIN

501 (C) (3) 36,441 BALTIMORE CHILDREN'S 52-1806933 DESIGNATED AND /OR

organization or government if applicable grant cash or government (book, FMV, appraisal, other) or assistance or assistance

(f) Method of valuation

(a) Description of

(h) Purpose of grant

OF AGENCY PROGRAMS

BALTIMORE CITY 52-1212473 501 (C) (3) 5,162 DESIGNATED AND /OR FOUNDATION-BALTIMORE CITY HEALTH DEPT - OF AGENCY PROGRAMS BALTIMORE, MD 21202

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

2 EAST READ ST 9TH FLR

BALTIMORE, MD 21202

(b) EIN

BALTIMORE, MD 21202

BALTIMORE COMMUNITY 23-7180620 501 (C) (3) 13,859

DESIGNATED AND /OR GRANTED IN SUPPORT

(a) Name and address of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 45-4507134 5.054 DESIGNATED AND /OR

(f) Method of valuation

(a) Description of

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

501 (C) (3) BALTIMORE COMMUNITY TOOLBANK INC IGRANTED IN SUPPORT 1224 WICOMICO STREET

(d) Amount of cash

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

(c) IRC section

(b) EIN

DEPARTMENT OF HEALTH

BALTIMORE, MD 21212

6401 YORK ROAD 3RD FLOOR

OF AGENCY PROGRAMS BALTIMORE, MD 21230

52-6000889

501 (C) (3) 18.434 BALTIMORE COUNTY DESIGNATED AND /OR

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance BALTIMORE COLINITY PLIBLIC 52-1819200 501 (C) (3) 10 763 DESIGNATED AND /OR

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

SCHOOLS FOUNDATION INC 6901 N CHARLES STREET BALTIMORE, MD 21204	32 1313233	301 (0)	10,703			GRANTED IN SUPPORT OF AGENCY PROGRAMS
BALTIMORE EDUCATION SCHOLARSHIP TRUST (BEST)	52-1072250	501 (C) (3)	31,149		I	DESIGNATED AND /OR GRANTED IN SUPPORT

OF AGENCY PROGRAMS

SCHOLARSHIP TRUST (BEST) 808 NORTH CHARLES ST STE

BALTIMORE, MD 21201

200-C

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance BALTIMODE EECTIVAL OF THE 00-0001850 501 (C) (3) 7 500 DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

ARTS INC	90-0091030	301 (0) (3)	/,500		GRANTED IN SUPPORT
10 EBALTIMORE ST 10TH FL					OF AGENCY PROGRAMS
BALTIMORE, MD 21202					

BALTIMORE HUNGER PROJECT 47-2281875 501 (C) (3) 6,633 DESIGNATED AND /OR

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

1829 REISTERSTOWN RD -

BALTIMORE, MD 21208

STF 430

(c) IRC section (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 05-0632734 501 (C) (3) 51.028 BALTIMORE JESUIT DESIGNATED AND /OR

(f) Method of valuation

(a) Description of

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

EDUCATIONAL INITIATIVE IGRANTED IN SUPPORT 420 S CHESTER STREET BALTIMORE, MD 21231

(d) Amount of cash

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

(a) Name and address of

2220 ST PAUL ST

BALTIMORE, MD 21218

(b) EIN

OF AGENCY PROGRAMS BALTIMORE LAB SCHOOL 45-2984607 501 (C) (3) 8.275 DESIGNATED AND /OR

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

(f) Method of valuation

(a) Description of

(h) Purpose of grant

DESIGNATED AND /OR

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

BALTIMORE SCHOOL FOR THE 52-1174284 501 (C) (3) 18.264 DESIGNATED AND /OR ARTS FOUNDATION INC IGRANTED IN SUPPORT 712 CATHEDRAL ST OF AGENCY PROGRAMS

15.634

(d) Amount of cash

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

501 (C) (3)

(c) IRC section

BALTIMORE, MD 21201 BALTIMORE SQUASHWISE INC

BALTIMORE, MD 21211

103

3600 CLIPPER MILL RD STE

(a) Name and address of

(b) EIN

26-2194077

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

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

BALTIMORE SYMPHONY ORCHESTRA 1212 CATHEDRAL ST BALTIMORE, MD 21201	52-0629696	501 (C) (3)	12,594		DESIGNATED AND /OR GRANTED IN SUPPORT OF AGENCY PROGRAMS
BALTIMORE URBAN DEBATE	81-0596405	501 (C) (3)	5,147		DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

BALTIMORE, MD 21218

2601 NORTH HOWARD ST STE

LEAGUE INC

150

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance BELIEVE IN TOMORROW 52-1332737 501 (C) (3) 20 884 DESIGNATED AND /OR

OF AGENCY PROGRAMS

NATIONAL CHIDREN'S		·		GRANTED IN SUPPORT
FOUNDATION				OF AGENCY PROGRAMS
PO BOX 21243				
BALTIMORE, MD 21228				
,				

501 (C) (3) 40,000 DESIGNATED AND /OR BELOVED COMMUNITY 80-0192216 SERVICES CORPORATION IGRANTED IN SUPPORT

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

1219 DRUID HILL AVENUE

BALTIMORE, MD 21217

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

(f) Method of valuation

(q) Description of

(h) Purpose of grant

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

BIRTHRIGHT PREGNANCY AID	52-1305958	501 (C) (3)	17,090		DESIGNATED AND /OR
CENTER INC					GRANTED IN SUPPORT
38 EAST GORDON STREET					OF AGENCY PROGRAMS
BEL AIR, MD 21014					1

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

BALTIMORE AREA COUNCIL

701 WYMAN PARK DR

BALTIMORE, MD 21211

(b) EIN

BOY SCOUTS OF AMERICA 52-0591572 501 (C) (3) 71.321 DESIGNATED AND /OR

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance **BOYS & GIRLS CLUB OF** 26-4371125 501 (C) (3) 6.093 DESIGNATED AND /OR

METROPOLITAN BALTIMORE 1201 S SHARP ST STE302 BALTIMORE, MD 21230			•		GRANTED IN SUPPORT OF AGENCY PROGRAMS
BOYS & GIRLS CLUBS OF	52-1736346	501 (C) (3)	28,741		DESIGNATED AND /OR

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

121 S VILLA AVENUE ANNAPOLIS, MD 21401

IGRANTED IN SUPPORT ANNAPOLIS & ANNE ARUNDEL COUNTY OF AGENCY PROGRAMS

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

(f) Method of valuation

(q) Description of

(h) Purpose of grant

DESIGNATED AND /OR

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

BOYS & GIRLS CLUBS OF	52-1701612	501 (C) (3)	22,357		DESIGNATED AND /OR
HARFORD COUNTY					GRANTED IN SUPPORT
PO BOX 1106					OF AGENCY PROGRAMS
ADEDDEEN MD 21001					

ABERDEEN, MD 21001 BOYS AND GIRLS CLUB OF 27-4271480 501 (C) (3) 40.004

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

WESTMINSTER

WESTMINSTER, MD 21157

71 F MAIN ST

(b) EIN

(b) EIN (c) IRC section (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance

(f) Method of valuation

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

BOYS HOPE GIRLS HOPE OF	52-2356443	501 (C) (3)	17,281		DESIGNATED AND /OR
BALTIMORE					GRANTED IN SUPPORT
8005 HARFORD RD STE 101					OF AGENCY PROGRAMS
BALTIMORE, MD 21234					

82-4937530 501 (C) (3) 10.000 IDESIGNATED AND /OR BRIDGEBUILDER CINEMATIC

(d) Amount of cash

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

(a) Name and address of

ARTS PROGRAM

380 15TH ST 3E

BROOKLYN, NY 11215

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

(f) Method of valuation

(q) Description of

(h) Purpose of grant

DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

BRIDGES TO HOUSING	52-1723716	501 (C) (3)	208,645		DESIGNATED AND /OR
STABILITY INC					GRANTED IN SUPPORT
9520 BERGER ROAD SUITE					OF AGENCY PROGRAMS
311					
COLUMBIA, MD 21046					

7.530

(d) Amount of cash

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

501 (C) (3)

(c) IRC section

(a) Name and address of

BRYN MAWR SCHOOL

109 WEST MELROSE AVE

BALTIMORE, MD 21210

(b) EIN

52-0258140

(f) Method of valuation (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

(a) Description of

OF AGENCY PROGRAMS

BUDDIES INC	52-6042656	501 (C) (3)	7,548		DESIGNATED AND /OR
301 ELRINO STREET					GRANTED IN SUPPORT
BALTIMORE, MD 21224					OF AGENCY PROGRAMS

CAL RIPKEN SR FOUNDATION 52-2310500 501 (C) (3) 23.382

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

1427 CLARKVIEW RD STE 100

BALTIMORE, MD 21209

(b) EIN

DESIGNATED AND /OR

GRANTED IN SUPPORT INC

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 52-0607966 501 (C) (3) 6.427 CALVERT HALL COLLEGE HIGH DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

SCHOOL IGRANTED IN SUPPORT 8102 LA SALLE ROAD OF AGENCY PROGRAMS BALTIMORE, MD 21286

CALVERT SCHOOL INC. 52-0591510 501 (C) (3) 6.502 DESIGNATED AND /OR

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

105 TUSCANY ROAD

BALTIMORE, MD 21210

organization or government if applicable grant cash or government (book, FMV, appraisal, non-cash assistance or assistance or assistance

(f) Method of valuation

(q) Description of

(h) Purpose of grant

DECICALATED AND JOD

DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

CAMP ST VINCENT CO ST	52-059/056	501 (C) (3)	11,035		1	DESIGNATED AND /OR
VINCENT DE PAUL OF						GRANTED IN SUPPORT
BALTIMORE INC						OF AGENCY PROGRAMS
2305 N CHARLES STREET						
BALTIMORE, MD 21218						

5,133

44 005

(d) Amount of cash

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

FO4 (O) (O)

501 (C) (3)

(c) IRC section

(a) Name and address of

CAPITAL AREA FOOD BANK

4900 PUERTO RICO AVE NE

WASHINGTON, DC 20017

(b) EIN

E2 0E070E6

52-1167581

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance CARE AND SHARE FOOD BANK 84-0731930 5.663 DESIGNATED AND /OR

501 (C) (3) 2605 PREAMBLE PT IGRANTED IN SUPPORT OF AGENCY PROGRAMS COLORADO SPRINGS, CO 80915

52-1920377

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

SOMERSET STREET

900 SOMERSET ST

BALTIMORE, MD 21202

501 (C) (3) 28.299 CAROLINE CENTER AT

DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

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

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

CARROLL CHILD CARE	52-0890366	501 (C) (3)	11,441		DESIGNATED AND /OR
CENTERS INC					GRANTED IN SUPPORT
PO BOX 1382					OF AGENCY PROGRAMS
WESTMINSTER MD 21158					

CARROLL COUNTY FOOD 52-1247177 501 (C) (3) 10.114 DESIGNATED AND /OR

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

SUNDAY

PO BOX 2160

WESTMINSTER, MD 21158

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

CASA DE MARYLAND INC 8151 15TH AVENUE LANGLEY PARK, MD 20783	52-1372972	501 (C) (3)	20,165		GRANTED IN SUPPORT OF AGENCY PROGRAMS
CASA OF BALTIMORE COUNTY INC	52-2258847	501 (C) (3)	29,256		DESIGNATED AND /OR GRANTED IN SUPPORT

OF AGENCY PROGRAMS 305 W CHESAPEAKE AVENUE -SUITE 117

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

117

TOWSON, MD 21204

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

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

CATHERINE'S FAMILY AND	47-3335842	501 (C) (3)	7,717		DESIGNATED AND /OR
YOUTH SERVICES INC					GRANTED IN SUPPORT
PO BOX 11580					OF AGENCY PROGRAMS
BALTIMORE, MD 21229					

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

ARCHDIOCESE

WASHINGTON, DC 20001

924 G ST NW

CATHOLIC CHARITIES OF THE 53-0196524 501 (C) (3) 6.826 IDESIGNATED AND /OR

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance CATHOLIC RELIEF SERVICES -13-5563422 501 (C) (3) 24.895 DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

USCCB IGRANTED IN SUPPORT 228 W LEXINGTON STREET BALTIMORE, MD 21201

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

FOUNDATION

7200 SOLLERS POINT ROAD

BALTIMORE, MD 21222

OF AGENCY PROGRAMS CCBC CATONSVILLE 20-3246676 501 (C) (3) 19.794 DESIGNATED AND /OR

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-2142708 501 (C) (3) 265.058 DESIGNATED AND /OR CENTER FOR URBAN FAMILIES

OF AGENCY PROGRAMS

INC IGRANTED IN SUPPORT 2201 N MONROE STREET OF AGENCY PROGRAMS BALTIMORE, MD 21217

CENTER STAGE ASSOCIATES 52-0780194 17.051 DESIGNATED AND /OR

501 (C) (3) IGRANTED IN SUPPORT

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

INC

700 NORTH CALVERT ST

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 (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

27-1116788 501 (C) (3) 6.021 CHARM CITY CLINIC INC DESIGNATED AND /OR 2222 JEFFERSON ST IGRANTED IN SUPPORT BALTIMORE, MD 21205

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

6 HERNDON AVE

ANNAPOLIS, MD 21403

OF AGENCY PROGRAMS CHESAPEAKE BAY 52-6065757 501 (C) (3) 24.502 DESIGNATED AND /OR FOUNDATION IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

(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 ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance CHILDDENIC HOME OF YORK 22 1252001 EO1 (C) (3) 6 226 DECICNATED AND (OD

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

HOPKINS

1915 MCELDERRY ST

BALTIMORE, MD 21205

77 SHOE HOUSE ROAD YORK, PA 17406	23-1332081	301 (C) (3)	6,226		GRANTED IN SUPPORT OF AGENCY PROGRAMS
CHILDREN'S HOUSE AT JOHNS	52-1619682	501 (C) (3)	8,898		DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 31-1480933 501 (C) (3) 5.435 CHILDREN'S SCHOLARSHIP DESIGNATED AND /OR

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

FUND OF BALTIMORE IGRANTED IN SUPPORT 1000 SAINT PAUL STREET

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

ANGEL

2629 HUNTINGTON AVE

BALTIMORE, MD 21211

OF AGENCY PROGRAMS BALTIMORE, MD 21202 CHURCH OF THE GUARDIAN 52-0747600 501 (C) (3) 10.950 DESIGNATED AND /OR

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 46-4725638 501 (C) (3) 26.180 CITY LIFE - COMMUNITY DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

BUILDERS IGRANTED IN SUPPORT 2809 BOSTON ST STE402 OF AGENCY PROGRAMS BALTIMORE, MD 21224

52-1925614 39.238 DESIGNATED AND /OR

CIVIC WORKS INC. 501 (C) (3)

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

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 (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 52-1598921 7.797 COLLEGE BOUND 501 (C) (3) DESIGNATED AND /OR FOUNDATION INC GRANTED IN SUPPORT 300 WATER ST STE 300 OF AGENCY PROGRAMS

BALTIMORE, MD 21202 COMMUNITY ACTION COUNCIL 52-0823083 501 (C) (3) 154.329 OF HOWARD COUNTY

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

COLUMBIA, MD 21046

DESIGNATED AND /OR GRANTED IN SUPPORT MARYLAND INC OF AGENCY PROGRAMS 6751 COLUMBIA GATEWAY DR BOX 226

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

COMMUNITY ASSISTANCE NETWORK INC 7701 DUNMANWAY BALTIMORE, MD 21222	52-0823186	501 (C) (3)	19,482		DESIGNATED AND /OR GRANTED IN SUPPORT OF AGENCY PROGRAMS
COMMUNITY SERVICES OF	52-1271898	501 (C) (3)	77 144		DESIGNATED AND /OR

201 (C) (3) //,144

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

110

BALTIMORE, MD 21230

IDESIGNATED AND JOK CENTRAL MARYLAND IGRANTED IN SUPPORT 2701 W PATAPSCO AVE STE OF AGENCY PROGRAMS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 52-0695477 DESIGNATED AND /OR

OF AGENCY PROGRAMS

501 (C) (3) 14.722 COUNTY UNITED WAY 113 A SOUTH CENTRE ST IGRANTED IN SUPPORT CUMBERLAND, MD 21502

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

PO BOX 13004

BALTIMORE, MD 21203

OF AGENCY PROGRAMS COURT APPOINTED SPECIAL 52-1905072 501 (C) (3) 8.846 DESIGNATED AND /OR ADVOCATE OF BALTIMORE INC. IGRANTED IN SUPPORT

(a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 13-6193105 501 (C) (3) 14,656 CROHN'S & COLITIS IDESIGNATED AND /OR

(f) Method of valuation

OF AGENCY PROGRAMS

	 (-> (->			
BALTIMORE, MD 21208				_
206				
1777 REISTERSTOWN RD STE				OF AGENCY PROGRAMS
FOUNDATION OF AMERICA INC				GRANTED IN SUPPORT

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

10626 YORK ROAD - SUITE A

COCKEYSVILLE, MD 21030

(b) EIN

DESIGNATED AND /OR CYSTIC FIBROSIS 52-6019357 501 (C) (3) 6,949 FOUNDATION - MARYLAND IGRANTED IN SUPPORT

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

501 (C) (3) 22.446 DAYSPRING PROGRAM INC 52-2042543 DESIGNATED AND /OR 1125 N PATTERSON PARK AVE IGRANTED IN SUPPORT BALTIMORE, MD 21213

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

PHOENIX, MD 21131

OF AGENCY PROGRAMS DEFENDERS OF ANIMAL 52-1061126 501 (C) (3) 12.277

DESIGNATED AND /OR RIGHTS

IGRANTED IN SUPPORT 14412 OLD YORK RD OF AGENCY PROGRAMS

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

DIGITAL HARBOR	45-2536579	501 (C) (3)	5,186		DESIGNATED AND /OR
FOUNDATION					GRANTED IN SUPPORT
1045 LIGHT ST					OF AGENCY PROGRAMS

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

AMIR ASSADI

7 EAST REDWOOD ST STE 801

BALTIMORE, MD 21202

DIDECTOR OF FINANCE ATTN	F2 (000760	LOCAL COVERNMENT	05 204		DECIONATED AND (0
BALTIMORE, MD 21230					OF AGENCY PROGRAM
1045 LIGHT ST					OF AGENCY PROGRAM

1045 LIGHT ST BALTIMORE, MD 21230					OF AGENCY PROGRAMS
DIRECTOR OF FINANCE - ATTN	52-6000769	LOCAL GOVERNMENT	96,204		DESIGNATED AND /OR

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 95-4116679 6.000 DIY GIRLS SOCIAL & 501 (C) (3) DESIGNATED AND /OR

ENVIRONMENTAL IGRANTED IN SUPPORT ENTREPENEURS OF AGENCY PROGRAMS 23532 CALABASAS RD NOA CALABASAS, CA 91302

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

BALTIMORE, MD 21201

5,262 DOWNTOWN BALTIMORE 52-1226027 501 (C) (3) DESIGNATED AND /OR CHILD CARE INC IGRANTED IN SUPPORT 237 ARCH STREET OF AGENCY PROGRAMS

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

DOWNTOWN SAILING CENTER 1425 KEY HWY STE 110 BALTIMORE, MD 21230	52-1867434	501 (C) (3)	6,473		DESIGNATED AND /OR GRANTED IN SUPPORT OF AGENCY PROGRAMS

FARTHSHARE MID-ATLANTIC 27-3918694 501 (C) (3) 31.759 7735 OLD GEORGETOWN

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

BETHESDA, MD 20814

DESIGNATED AND /OR IGRANTED IN SUPPORT ROAD - SUITE OF AGENCY PROGRAMS 900

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance EASTER SEAL OF NORTH 58-1919768 501 (C) (3) 8.052 DESIGNATED AND /OR

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

GEORGIA INC 53 PERIMETER CENTER EAST

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

SUPPORT CENTER INC

EDGEWOOD, MD 21040

1918 PULASKI HWY

IGRANTED IN SUPPORT ATLANTA, GA 30346

OF AGENCY PROGRAMS EDGEWOOD COMMUNITY 46-1504860 501 (C) (3) 7.238 DESIGNATED AND /OR

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

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

ENOCH PRATT FREE LIBRARY OF BALTIMORE CITY 400 CATHEDRAL ST BALTIMORE, MD 21201	52-6001143	501 (C) (3)	30,209		DESIGNATED AND /OR GRANTED IN SUPPORT OF AGENCY PROGRAMS
ENTERPRISE COMMUNITY	52-1231931	501 (C) (3)	32.878		DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

PARTNERS INC 11000 BROKEN LAND PKWY

COLUMBIA, MD 21044

STE700

(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 or government other) assistance EDILEPSY FOLINDATION OF 52-0856660 501 (C) (3) 7 715 DESIGNATED AND /OR

OF AGENCY PROGRAMS

THE CHESAPEAKE REGION 8301 PROFESSIONAL PLACE	32-0030000	301 (0) (3)	/,/13		GRANTED IN SUPPORT OF AGENCY PROGRAMS
STE200 LANDOVER, MD 20785					

501 (C) (3) 5,185 DESIGNATED AND /OR EPISCOPAL COMMUNITY 52-0591564

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

1701 MADISON AVE STE 515

BALTIMORE, MD 21217

SERVICES OF MARYLAND INC. IGRANTED IN SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-1939344 501 (C) (3) 336.422 EPISCOPAL HOUSING DESIGNATED AND /OR

CORPORATION IGRANTED IN SUPPORT 3986 ROLAND AVE

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

430 S BROADWAY 3RD FL

BALTIMORE, MD 21231

OF AGENCY PROGRAMS BALTIMORE, MD 21211

ESPERANZA CENTER HEALTH 52-0591538 501 (C) (3) 26.180 DESIGNATED AND /OR SERVICES GRANTED IN SUPPORT

OF AGENCY PROGRAMS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance EVERY KID CAN COOK INC 82-1954638 501 (C) (3) 38.883 DESIGNATED AND /OR

OF AGENCY PROGRAMS

4240 COLUMBIA RD ELLICOTT CITY, MD 21042		, , , ,	·			GRANTED IN SUPPORT OF AGENCY PROGRAMS
FAMILY & CHILDREN'S SERVICES OF CENTRAL	52-0591546	501 (C) (3)	158,910		1	DESIGNATED AND /OR GRANTED IN SUPPORT

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

MARYLAND INC

4623 FALLS RD BALTIMORE, MD 21209

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 52-1919988 DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

501 (C) (3) 15.927 FELLS POINT CREATIVE ALLIANCE INC IGRANTED IN SUPPORT 3134 FASTERN AVE BALTIMORE, MD 21224

OF AGENCY PROGRAMS

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

2025 FREELAND ROAD

FREELAND, MD 21053

FIRST FRUITS FARM INC. 65-1220502 501 (C) (3) 57.517 DESIGNATED AND /OR

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

DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

FISHER HOUSE FOUNDATION	11-3158401	501 (C) (3)	7,451		DESIGNATED AND /OR
111 ROCKVILLE PIKE STE 420					GRANTED IN SUPPORT
ROCKVILLE, MD 20850					OF AGENCY PROGRAMS

13.325

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

501 (C) (3)

FRANCISCAN CENTER

101 WEST 23RD STREET

BALTIMORE, MD 21218

52-1164260

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

FUND FOR FRUGATIONAL		(-) (-)			
SUITE 410-A BALTIMORE, MD 21230					OF AGENCY PROGRAMS
1800 WASHINGTON BLVD -					GRANTED IN SUPPORT
FUEL FUND OF MARYLAND	52-1204629	501 (C) (3)	93,416		DESIGNATED AND /OR

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

SUITE 400

BALTIMORE, MD 21201

NCY PROGRAMS IDESIGNATED AND /OR FUND FOR EDUCATIONAL 52-1129402 39.2411 501 (C) (3) EXCELLENCE IGRANTED IN SUPPORT

800 NORTH CHARLES ST OF AGENCY PROGRAMS

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

(f) Method of valuation

(q) Description of

(h) Purpose of grant

IDESIGNATED AND /OR

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

FUND FOR JOHNS HOPKINS	52-0591656	501 (C) (3)	5,000		DESIGNATED AND /OR
MEDICINE					GRANTED IN SUPPORT
550 N BROADWAY SUITE 914					OF AGENCY PROGRAMS
BALTIMODE MD 21205					i

DALITMUKE, MD 21203 33.662

(d) Amount of cash

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

501 (C) (3)

(c) IRC section

(a) Name and address of

GILCHRIST HOSPICE CARE

11311 MCCORMICK ROAD

HUNT VALLEY, MD 21031

SUITE 350

(b) EIN

52-1851251

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 52-0591604 501 (C) (3) 5.010 GILMAN SCHOOL INC DESIGNATED AND /OR

OF AGENCY PROGRAMS

5407 ROLAND AVENUE IGRANTED IN SUPPORT BALTIMORE, MD 21210 OF AGENCY PROGRAMS GIRL SCOUTS OF CENTRAL 52-0780207 501 (C) (3) 60.785 DESIGNATED AND /OR

MARYLAND IGRANTED IN SUPPORT

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

4806 SETON DR

BALTIMORE, MD 21215

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance GLOBAL IMPACT 52-1273585 501 (C) (3) 34 68N DESIGNATED AND /OR

IGRANTED IN SUPPORT

TOF AGENCY PROGRAMS

GEODAE IIIIAGI	JL 12/3303	301 (0) (3)	31,000		DESIGNATED AND JON
1199 NORTH FAIRFAX STREET					GRANTED IN SUPPORT
300					OF AGENCY PROGRAMS
ALEXANDRIA, VA 22314					

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

THE CHESAPEAKE INC

222 EAST REDWOOD ST

BALTIMORE, MD 21202

GOODWILL INDUSTRIES OF 52-0591576 501 (C) (3) 125.782 DESIGNATED AND /OR

(a) Name and address of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance

(f) Method of valuation

(a) Description of

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

52-0909351 501 (C) (3) 44.728 DESIGNATED AND /OR GRASSROOTS CRISIS INTERVENTION CENTER INC IGRANTED IN SUPPORT OF AGENCY PROGRAMS 6700 FREETOWN RD

COLUMBIA MD 21044

(d) Amount of cash

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

(c) IRC section

(b) EIN

FOR PREGNANCY CONCERNS

442 EASTERN BLVD

ESSEX, MD 21221

GREATER BALTIMORE CENTER 52-1192219 501 (C) (3) 19.070 DESIGNATED AND /OR

(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 other) assistance 52-6049658 501 (C) (3) 15.054 GREATER BALTIMORE DESIGNATED AND /OR MEDICAL CENTER GBMC GRANTED IN SUPPORT ENCY PROGRAMS

FOUNDATION 6701 N CHARLES ST BALTIMORE, MD 21204					 OF AGEN
HABITAT FOR HUMANITY OF THE CHESAPEAKE	52-1226188	501 (C) (3)	19,524		DESIGNA

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

311

BALTIMORE, MD 21227

NATED AND /OR TED IN SUPPORT 3741 COMMERCE DRIVE - STE OF AGENCY PROGRAMS

(h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance

(f) Method of valuation

(a) Description of

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

501 (C) (3) 6.987 HABITAT FOR HUMANITY 52-1848933 DESIGNATED AND /OR SUSQUEHANNA INC IGRANTED IN SUPPORT OF AGENCY PROGRAMS 205 S HAYS STREET

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

2434 W BELVERDERE AVE

BALTIMORE, MD 21215

SINAI

(b) EIN

BEL AIR, MD 21014 HACKERMAN PATZ HOUSE AT 52-0486540 501 (C) (3) 100.520 DESIGNATED AND /OR

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

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

501 (C) (3)

52-1706367

HARFORD COMMUNITY ACTION AGENCY	52-1306096	501 (C) (3)	18,914		DESIGNATED AND /OR GRANTED IN SUPPORT
1321-B WOODBRIDGE					OF AGENCY PROGRAMS
CTATION WAY					
STATION WAY					
EDGEWOOD MD 21040					

DESIGNATED AND /OR

IGRANTED IN SUPPORT OF AGENCY PROGRAMS

17,332

HARFORD FAMILY HOUSE INC

ABERDEEN, MD 21001

53 EAST BEL AIR AVENUE STE

(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 other) or government assistance HEALTH CARE FOR THE 52-1576404 501 (C) (3) 246 700 DECIGNATED AND /OD

IDESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

HEALTH CARE FOR THE	32-13/0404	JOT (C) (3)	340,709		DESIGNATED AND JOK
HOMELESS INC					GRANTED IN SUPPORT
421 FALLSWAY					OF AGENCY PROGRAMS
BALTIMORE, MD 21202					

84.620

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

501 (C) (3)

HEALTHY LITTLE COOKS LLC.

ELLICOTT CITY, MD 21042

4240 COLUMBIA RD

46-1229635

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance other) or government assistance LIEUDING UD MICCION INC 52-0625000 501 (C) (3) 70 075 DESIGNATED AND /OR

1029 E BALTIMORE ST BALTIMORE, MD 21202	32-0033090	301 (C) (3)	79,073		GRANTED IN SUPPORT OF AGENCY PROGRAMS
HIGHER ACHIEVEMENT	52-1383374	501 (C) (3)	8,135		DESIGNATED AND /OR

IGRANTED IN SUPPORT PROGRAM INC (THE HAP) 1750 COLUMBIA RD NW 2ND OF AGENCY PROGRAMS FLOOR

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

WASHINGTON, DC 20009

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

OF AGENCY PROGRAMS

DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

HOPE FOR JUSTICE PO BOX 280365	75-3179471	501 (C) (3)	12,973		DESIGNATED AND /OF GRANTED IN SUPPORT

5.269

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

501 (C) (3)

NASHVILLE, TN 37228

HOPE RETURNED INC

200 WYF HARBOR DR

QUEENSTOWN, MD 21658

46-3466979

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-1339057 501 (C) (3) 5.000 DESIGNATED AND /OR HOSPICE OF GARRETT

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

COUNTY INC IGRANTED IN SUPPORT PO BOX 271 OAKLAND, MD 21550

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

INC

90 RITCHIE HWY

PASADENA, MD 21122

OF AGENCY PROGRAMS HOSPICE OF THE CHESAPEAKE 52-1181448 10.224 DESIGNATED AND /OR

501 (C) (3)

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

DESTGNATED AND JOD

OF AGENCY PROGRAMS

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

501 (C) (3)

INC 2201 ARGONNE DR BALTIMORE, MD 21218	32-1100230	301 (C) (3)	223,300		GRANTED IN SUPPORT OF AGENCY PROGRAMS
HOWARD COUNTY AUTISM SOCIETY INC	52-1857721	501 (C) (3)	8,286		DESIGNATED AND /OR GRANTED IN SUPPORT

225 300

SOCIETY INC 9770 PATUXENT WOODS DR

COLUMBIA, MD 21046

STE 308

HOLICE OF BLITH MADVLAND

52-1100226

(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 or government other) assistance 10.524 HOWARD COUNTY GENERAL 52-1072778 501 (C) (3) DESIGNATED AND /OR

HOSPITAL FOUNDATION IGRANTED IN SUPPORT 5755 CEDAR LANE OF AGENCY PROGRAMS COLUMBIA, MD 21044 52-6000965 28.825 HOWARD COUNTY LOCAL GOVERNMENT

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

3430 COURTHOUSE DR ELLICOTT CITY, MD 21043

IDESIGNATED AND /OR GOVERNMENT - DEPARTMENT IGRANTED IN SUPPORT OF CITIZEN SERVICES OF AGENCY PROGRAMS

(h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-1549551 501 (C) (3) 103.596 HUMAN SERVICES PROGRAMS DESIGNATED AND /OR

(f) Method of valuation

(a) Description of

OF AGENCY PROGRAMS

OF CARROLL COUNTY INC. IGRANTED IN SUPPORT OF AGENCY PROGRAMS PO BOX 489 WESTMINSTER, MD 21158

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

1601 NICODEMUS RD

REISTERSTOWN, MD 21136

(b) EIN

HUMANE SOCIETY BALTIMORE 52-0623165 15.019

501 (C) (3) DESIGNATED AND /OR COUNTY IGRANTED IN SUPPORT

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

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

59-0799907 501 (C) (3) 5.341 HUMANE SOCIETY OF TAMPA DESIGNATED AND /OR BAY IGRANTED IN SUPPORT 3607 N ARMENIA AVE

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

6355 WOODSIDE CT

COLUMBIA, MD 21046

OF AGENCY PROGRAMS TAMPA, FL 33607

HUMANIM INC 52-0962588 501 (C) (3) 19.509 DESIGNATED AND /OR

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 06-1318337 501 (C) (3) 9.500 INNER CITY FOUNDATION FOR DESIGNATED AND /OR

CHARITY AND EDUCATION IGRANTED IN SUPPORT 238 JEWETT AVE BRIDGEPORT, CT 06606

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

OF AGENCY PROGRAMS 06-1509744 501 (C) (3) 5.700 INTERNATIONAL PARURESIS

DESIGNATED AND /OR ASSOCIATION INC GRANTED IN SUPPORT

OF AGENCY PROGRAMS

PO BOX 21237 CATONSVILLE, MD 21228

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 13-5660870 501 (C) (3) 7.077 INTERNATIONAL RESCUE DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

COMMITTEE BALTIMORE MD IGRANTED IN SUPPORT 122 F 42ND STREET NEW YORK, NY 10168

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

2050-A ROCKROSE RD

BALTIMORE, MD 21211

OF AGENCY PROGRAMS

ITINERIS FOUNDATION INC. 26-2361654 501 (C) (3) 5.230 DESIGNATED AND /OR

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

JEMICY SCHOOL 11 CELADON RD OWINGS MILLS, MD 21117	52-0976194	501 (C) (3)	5,041		DESIGNATED AND /OR GRANTED IN SUPPORT OF AGENCY PROGRAM

JEWISH COMMUNITY 52-0607909 25.400

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

BALTIMORE, MD 21215

501 (C) (3) DESIGNATED AND /OR SERVICES INC. IGRANTED IN SUPPORT

5750 PARK HEIGHTS AVE OF AGENCY PROGRAMS

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

JH CAREERS IN SCIENCE & MEDICINE OVERCOMING SOCIO BARRIERS 725 N WOLF ST BALTIMORE, MD 21205	52-0595110	501 (C) (3)	6,004		DESIGNATED AND /OR GRANTED IN SUPPORT OF AGENCY PROGRAMS

OF AGENCY PROGRAMS

52-0591656 501 (C) (3) 10,103 DESIGNATED AND /OR JOHN FETTING FUND FOR BREAST CANCER PREVENTION IGRANTED IN SUPPORT

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

750 E PRATT ST STE 1700

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 (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 52-1341890 501 (C) (3) 50.299 JOHNS HOPKINS BAYVIEW DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

MEDICAL CENTER IGRANTED IN SUPPORT 5200 FASTERN AVE STE 356

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

OF MEDICINE

5200 FASTERN AVE SUITE 354

BALTIMORE, MD 21224

BALTIMORE, MD 21224

OF AGENCY PROGRAMS 52-1341890 501 (C) (3) 10.000 JOHNS HOPKINS DEPARTMENT DESIGNATED AND /OR

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 52-0595110 5.167 JOHNS HOPKINS HOME CARE 501 (C) (3) DESIGNATED AND /OR GROUP INC IGRANTED IN SUPPORT 5901 HOLABIRD AVENUE -OF AGENCY PROGRAMS

SUITE A BALTIMORE, MD 21224 JOHNS HOPKINS HOSPITAL 52-0595110 501 (C) (3) 100,020 HACKERMAN-PATZ PATIENT

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

BALTIMORE, MD 21231

DESIGNATED AND /OR GRANTED IN SUPPORT AND FAMILY OF AGENCY PROGRAMS 301 N BROADWAY STREET

(c) IRC section (f) Method of valuation (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance TOURS HODVING HOSDITAL 52-0505110 501 (C) (3) E E001 DESIGNATED AND /OR

(a) Description of

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

WILMER EYE INSTITUTE 600 N WOLFE ST RM 112 BALTIMORE, MD 21287	32-0393110	301 (0) (3)	3,300		GRANTED IN SUPPORT OF AGENCY PROGRAMS
BALTIMORE, MD 21287					

10HNS HOPKINS UNIVERSITY 52-0595110 501 (C) (3) 58.600 DESIGNATED AND /OR

(d) Amount of cash

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

(a) Name and address of

100 S CHARLES ST

BALTIMORE, MD 21201

(b) EIN

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

DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

JOSEPH RICHEY HOSPICE INC	52-1184960	501 (C) (3)	7,877		DESIGNATED AND /OR
838 NORTH EUTAW ST			·		GRANTED IN SUPPORT
BALTIMORE, MD 21201					OF AGENCY PROGRAMS

16,350

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

501 (C) (3)

JUBILEE BALTIMORE INC.

25 FAST 20TH STREET

BALTIMORE, MD 21218

52-1222237

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

JUNIOR ACHIEVEMENT CENTRAL MARYLAND 10711 RED RUN BLVD STE110 OWINGS MILLS, MD 21117	52-0688275	501 (C) (3)	6,765		DESIGNATED AND /OR GRANTED IN SUPPORT OF AGENCY PROGRAMS

20.534 JUVENILE DIABETES 23-1907729 501 (C) (3)

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

26 BROADWAY 14TH FLOOR NEW YORK, NY 10004

DESIGNATED AND /OR RESEARCH FOUNDATION IGRANTED IN SUPPORT INTERNATIONAL OF AGENCY PROGRAMS

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

KENNEDY KRIEGER INSTITUTE	52-0607971	501 (C) (3)	47,805		DESIGNATED AND /OR
707 NORTH BROADWAY		, , , ,	·		GRANTED IN SUPPORT
BALTIMORE, MD 21205					OF AGENCY PROGRAMS

DESIGNATED AND /OR IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

5.968

BALTIMURE, MD 21205

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

501 (C) (3)

52-0701774

KEY SCHOOL

543 HTLLSMERE DR ANNAPOLIS, MD 21403

(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 ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 46 000000 FO4 (C) (3) 27.000 DECICNATED AND /OR

OF AGENCY PROGRAMS

1350 BLAIR DR STE G ODENTON, MD 21113	46-0982054	501 (C) (3)	27,000		GRANTED IN SUPPORT OF AGENCY PROGRAMS
VIDD HARMONY ACADEMY	52-22/2512	501 (C) (3)	11 951		DESIGNATED AND /OR

IDESIGNATED AND /OR KIPP HARMONY ACADEMY 52-2342513 201 (C) (3) 11,851 GRANTED IN SUPPORT 4701 GREENSPRING AVENUE

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

RM 115

BALTIMORE, MD 21209

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

LEUKEMIA & LYMPHOMA	13-5644916	501 (C) (3)	16,936		DESIGNATED AND /OR
SOCIETY INC - MARYLAND					GRANTED IN SUPPORT
CHAPTER					OF AGENCY PROGRAMS
100 PAINTERS MILL ROAD -					
SUITE 800					

OWINGS MILLS, MD 21117

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

2900A JEFFERSON DAVIS HWY

ALEXANDRIA, VA 22305

(b) EIN

LIBERTY'S PROMISE 27-0058022 501 (C) (3) 5,000

DESIGNATED AND /OR

(a) Description of

(h) Purpose of grant

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

(f) Method of valuation

(c) IRC section (f) Method of valuation (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance

(a) Description of

OF AGENCY PROGRAMS

· · · · · · · · · · · · · · · · · · ·					
ANNAPOLIS, MD 21401					OF AGENCY PROGRAMS
10 HUDSON STREET					GRANTED IN SUPPORT
THE LIGHT HOUSE INC	52-1671388	501 (C) (3)	13,043		DESIGNATED AND /OR

LIGHT OF TRUTH CENTER 52-2193286 501 (C) (3) 7.882 DESIGNATED AND /OR GRANTED IN SUPPORT (THE)

(d) Amount of cash

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

(a) Name and address of

3308 KYLE CT

BALTIMORE, MD 21244

(b) EIN

(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 ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance LIGHTHOUSE SHELTER OF 52-1441457 501 (C) (3) 6 827 DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

ANNAPOLIS				GRANTED IN SUPPORT
202 WEST ST				OF AGENCY PROGRAMS
ANNAPOLIS, MD 21401				

LIGHTHOUSE INC. 23-7181726 501 (C) (3) 23.949 DESIGNATED AND /OR

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

60 MELLOR AVE

CATONSVILLE, MD 21228

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-0715244 9.593 DESIGNATED AND /OR

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

501 (C) (3) LITTLE SISTERS OF THE POOR-BALTIMORE INC IGRANTED IN SUPPORT 601 MAIDEN CHOICE LANE OF AGENCY PROGRAMS

BALTIMORE, MD 21228

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

FOUNDATION

1417 THAMES ST

BALTIMORE, MD 21231

52-1369524 501 (C) (3) 57.942 LIVING CLASSROOMS DESIGNATED AND /OR

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance LOVOLA DI ALCETELO LITCH E2 11/21E2 EO1 (C) (3) 0.070 DECICNATED AND /OD

DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

SCHOOL PO BOX 6819 BALTIMORE, MD 21285	32-1142132	301 (C) (3)	9,076		GRANTED IN SUPPORT OF AGENCY PROGRAMS
BALTIMORE, MD 21285					

8.149

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

501 (C) (3)

52-0591623

LOYOLA UNIVERSITY MARYLAND

BALTIMORE, MD 21210

4501 NORTH CHARLES STREET

(h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance

(f) Method of valuation

(a) Description of

OF AGENCY PROGRAMS

MAKE-A-WISH FOUNDATION	52-1306075	501 (C) (3)	9,710		DESIGNATED AND /OR
OF THE MID ATLANTIC INC					GRANTED IN SUPPORT
6555 ROCK SPRING DR					OF AGENCY PROGRAMS
STE280					
BETHESDA, MD 20817					

501 (C) (3) 9,450 MAKING CHANGE CENTER 52-1755086

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

900

COLUMBIA, MD 21044

(b) EIN

DESIGNATED AND /OR 10440 PATUXENT PKWY SUITE IGRANTED IN SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance MARIAN HOUSE INC 52-1243849 501 (C) (3) 30 945 DESIGNATED AND /OR

OF AGENCY PROGRAMS

949 GORSUCH AVE BALTIMORE, MD 21218	32 12 130 13	301 (0)	30,313		GRANTED IN SUPPORT OF AGENCY PROGRAMS
MARYLAND CENTER FOR VETERANS EDUCATION AND	52-1815710	501 (C) (3)	15,554		DESIGNATED AND /OR GRANTED IN SUPPORT

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

TRAINING INC

301 NORTH HIGH ST 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 (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 52-2273194 10.000

OF AGENCY PROGRAMS

501 (C) (3) MARYLAND CLUB DESIGNATED AND /OR PRESERVATION FOUNDATION IGRANTED IN SUPPORT 1 FAST FAGER ST OF AGENCY PROGRAMS BALTIMORE, MD 21202

52-1486702 501 (C) (3) 17.449 DESIGNATED AND /OR

MARYLAND FAMILY NETWORK 1001 EASTERN AVE 2ND IGRANTED IN SUPPORT

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

FLOOR

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 (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance

MARYLAND FOOD BANK INC 2200 HALETHORPE FARMS RD BALTIMORE, MD 21227	52-1135690	501 (C) (3)	207,829		DESIGNATED AND /OR GRANTED IN SUPPORT OF AGENCY PROGRAMS
MARYLAND NEW DIRECTIONS INC	52-1021365	501 (C) (3)	45,720		DESIGNATED AND /OR GRANTED IN SUPPORT

TINC 2700 NORTH CHARLES STREET OF AGENCY PROGRAMS - SUITE

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

200

BALTIMORE, MD 21218

(h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-6001558 40.679 DESIGNATED AND /OR

(f) Method of valuation

(a) Description of

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

501 (C) (3) MARYLAND SPCA OF BALTIMORE CITY INC IGRANTED IN SUPPORT 3300 FALLS RD OF AGENCY PROGRAMS

BALTIMORE, MD 21211

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

RIDING INC

1141 SUNRISE BEACH RD

CROWNSVILLE, MD 21032

(b) EIN

MARYLAND THERAPEUTIC 52-2035698 501 (C) (3) 177.007 DESIGNATED AND /OR

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance MARYLAND ZOO IN EL ADOCTES EO1 (C) (3) 0.057 DECICNATED AND /OD

DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

MARYLAND 200 IN BALTIMORE 1876 MANSION HOUSE DR BALTIMORE MD 21217	52-0996352	501 (C) (3)	8,05/		GRANTED IN SUPPORT OF AGENCY PROGRAMS
BALTIMORE, MD 21217					

115.552

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

501 (C) (3)

52-6074723

MEALS ON WHEELS OF CENTRAL MARYLAND INC

515 SOUTH HAVEN ST

BALTIMORE, MD 21224

(h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance

(f) Method of valuation

(a) Description of

DESIGNATED AND /OR

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

(d) Amount of cash

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

501 (C) (3)

(c) IRC section

(a) Name and address of

MEDSTAR UNION MEMORIAL

201 E UNIVERSITY PKWY

BALTIMORE, MD 21218

HOSPITAL

(b) EIN

52-0591685

MEDICAL EDUCATION RESOURCE INITIATIVE FOR TEENS INC 733 N BROADWAY STE 137 BALTIMORE, MD 21205	47-1139530	501 (C) (3)	7,981		DESIGNATED AND /OR GRANTED IN SUPPORT OF AGENCY PROGRAMS

5,225

(c) IRC section (f) Method of valuation (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

(a) Description of

52-0735462 501 (C) (3) 5.344 MERCY HIGH SCHOOL DESIGNATED AND /OR 1300 EAST NORTHERN PKWY IGRANTED IN SUPPORT BALTIMORE, MD 21239 OF AGENCY PROGRAMS

(d) Amount of cash

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

(a) Name and address of

REISTERSTOWN, MD 21136

(b) EIN

20-4397841 501 (C) (3) 25.007

MESSIAH COMMUNITY DESIGNATED AND /OR CHURCH IGRANTED IN SUPPORT 909 BERRYMANS LN OF AGENCY PROGRAMS

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

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

MISSION OF MERCY INC PO BOX 102	86-0704883	501 (C) (3)	11,598		I .	DESIGNATED AND /OR GRANTED IN SUPPORT
FAIRFIELD, PA 17320						OF AGENCY PROGRAMS
MOUNT WASHINGTON	52-0591483	501 (C) (3)	10,687			DESIGNATED AND /OR

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

PEDIATRIC HOSPITAL INC

1708 W ROGERS AVE

BALTIMORE, MD 21209

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 04-3068130 501 (C) (3) 9.165 DESIGNATED AND /OR NATIONAL BRAIN TUMOR

OF AGENCY PROGRAMS

SOCIETY INC IGRANTED IN SUPPORT 55 CHAPEL STREET STE 200 NEWTONVILLE, MA 02458

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

1301 YORK ROAD SUITE 209

LUTHERVILLE, MD 21093

OF AGENCY PROGRAMS 13-1673104 501 (C) (3) 14.231 NATIONAL KIDNEY DESIGNATED AND /OR FOUNDATION OF MARYLAND IGRANTED IN 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 organization grant cash or assistance or government other) assistance NATIONAL MULTIPLE 52-0663815 501 (C) (3) 14,179 DESIGNATED AND /OR

SCLEROSIS SOCIETY- MARYLAND CHAPTER 1800 M ST NW STE850 WASHINGTON, DC 20036					GRANTED IN SUPPORT OF AGENCY PROGRAMS
NATIONAL OCEAN SCIENCES BOWL	52-1892964	501 (C) (3)	5,372		DESIGNATED AND /OR GRANTED IN SUPPORT

OF AGENCY PROGRAMS 1201 NEW YORK AVENUE NW -SUITE 420

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

420

WASHINGTON, DC 20005

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 32-0123282 501 (C) (3) 9.864 NEIGHBOR RIDE INC DESIGNATED AND /OR

8950 ROUTE 108 SUITE 115 IGRANTED IN SUPPORT COLUMBIA, MD 21045

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

TIMONIUM, MD 21093

OF AGENCY PROGRAMS NOLAN ROBINSON 47-4700080 501 (C) (3) 5.671 DESIGNATED AND /OR

FOUNDATION INC

IGRANTED IN SUPPORT 118 DEEP DALE DR OF AGENCY PROGRAMS

organization or government if applicable grant cash assistance or assistance or description or government or government cash assistance or assistance or assistance or assistance or assistance or assistance or assistance

(f) Method of valuation

(q) Description of

(h) Purpose of grant

DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

OCEAN PARK COMMUNITY	95-6143865	501 (C) (3)	10,140		DESIGNATED AND /OR
CENTER-THE PEOPLE					GRANTED IN SUPPORT
CONCERN					OF AGENCY PROGRAMS
2116 ARLINGTON AVE STE100					
LOS ANGELES, CA 90018					

11,225

(d) Amount of cash

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

501 (C) (3)

(c) IRC section

(a) Name and address of

ODYSSEY SCHOOL THE

3257 BRIDLE RIDGE LN

STEVENSON, MD 21153

(b) EIN

52-1870341

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

(f) Method of valuation

(q) Description of

(h) Purpose of grant

DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

ONE CHURCH ONE CHILD OF	52-2176441	501 (C) (3)	6,592		DESIGNATED AND /OR
MARYLAND INC					GRANTED IN SUPPORT
5900 BLAND AVENUE					OF AGENCY PROGRAMS
BALTIMORE, MD 21215					i

40.037

(d) Amount of cash

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

501 (C) (3)

(c) IRC section

OPEN SOCIETY INSTITUTE -13-7029285

(b) EIN

(a) Name and address of

201 N CHARLES ST STE 1300

BALTIMORE, MD 21201

BALTIMORE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-1230183 501 (C) (3) 70.558 DESIGNATED AND /OR PACT HELPING CHILDREN

WITH SPECIAL NEEDS INC 7000 TUDSBURY RD BALTIMORE, MD 21244		,,,,	٠		GRANTED IN SUPPORT OF AGENCY PROGRAMS
PARKS AND PEOPLE	52-1349346	501 (C) (3)	5,226		DESIGNATED AND /OR

IGRANTED IN SUPPORT FOUNDATION INC 2100 LIBERTY HEIGHTS OF AGENCY PROGRAMS

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

AVENUE

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 (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance DADKE AND DEODIE 52-12/02/6 501 (C) (3) E 226 DECIGNATED AND /OD

IDESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

PARKS AND FLOFEL	1 22-13-33-0	JOT (C) (J)	3,220		DESIGNATED AND JOK
FOUNDATION INC					GRANTED IN SUPPORT
800 WYMAN PARK DR 10					OF AGENCY PROGRAMS
BALTIMORE, MD 21211					

30.000

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

501 (C) (3)

PATHWAY CHURCH OF GOD

BALTIMORE, MD 21225

3800 9TH STREET

52-1284649

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-1207942 501 (C) (3) 7.034 DESIGNATED AND /OR PENN MAR ORGANIZATION

(f) Method of valuation

(a) Description of

(h) Purpose of grant

OF AGENCY PROGRAMS

INC IGRANTED IN SUPPORT 310 OLD FREELAND RD OF AGENCY PROGRAMS FREELAND, MD 21053

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

INC

14530 MANOR RD

PHOENIX, MD 21131

(b) EIN

PHOENIX WILDLIFE CENTER 52-1891740 501 (C) (3) 5.879 DESIGNATED AND /OR IGRANTED IN SUPPORT

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

(f) Method of valuation

(q) Description of

(h) Purpose of grant

IDESIGNATED AND /OR

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

PIKES PEAK UNITED WAY	84-0511799	501 (C) (3)	10,579		DESIGNATED AND /OR
518 N NEVADA AVE					GRANTED IN SUPPORT
COLORADO SPRINGS, CO					OF AGENCY PROGRAMS
80903					1

8.021

(d) Amount of cash

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

501 (C) (3)

(c) IRC section

(a) Name and address of

PLANNED PARENTHOOD

434 WEST 33RD STREET

NEW YORK, NY 10001

FEDERATION OF AMERICA

(b) EIN

13-1644147

(c) IRC section (f) Method of valuation (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 52-0607930 501 (C) (3) 114.765 PLANNED PARENTHOOD OF DESIGNATED AND /OR

(a) Description of

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

MARYLAND INC IGRANTED IN SUPPORT 330 NORTH HOWARD ST

(d) Amount of cash

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

(a) Name and address of

520 PARK AVE STE409

BALTIMORE, MD 21201

(b) EIN

OF AGENCY PROGRAMS BALTIMORE, MD 21201

POP INC 37-1762917 501 (C) (3) 7.500 DESIGNATED AND /OR

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

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

501 (C) (3)

PROJECT PLASE INC

3601 OLD FREDERICK RD BALTIMORE, MD 21229 23-7367331

POWHERFUL FOUNDATION 134 WEST 26TH ST STE1150 NEW YORK, NY 10001	45-2440475	501 (C) (3)	5,000		DESIGNATED AND /OR GRANTED IN SUPPORT OF AGENCY PROGRAMS

DESIGNATED AND /OR GRANTED IN SUPPORT

OF AGENCY PROGRAMS

396,473

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

DEADY AT ENG		=== (=> (=>		·		
OAKLAND, CA 94612						OF AGENCY PROGRAMS
180 GRAND AVE STE800						GRANTED IN SUPPORT
READING PARTNERS	77-0568469	501 (C) (3)	25,625			DESIGNATED AND /OR

READY AT FIVE 52-1851611 501 (C) (3) 10.0001

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

BALTIMORE, MD 21228

IDESIGNATED AND /OR GRANTED IN SUPPORT 5520 RESEARCH PARK DRIVE -SUITE OF AGENCY PROGRAMS 150

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

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

RONALD MCDONALD CHARITIES OF BALTIMORE INC 635 W LEXINGTON ST BALTIMORE, MD 21201	52-1184957	501 (C) (3)	32,767			DESIGNATED AND /OR GRANTED IN SUPPORT OF AGENCY PROGRAMS
SAINT AGNES HOSPITAL	52-1415083	501 (C) (3)	5,036	·		DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

SAINT AGNES HOSPITAL FOUNDATION

900 S CATON AVE MAILSTOP

BALTIMORE, MD 21229

123

(book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance SAINT IOSEPH'S MEDICAL 52-1681044 501 (C) (3) 8 875 DESIGNATED AND /OR

(f) Method of valuation

(q) Description of

(h) Purpose of grant

OF AGENCY PROGRAMS

CENTER FOUNDATION 7601 OSLER DR STE 158 TOWSON MD 21204		1,215		GRANTED IN SUPPORT OF AGENCY PROGRAMS
TOWSON, MD 21204				

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

BROOKLANDVILLE, MD 21022

11232 FALLS RD

(b) EIN

SAINT PAUL'S SCHOOL FOR 52-0709497 501 (C) (3) 30.119 DESIGNATED AND /OR

GIRLS IGRANTED IN SUPPORT

(h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance

(f) Method of valuation

(a) Description of

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

52-0591457 501 (C) (3) 5.891 DESIGNATED AND /OR SALVATION ARMY GREATER BALTIMORE AREA COMMAND IGRANTED IN SUPPORT 814 LIGHT ST 1ST FLR OF AGENCY PROGRAMS

BALTIMORE, MD 21230 SAMUEL READY 52-0591460 501 (C) (3) 10.272 DESIGNATED AND /OR

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

SCHOLARSHIPS INC

RIDERWOOD, MD 21139

P O BOX 202

(b) EIN

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

(f) Method of valuation

(a) Description of

(h) Purpose of grant

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

26-4771679 501 (C) (3) 5.000 DESIGNATED AND /OR SANTA'S HELPERS ANONYMOUS IGRANTED IN SUPPORT OF AGENCY PROGRAMS 14411 COOPER RD

PHOENIX.MD 21131

52-0597056 501 (C) (3) 10.379 SARAH'S HOPE OUTREACH DESIGNATED AND /OR

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

2305 N CHARLES STREET 300

BALTIMORE, MD 21201

CENTER

(b) EIN

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 52-0591466 501 (C) (3) 7.544 DESIGNATED AND /OR SEVERN SCHOOL INC IGRANTED IN SUPPORT

201 WATER STREET OF AGENCY PROGRAMS SEVERNA PARK, MD 21146 SEXUAL ASSAULTSPOUSE 52-1224705 501 (C) (3) 29.385 ABUSE RESOURCE CENTER

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

BEL AIR, MD 21014

DESIGNATED AND /OR IGRANTED IN SUPPORT INC (SARC) OF AGENCY PROGRAMS PO BOX 1207

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

DESIGNATED AND /OR

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

52-0486540 501 (C) (3) 6.078 DESIGNATED AND /OR SINAI HOSPITAL OF BALTIMORE IGRANTED IN SUPPORT 2401 WEST BELVEDERE AVE OF AGENCY PROGRAMS

12.606

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

501 (C) (3)

BALTIMORE, MD 21215

SISTER ACADEMY OF

139 FIRST AVENUE

BALTIMORE, MD 21227

BALTIMORE INC

34-1975939

(c) IRC section (f) Method of valuation (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

(a) Description of

OF AGENCY PROGRAMS

52-2335639 501 (C) (3) 7.322 SISTER'S CIRCLE DESIGNATED AND /OR 261 STANMORE ROAD IGRANTED IN SUPPORT BALTIMORE, MD 21212

(d) Amount of cash

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

(a) Name and address of

71 O STREET NW

WASHINGTON, DC 20001

(b) EIN

TOF AGENCY PROGRAMS SO OTHERS MIGHT EAT INC. 23-7098123 501 (C) (3) 5.637 DESIGNATED AND /OR

(SOME) IGRANTED IN SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-1034466 501 (C) (3) 101.000 DESIGNATED AND /OR SOUTHEAST COMMUNITY

DEVELOPMENT CORP INC IGRANTED IN SUPPORT 3323 FASTERN AVENUE BALTIMORE, MD 21224

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

OF AGENCY PROGRAMS

52-0609154 SPCA OF ANNE ARUNDEL

501 (C) (3) 5.404 DESIGNATED AND /OR

GRANTED IN SUPPORT

COUNTY PO BOX 3471

OF AGENCY PROGRAMS ANNAPOLIS, MD 21403

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance SPECIAL OLYMPICS MARYLAND 23-7089144 501 (C) (3) 6.311 DESIGNATED AND /OR

(f) Method of valuation

(a) Description of

(h) Purpose of grant

OF AGENCY PROGRAMS

INC 3701 COMMERCE DR - SUITE	() ()	, i		GRANTED IN SUPPORT OF AGENCY PROGRAMS
103 BALTIMORE, MD 21227				

501 (C) (3) 40,426 ST JUDE CHILDREN'S 62-0646012 DESIGNATED AND /OR RESEARCH HOSPITAL IGRANTED IN SUPPORT

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

262 DANNY THOMAS PL

MEMPHIS, TN 38105

(b) EIN

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 52-0597056 501 (C) (3) 339.466 ST VINCENT DE PAUL OF DESIGNATED AND /OR

OF AGENCY PROGRAMS

BALTIMORE IGRANTED IN SUPPORT 2305 N CHARLES ST STE 300 OF AGENCY PROGRAMS BALTIMORE, MD 21218

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

BALTIMORE, MD 21218

52-0897806 501 (C) (3) 6.558 DESIGNATED AND /OR

STRONG CITY BALTIMORE 3503 NORTH CHARLES ST IGRANTED IN SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance SUSAN G KOMEN BREAST 52-2053491 26.267 DESIGNATED AND /OR

OF AGENCY PROGRAMS

501 (C) (3) CANCER FOUNDATION IGRANTED IN SUPPORT 200 E JOPPA RD STE 407 OF AGENCY PROGRAMS TOWSON, MD 21286

54-1858176 501 (C) (3) 6.963 TAHIRIH JUSTICE CENTER DESIGNATED AND /OR GRANTED IN SUPPORT

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

6402 ARLINGTON BLVD -

FALLS CHURCH, VA 22042

SUITE 300

(book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

(f) Method of valuation

(g) Description of

(h) Purpose of grant

OF AGENCY PROGRAMS

TEACH FOR AMERICA	13-3541913	501 (C) (3)	15,638		DESIGNATED AND /OR
2601 N HOWARD STREET STE					GRANTED IN SUPPORT
300					OF AGENCY PROGRAM
DAI TTMODE NO 04040					

BALTIMORE, MD 21218

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

BALTIMORE, MD 21212

(b) EIN

THE ARC BALTIMORE INC	52-0671428	501 (C) (3)	22,239		DESIGNATED AND /OR
7215 YORK RD					GRANTED IN SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 52-0784063 13.495 THE ARC NORTHERN 501 (C) (3) DESIGNATED AND /OR CHESAPEAKE REGION INC IGRANTED IN SUPPORT OF AGENCY PROGRAMS

OF AGENCY PROGRAMS

4513 OLD PHILADELPHIA
ROAD
ABERDEEN, MD 21001

THE ASSOCIATED JEWISH
COMMUNITY FEDERATION OF GRANTED IN SUPPORT

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

BALTIMORE

101 W MOUNT ROYAL AVE BALTIMORE, MD 21201

if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 41-2073220 501 (C) (3) 10,743 DESIGNATED AND /OR THE ASSOCIATION FOR

(f) Method of valuation

(g) Description of

(h) Purpose of grant

OF AGENCY PROGRAMS

THE BALTIMORE CITY	52-1212473	501 (C) (3)	13 171			DESIGNATED AND /OR
PRONTOTEMPORAL DEGENERATION 290 KING OF PRUSSIA RD - SUITE 320 RADNOR, PA 19087					1	OF AGENCY PROGRAMS

201 (C) (2) 13,1/1 FOUNDATION GRANTED IN SUPPORT

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

INCYOUTHWORKS 417 E FAYETTE STREET 468 BALTIMORE, MD 21202

(b) EIN

organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

(f) Method of valuation

(g) Description of

(h) Purpose of grant

DECICNATED AND /OD

OF AGENCY PROGRAMS

THE BALTIMORE MUSEUM OF	22-0000102	JOT (C) (3)	1/,01/		DESIGNATED AND JOK
ART					GRANTED IN SUPPORT
10 ART MUSEUM DR					OF AGENCY PROGRAMS
BALTIMORE MD 21218					

17017

(d) Amount of cash

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

EO1 (C) (3)

(c) IRC section

(a) Name and address of

THE DAILTIMODE MUCCIUM OF

BALTIMORE, MD 21210

(b) EIN

E2 6000162

THE BALTIMORE TREE TRUST 26-4031411 9.945

501 (C) (3) DESIGNATED AND /OR PO BOX 26202 IGRANTED IN 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 organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance THE FAMILY TREE INC. 52-1110645 501 (C) (3) 1/12 228 DESIGNATED AND /OR

OF AGENCY PROGRAMS

2108 N CHARLES ST BALTIMORE, MD 21218	32 11100 13	301 (0) (3)	112,333			GRANTED IN SUPPORT OF AGENCY PROGRAMS
THE HUMANE SOCIETY OF	52-0567970	501 (C) (3)	6.457			DESIGNATED AND /OR

() ()) HARFORD COUNTY GRANTED IN SUPPORT

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

2208 CONNOLLY RD

FALLSTON, MD 21047

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 52-0591579 501 (C) (3) 11.325 THE LEAGUE FOR PEOPLE DESIGNATED AND /OR

OF AGENCY PROGRAMS

WITH DISABILITIES INC IGRANTED IN SUPPORT 1111 FAST COLD SPRING LN OF AGENCY PROGRAMS BALTIMORE, MD 21239

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

ANNAPOLIS, MD 21401

THE LIGHT HOUSE INC. 52-1671388 501 (C) (3) 26.000 DESIGNATED AND /OR

10 HUDSON STREET IGRANTED IN SUPPORT

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

DESIGNATED AND /OR

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

THE SEED SCHOOL OF	06-1818759	501 (C) (3)	7,147		DESIGNATED AND /OR
MARYLAND					GRANTED IN SUPPORT
200 FONT HILL AVENUE					OF AGENCY PROGRAMS
DALTIMORE MD 24222					

7.500

BALTIMORE, MD 21223

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

501 (C) (3)

52-1125663

THE UNIVERSITY OF

1000 HILLTOP CIRCLE

BALTIMORE, MD 21250

MARYLAND FOUNDATION

(c) IRC section (f) Method of valuation (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

(a) Description of

OF AGENCY PROGRAMS

THREAD INC 84-1700955 501 (C) (3) 11.502 DESIGNATED AND /OR PO BOX 1584 IGRANTED IN SUPPORT BALTIMORE, MD 21203 TOF AGENCY PROGRAMS

TOWSON UNIVERSITY 52-0939453 501 (C) (3) 7.136 DESIGNATED AND /OR FOUNDATION IGRANTED IN SUPPORT

(d) Amount of cash

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

(a) Name and address of

8000 YORK RD - ROOM 301

TOWSON, MD 21252

(b) EIN

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

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

TRAUMA INTERVENTION	33-0317893	501 (C) (3)	7,800		DESIGNATED AND /OR
PROGRAMS INC		. ,			GRANTED IN SUPPORT
1420 PHILLIPS ST					OF AGENCY PROGRAMS
VISTA, CA 92083					1

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

110 S PACA ST 9TH FL

BALTIMORE, MD 21201

UMMS FOUNDATION 52-2238893 501 (C) (3) 44.086 DESIGNATED AND /OR

(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 ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance LINITETED COMMUNITY 52-0696384 501 (C) (3) 5 060 DESIGNATED AND /OR

DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

ONT TED COMMONT	J2-009030 1	301 (0) (3)	3,500		DESIGNATED AND JOK
CONNECTIONS (UC2)					GRANTED IN SUPPORT
11350 MCCORMICKROAD 1100					OF AGENCY PROGRAMS
HUNT VALLEY, MD 21031					i

5.577

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

501 (C) (3)

52-1857927

UNITED MINISTRIES INC 1400 E LOMBARD ST

BALTIMORE, MD 21231

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 72-0471369 12.417 DESIGNATED AND /OR

GRANTED IN SUPPORT

OF AGENCY PROGRAMS

UNITED WAY FOR THE 501 (C) (3) GREATER NEW ORLEANS AREA IGRANTED IN SUPPORT 2515 CANAL ST OF AGENCY PROGRAMS

NEW ORLEANS, LA 70119 55-0402755 501 (C) (3) 26.834 UNITED WAY OF CENTRAL DESIGNATED AND /OR

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

WEST VIRGINIA INC

1 UNITED WAY SOUARE

CHARLESTON, WV 25301

(h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance

(f) Method of valuation

(a) Description of

OF AGENCY PROGRAMS

UNITED WAY OF DELAWARE	51-0073399	501 (C) (3)	7,570		DESIGNATED AND /OR
INC					GRANTED IN SUPPORT
625 NORTH ORANGE ST 3RD					OF AGENCY PROGRAMS
FL					
WILMINGTON, DE 19801					

52-0607973 501 (C) (3) 6,708 DESIGNATED AND /OR UNITED WAY OF FREDERICK COUNTY INC GRANTED IN SUPPORT

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

PO BOX 307

FREDERICK, MD 21705

(b) EIN

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance LINITED WAY OF CREENVILLE 57-0262066 501 (C) (3) E 703 DESTGNATED AND JOD

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

COUNTY INC 105 EDINBURGH COURT GREENVILLE, SC 29607	37-0302000	301 (C) (3)	3,703		GRANTED IN SUPPORT OF AGENCY PROGRAMS
UNITED WAY OF NORTHEAST	59-0637825	501 (C) (3)	20,061		DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

FLORIDA INC

40 EAST ADAMS STREET

JACKSONVILLE, FL 32202

SUITE 200

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

(f) Method of valuation

(q) Description of

(h) Purpose of grant

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

UNITED WAY OF NORTHERN	22-1487247	501 (C) (3)	17,500		DESIGNATED AND /OR
NEW JERSEY					GRANTED IN SUPPORT
120 HAMPTON HOUSE ROAD					OF AGENCY PROGRAMS
NEWTON, NJ 07860					1

35-1063368 501 (C) (3) 12.762 UNITED WAY OF ST JOSEPH

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

3517 EAST JEFFERSON BLVD

SOUTH BEND, IN 46615

COUNTY INC

(b) EIN

DESIGNATED AND /OR

(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 ıf applıcable grant cash non-cash assistance or assistance or government other) assistance 52-6016589 501 (C) (3) 9,292 UNITED WAY OF THE LOWER DESIGNATED AND /OR EASTERN SHORE INC IGRANTED IN SUPPORT GENCY PROGRAMS

801 N SALISBURY BLVD STE 202 SALISBURY, MD 21801					OF AGE
UNITED WAY OF THE	53-0234290	501 (C) (3)	129,560		DESIGN

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

420

VIENNA, VA 22182

GNATED AND /OR IGRANTED IN SUPPORT 1577 SPRING HILL ROAD STE OF AGENCY PROGRAMS

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

44-0552047 501 (C) (3) 12.900 UNITED WAY OF THE OZARKS DESIGNATED AND /OR 320 N JEFFERSON IGRANTED IN SUPPORT SPRINGFIELD, MI 65806

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

800 E KING STREET

YORK, PA 17403

TOF AGENCY PROGRAMS UNITED WAY OF YORK 23-1352588 501 (C) (3) 7.120

DESIGNATED AND /OR COUNTY IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

(b) EIN (c) IRC section (d) Amount of cash (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance LINITED WAY WORLDWIDE 12-1625204 501 (C) (3) E40 401 DESIGNATED AND /OR

(f) Method of valuation

DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

ONTIED WAT WORLDWIDE	13-1033234	301 (0) (3)	349,401		DESIGNATED AND JOK
(UWAMERICA)					GRANTED IN SUPPORT
701 NORTH FAIRFAX STREET					OF AGENCY PROGRAMS
ALEXANDRIA, VA 22314					

154,721

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

501 (C) (3)

(a) Name and address of

UNITED WORKERS

ASSOCIATION INC.

BALTIMORE, MD 21218

2640 ST PAUL ST

20-4345458

if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 31-1678679 501 (C) (3) 16.506 DESIGNATED AND /OR UNIVERSITY OF MARYLAND GRANTED IN SUPPORT BALTIMORE FOUNDATION

(f) Method of valuation

(g) Description of

(h) Purpose of grant

OF AGENCY PROGRAMS

(d) Amount of cash

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

(c) IRC section

(UMB) 620 W LEXINGTON STREET 2ND FL BALTIMORE, MD 21201					OF AGENCY PROGRAMS
UNIVERSITY OF MARYLAND SCHOOL OF SOCIAL WORK	21-2011777	501 (C) (3)	75,000		DESIGNATED AND /OR GRANTED IN SUPPORT

SCHOOL OF SOCIAL WORK 620 WEST LEXINGTON ST 4TH

BALTIMORE, MD 21201

FLOOR

(a) Name and address of

(b) EIN

organization or government if applicable grant cash assistance or assist

(f) Method of valuation

(g) Description of

(h) Purpose of grant

DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

UNIVERSITY STSTEM OF	22-1123003	301 (C) (3)	03,/30		DESIGNATED AND JOK
MARYLAND FOUNDATION					GRANTED IN SUPPORT
3300 METZEROTT RD					OF AGENCY PROGRAMS
ADELPHI, MD 20783					1

10.000

(d) Amount of cash

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

501 (C) (3)

(c) IRC section

(a) Name and address of

582 MARKET STREET STE 1207

SAN FRANCISCO, CA 94104

UPWARDLY GLOBAL

(b) EIN

94-3346127

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

DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

VILLAGE LEARNING PLACE 2521 ST PAUL STREET	52-2109848	501 (C) (3)	27,211		DESIGNATED AND /OR GRANTED IN SUPPORT
ZJZI SI FAOL SINLLI					GIVANTED IN SOFFORT
BALTIMORE, MD 21218					OF AGENCY PROGRAMS

17.212

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

501 (C) (3)

VOLUNTEER CENTRAL INC.

1201 S SHARP ST STE 302

BALTIMORE, MD 21230

52-1810831

(c) IRC section (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

(f) Method of valuation

(a) Description of

52-1194738 501 (C) (3) 45.910 WALTERS ART GALLERY DESIGNATED AND /OR 600 NORTH CHARLES ST IGRANTED IN SUPPORT BALTIMORE, MD 21201

(d) Amount of cash

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

(a) Name and address of

BOYDS, MD 20841

(b) EIN

OF AGENCY PROGRAMS WARRIOR CANINE 45-2981579 501 (C) (3) 7.500 DESIGNATED AND /OR

CONNECTION INC. IGRANTED IN SUPPORT 14934 SCHAEFFER RD OF AGENCY PROGRAMS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 20-2370934 501 (C) (3) 28.518 WOUNDED WARRIOR PROJECT DESIGNATED AND /OR

OF AGENCY PROGRAMS

4899 BELFORT ROAD- SUITE IGRANTED IN SUPPORT OF AGENCY PROGRAMS 300

JACKSONVILLE, FL 32256 31-1770828 501 (C) (3) 18.702 WYPR - YOUR PUBLIC RADIO

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

2216 N CHARLES ST

BALTIMORE, MD 21218

DESIGNATED AND /OR CORP IGRANTED IN SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 52-0591699 501 (C) (3) 219.281 Y OF CENTRAL MARYLAND DESIGNATED AND /OR

303 W CHESAPEAKE AVE IGRANTED IN SUPPORT TOWSON, MD 21204

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

YORK, PA 17404

OF AGENCY PROGRAMS YORK COUNTY FOOD BANK 23-2452484 501 (C) (3) 8.905 INC

DESIGNATED AND /OR

IGRANTED IN SUPPORT 254 W PRINCESS STREET OF AGENCY PROGRAMS

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

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

501 (C) (3)

52-0897806

YOUNG AUDIENCES OF	52-0698849	501 (C) (3)	19,203		DESIGNATED AND /OR
MARYLAND INC					GRANTED IN SUPPORT
2600 N HOWARD STREET					OF AGENCY PROGRAMS
SUITE 1300					
BALTIMORE, MD 21218					

DESIGNATED AND /OR

IGRANTED IN SUPPORT

OF AGENCY PROGRAMS

13,969

YOUTH EMPOWERED SOCIETY-

(YES) DROP IN CENTER

BALTIMORE, MD 21218

3503 NCHARLES ST

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 52-0591702 24.175 YWCA OF ANNAPOLIS & ANNE 501 (C) (3) DESIGNATED AND /OR ARUNDEL COUNTY IGRANTED IN SUPPORT

OF AGENCY PROGRAMS 1517 RITCHIE HIGHWAY STE 201 ARNOLD, MD 21012 5,000 ZOROASTRIAN ASSOCIATION 52-1316900 501 (C) (3) DESIGNATED AND /OR

OF METROPOLITAN GRANTED IN SUPPORT WASHINGTON INC OF AGENCY PROGRAMS

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

7104 COPPERWOOD COURT ROCKVILLE, MD 20855

efil	e GRAPHIC pr	int - DO NOT PROCESS A	s Filed Data	a -	DLN: 934	19308	37005	010
Sch	edule J	Con	npensati	ion Information	OM	1B No	1545-0	0047
(For	n 990)	For certain Officers,	Directors, T	rustees, Key Employees, and Higl	hest			
		➤ Complete if the organ	Compensa ization answ	ated Employees vered "Yes" on Form 990, Part IV,	line 23.	20	18	}
_			▶ Attach	to Form 990.			to Pul	
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/i</u>	- <u>07111990</u> 101	instructions and the latest inforn	nation.		ectio	
	ne of the organiza	ation NTRAL MARYLAND INC			Employer identificat	ion nu	ımber	
INC	UNITED WAT OF CE	NIKAL MAKILAND INC			52-0591543			
Pa	rt I Questi	ons Regarding Compensatio	n					
							Yes	No
1a				the following to or for a person listed y relevant information regarding thes				
		or charter travel		Housing allowance or residence for p				
	_	companions	片	Payments for business use of persor				
		nification and gross-up payments	H	Health or social club dues or initiation				
	□ Discretion	ary spending account	ш	Personal services (e g , maid, chauf	reur, cner)			
b		kes in line 1a are checked, did the c ill of the expenses described above		ollow a written policy regarding paym iplete Part III to explain	ent or reimbursement	1b		
2				or allowing expenses incurred by all r, regarding the items checked in line	1-2	2		
	directors, truste	es, officers, including the CEO/Exec	tutive Director	r, regarding the items checked in line	lar			
3				ed to establish the compensation of th	ie			
	_	EO/Executive Director Check all th d organization to establish compen		not check any boxes for methods CEO/Executive Director, but explain ii	n Part III			
	✓ Compensa			Weeklan and lave and and and				
		ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study				
		of other organizations	<u> </u>	Approval by the board or compensation	tion committee			
4		-	, Part VII, Se	ction A, line 1a, with respect to the fi				
	related organiza	tion						
а	Receive a sever	ance payment or change-of-control	payment?			4a		No
b	•	r receive payment from, a supplem	•	•		4b		No
С		r receive payment from, an equity-		nsation arrangement? Dicable amounts for each item in Part	TTT	4c		No
	ir les to ally c	illies 4a-c, list the persons and pr	ovide tile app	meable amounts for each item in Fart	111			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) or	ganizations	must complete lines 5-9.				
5		ed on Form 990, Part VII, Section A ontingent on the revenues of	, line 1a, did t	the organization pay or accrue any				
а	The organization	17				5a		No
b	Any related orga					5b		No
	•	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section A ontingent on the net earnings of	, line 1a, did i	the organization pay or accrue any				
а	The organization	1 [?]				6a		No
b	Any related orga					6b		No
_	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Section A escribed in lines 5 and 6? If "Yes," o		the organization provide any nonfixed rt III	I	7		No
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," de	escribe	8		No
9	If "Yes" on line 8 53 4958-6(c)?	3, did the organization also follow t	he rebuttable	presumption procedure described in	Regulations section	9		140
For I	Danarwark Badu	ction Act Notice, see the Instru	ctions for Ec	orm 990 Cat No. 5	0053T Schedule 1	/Eorn	- 000)	2018

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

instructions, on row (ii)	Do no	ot list any individuals that	ted on Schedule J, report are not listed on Form 9 dividual must equal the to	90, Part VII		nd from related organizati 1a, applicable column (D)		t ındıvıdual	
(A) Name and Title			of W-2 and/or 1099-MIS (ii) Bonus & incentive		(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(I)-(D)	(F) Compensation in column (B) reported	
		compensation	compensation	reportable compensation	compensation	Delivering.		as deferred on prior Form 990	
1 G MARK CHANEY TREASURER	(i)	0	0	0	0	0		0	
THE ISONE II	(ii)	0	0	0	0	0		0	
2 RENEE M CHRISTOFF SECRETARY	(i)	0	0	0	0	0		0	
	(ii)	0	0	0	0	0		0	
3 FRANKLYN BAKER PRESIDENT & CEO	(i)	230,886	22,287	538	0	0	253,711	0	
	(ii)	0	0	0	0	0	0	0	
4 SANDRA MONCK SVP & CHIEF IMPACT	(i)	129,263	12,612	452	0	0	142,327	0	
OFFICER	(ii)	0	0	0	0	0	0	0	
5 MARIE ELISE LEE SVP & CHIEF INNOVATION	(i)	127,539	12,562	151	0	0	140,252	0	
OFFICER	(ii)	0	0	0	0	0	0	0	
6 MARTINA A MARTIN SVP & CHIEF OPERATING	(i)	140,322	12,721	705	0	0	153,748	0	
OFFICER	(ii)	0	0	0	0	0	0	0	
7 HOLLY HOEY SVP & CHIEF PRINCIPAL	(i)	127,986	12,583	151	0	0	140,720	0	
GIFTS OFFICER	(ii)	0	0	0	0	0	0	0	
8 KAREN PATE VP & CHIEF INFORMATION	(i)	137,662	12,950	2,254	0	0	152,866	0	
OFFICER	(ii)	0	0	0	0	0	0	0	
								1/5000\ 2010	

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Return Reference

Explanation

FORM 990, SCHEDULE J

PART I, LINE 3 SCHEDULE J, PART I, LINE 3 UNITED WAY OF CENTRAL MARYLAND(UWCM) HAS ESTABLISHED SPECIFIC GUIDELINES FOR THE DETERMINATION OF COMPENSATION PAYABLE TO EXECUTIVES, INCLUDING THE PRESIDENT AND CHIEF EXECUTIVE OFFICER(CEO) THESE GUIDELINES ARE DESIGNED TO

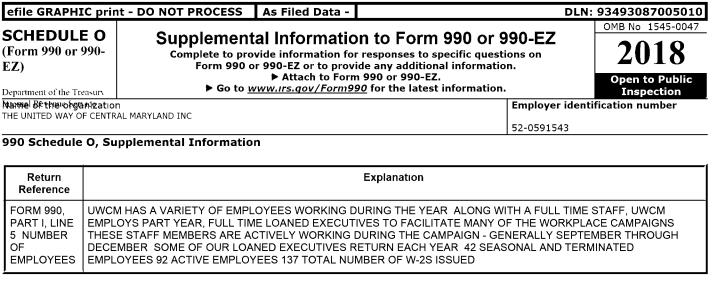
Page 3

IENSURE THAT THE EXECUTIVE COMPENSATION IS CONSISTENT WITH THE UWCM NON-PROFIT STATUS AND LONG-TERM MISSION AND GOALS. THE EXECUTIVE COMMITTEE. THE COMMITTEE UWCM HOLDS RESPONSIBLE FOR THESE GUIDELINES AND ACTS AS THE COMPENSATION COMMITTEE FOR THOSE PURPOSES. AIMS TO FULLY DISCLOSE EXECUTIVE COMPENSATION IN AN OPEN AND TRANSPARENT MANNER, CONSISTENT WITH GOVERNANCE BEST PRACTICES AND APPLICABLE REGULATORY REQUIREMENTS PROCEDURE FOR REVIEWING EXECUTIVE COMPENSATION THE EXECUTIVE COMMITTEE OF UWCM IS RESPONSIBLE FOR ESTABLISHING AND REVIEWING EXECUTIVE COMPENSATION IN ACCORDANCE WITH UWCM COMPENSATION AND ANNUAL REVIEW POLICIES AND PROCEDURES UWCM'S COMPENSATION POLICY IS TO PROVIDE TOTAL COMPENSATION (SALARY AND BENEFITS) TO EXECUTIVES IN A MANNER THAT FURTHERS THE LONG-RANGE STRATEGIC OBJECTIVES OF UWCM AND ENABLES UWCM TO ATTRACT AND RETAIN QUALIFIED EXECUTIVES IN SETTING EXECUTIVE COMPENSATION, THE EXECUTIVE COMMITTEE CONSIDERS THE MISSION AND OBJECTIVE OF UWCM, THE PERFORMANCE OF UWCM AGAINST ITS ANNUAL AND LONG-TERM GOALS, INDIVIDUAL PERFORMANCE, AND THE COMPARABILITY OF UWCM'S EXECUTIVE COMPENSATION TO OTHER UNITED WAYS AND SIMILAR NON-PROFIT ORGANIZATIONS (NPO) MARKETPLACE COMPARISONS OF EXECUTIVE COMPENSATION ARE PERFORMED PERIODICALLY UTILIZING THE ASSISTANCE OF AN INDEPENDENT THIRD PARTY EXECUTIVE COMPENSATION PROFESSIONAL THE ORGANIZATIONAL PERFORMANCE OF UWCM AND THE PRESIDENT/CEO IS REVIEWED ON AN ANNUAL BASIS. THE EXECUTIVE COMMITTEE EVALUATES THE PERFORMANCE OF THE PRESIDENT/CEO, MAKES APPROPRIATE CHANGES IN EXECUTIVE COMPENSATION OR BENEFITS, AND ADVISES THE BOARD OF DIRECTORS OF ANY ADJUSTMENTS THAT IT MAKES IN EXECUTIVE COMPENSATION AND BENEFITS OR ANY CHANGES TO EXISTING PLANS OR PROGRAMS. EXECUTIVE COMPENSATION PHILOSOPHY, UWCM IS DEDICATED TO MAKING A MEASURABLE IMPACT IN CENTRAL MARYLAND. THE MISSION OF UWCM IS TO UNITE AND ENGAGE OUR COMMUNITIES TO IMPROVE PEOPLE'S LIVES. THE PHILOSOPHY OF THE EXECUTIVE COMMITTEE IS TO SET EXECUTIVE COMPENSATION THAT IS COMPETITIVE WITH COMPARABLE SIMILAR UNITED WAYS AND NPOS BASED ON |PUBLISHED COMPENSATION SURVEYS A COMPENSATION REVIEW UNDERTAKEN BY THE COMMITTEE'S INDEPENDENT COMPENSATION CONSULTANT AND THE EXECUTIVE COMMITTEE'S OWN ANALYSIS (BASED ON COMPENSATION CONSULTANTREPORT) LED TO A DETERMINATION BY THE EXECUTIVE COMMITTEE THAT ITHE COMPENSATION PAID TO EXECUTIVES WAS REASONABLE UNDER THE STANDARDS PRESCRIBED BY SECTION 4958 OF THE INTERNAL REVENUE CODE. THE EXECUTIVE COMPENSATION PROGRAM CONSISTS OF FOUR KEY ELEMENTS 1 ANNUAL COMPENSATION WHICH INCLUDES BASE SALARY AND AN EXECUTIVE BENEFIT (UP TO 12% OF BASE COMPENSATION FOR THE PRESIDENT/CEO AND OTHER ELIGIBLE EXECUTIVES) 2 HEALTH AND WELFARE BENEFITS 3 RETIREMENT BENEFITS 4 OTHER BENEFITS AND ALLOWANCE

Schedule J (Form 990) 2018

efil	e GRAPHIC pr	int - DO NOT PR	OCESS	As Filed Data -		DLN: 9	349308	7005	010
	EDULE M			loncash Contri	hutions	(OMB No 1	.545-0	047
(For	m 990)		1	Concasii Contin	Dutions		20	10	
		▶Complete if the	organizati	ons answered "Yes" on Fe	orm 990, Part IV, lines 2	9 or 30.	20	10	
		► Attach to Form	990.						
•	ment of the Treasury	▶Go to <u>www.irs.q</u>	ov/Form9	90 for the latest informat	ion.		Open to		
	al Revenue Service	ion.				Employer identif	Inspe		
	e of the organizat NITED WAY OF CEN	TRAL MARYLAND INC				Employer Identif	ication n	umbe	Г
						52-0591543			
Pa	rt I Types	of Property							
			(a) Check if	(b) Number of contributions or	(c) Noncash contribution	Mathada	(d) if determi	nına	
			applicable		amounts reported on	noncash cont			ts
					Form 990, Part VIII, line				
1	Art—Works of art	t			1g				
	Art—Historical tre								
3	Art—Fractional in	nterests							
4	Books and public	ations							
5	Clothing and hou	isehold							
_	_								
6 7	Cars and other v					-			
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	Securities—Public	•	X	105	988 674	I I MEAN VALUE DAT	F GIFT		
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18	Collectibles .								
19	Food inventory								
20	Drugs and medic	al supplies .							
21	Taxidermy .								
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	Archeological art								
	Other ► (1			
26 27	Other ► (+			
	Other • (•							
	•		he organiza	ition during the tax year for	contributions				
		,	_	B, Part IV, Donee Acknowled		29			
								Yes	No
30a				y contribution any property r					
				e of the initial contribution, a		be used for exemp	ot		ļ
							30a		No
b	If "Yes," describ	e the arrangement i	n Part II						Į
31	Does the organi	zation have a gift ac	ceptance p	olicy that requires the reviev	v of any nonstandard contri	butions?	31	Yes	$oxed{oxed}$
32a				or related organizations to se	olicit, process, or sell nonca	sh			
							32a		No
	If "Yes," describ								
33	-		amount in	column (c) for a type of pro	perty for which column (a)	ıs checked,			
	describe in Part								<u> </u>
For D	anerwork Deductiv	on Act Notice, see the	Instruction	is for Form 990	Cat No 512271	Schedul	e M (Form	(000	(2018)

Schedule M (Form 990) (2018)	Page 2					
	non required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part lumber of contributions, the number of items received, or a combination of both. Also complete					
Return Reference	Explanation					
PART I, LINE 32B	DONORS OF STOCK GIFTS ARE TRACKED IN THE SAME MANNER AS CONTRIBUTORS OF CASH GIFTS					
	OTHER IN KIND UWCM OCCUPIES A REGIONAL OFFICE IN CARROLL COUNTY FOR WHICH ONLY THE UTILITY COSTS ARE INCURRED THE OFFICE IS LOCATED IN A NON-PROFIT SERVICE CENTER FOR WHICH NO ADDITIONAL RENT IS CHARGED, AND WHERE ALL TENANTS RECEIVE THE SAME BENEFIT THE ESTIMATED FAIR MARKET VALUE OF OFFICE SPACE IS \$4,187 FOR 332 SQ FT THIS AMOUNT IS NOT REPORTED IN PART VIII, LINE 1G					
	Schedule M (Form 990) (2018)					



Return Reference	Explanation
FORM 990, PART III, LINE 4A	THE RACIAL DISTRIBUTION WAS APPROXIMATELY 51% AFRICAN AMERICAN, 35% WHITE, 6% MIXED RACE, 2% ASIAN, <1% AMERICAN INDIAN, <1% NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER, AND 5% OTHER A PPROXIMATELY 15% OF THE POPULATION IDENTIFIED AS HISPANIC/LATINO SERVICES PROVIDED UNITE D WAY USES A NATIONALLY RECOGNIZED MODEL TO PREVENT FAMILY HOMELESSNESS IN TARGETED NEIGHB ORHOODS AND TO RAPIDLY REHOUSE OTHERS WHO HAVE ALREADY BECOME HOMELESS CASE MANAGERS WORK WITH FAMILIES TO BUILD FINANCIAL SECURITY AND SELF-SUFFICIENCY, AND REDUCE STUDENT MOBIL TY FOR THE FAMILIES' SCHOOL-AGE CHILDREN UNITED WAY HOUSING PROGRAMS SPAN 15 LOCATIONS AC ROSS ALL SIX CENTRAL MARYLAND JURISDICTIONS FOR THE MAJORITY OF THESE SITES, UNITED WAY P ROVIDES PROGRAMMATIC GRANTS TO COMMUNITY-BASED NON-PROFIT PARTNERS TO DIRECTLY IMPLEMENT THE PROGRAMS UNITED WAY PROVIDES ONGOING PROFESSIONAL DEVELOPMENT AND MONITORS PROGRAMS SUC CESS THROUGH REPORTING, SITE VISITS AND DATA ANALYSIS SINCE MAY 2012 THROUGH JUNE 2019, O F THE 2,176 FAMILIES THAT HAVE ENROLLED IN OUR HOUSING PROGRAMS, 2,141 FAMILIES (98 4%) HA VE AVOIDED EVICTION OR THE SHELTER SYSTEM, OF 2,950 SCHOOL-AGE CHILDREN, 2,933 (99 4%) HAV E AVOIDED E VICTION OR THE SHELTER SYSTEM, OF 2,950 SCHOOL-AGE CHILDREN, 2,933 (99 4%) HAV E AVOIDED A DISRUPTIVE SCHOOL MOVE IN FY19, THROUGH THE GREEN AND HEALTHY HOMES INITIATIVE, 4,40 OF THE FAMILIES ENROLLED IN OUR HOUSING PROGRAMS RECIVED EDUCATION AND ASSISTANCE ON HOME HEALTH SAFETY, SUCH AS PROPER CLEANING AND SUPPLIES, ASTHMA RISKS IN THE HOME ENVIR ONMENT, AND TENANT RIGHTS TO ENSURE HEALTHY LIVING CONDITIONS UNITED WAY FAMILY CENTER IN A BENJAMIN FRANKLIN HIGH SCHOOL IS A SCHOOL-BASED FAMILY CENTER IN ONE COMMUNITY THAT PROVI DES SERVICES TO TEEN PARENTS TO KEEP THEM ON TRACK FOR HIGH SCHOOL GRADUATION WHILE EQUIPP ING THEM WITH CRITICAL PARENTING SKILLS AND PROVIDING THEIR CHILDREN WITH EARLY CHILDHOOD EDUCATION SINCE 2014 THROUGH JUNE 1019, THE UNITED WAY FAMILY CENTER HAS BEEN INSTRUMENTAL IN HELPING 37 STUDENT-PARENTS GRADUATE FROM HIGH SCHOOL EM

Return	Explanation
Reference	
FORM 990, PART III, LINE 4A	BILE FARMERS MARKET STOPS PROVIDED FARM FRESH PRODUCE TO 209 FAMILIES LIVING IN FOOD DESER TS 100 OLDER ADULTS AT RISK FOR HOSPITALIZATION RECEIVED ASSISTANCE WITH GETTING GROCERIE S, PICKING UP PRESCRIPTIONS, AND SOCIAL SUPPORT 474 FAMILIES ATTENDED UNITED WAY FAMILY S TABILITY COOKING CLASSES WHERE WE SERVED A TOTAL OF 808 MEALS COOKING DEMONSTRATIONS WERE HELD AT 10 FARMERS MARKET 1,142 PEOPLE WERE PROVIDED INFORMATION ABOUT HEALTHY EATING AN D 874 SAMPLES OF HEALTHY FOOD WERE SHARED WITH PARTICIPANTS 18,516 NUTRITIOUS MEALS WERE SERVED AT LOCAL EMPLOYMENT CENTERS AND DAY SHELTERS UNITED WAY'S THANKSGIVING ASSISTANCE I NITIATIVE DISTRIBUTED 1,664 TURKEYS AND SIDE ITEMS TO LOW-INCOME CENTRAL MARYLAND HOUSEHOLDS AT THANKSGIVING EMERGENCY AND DISASTER SERVICES PROVIDES UPPORTIVE SERVICES TO INDIVID UALS AND FAMILIES IN IMMEDIATE CRISIS, OFTEN AS A RESULT OF A NATURAL DISASTER OVER THE C OURSE OF FY19, THROUGH UNITED WAY GRANTS TO PARTINERS 1,001 DISASTER CLIENTS WERE PROVIDED WITH EMERGENCY FINANCIAL ASSISTANCE TO MEET BASIC NEEDS SUCH AS FOOD, CLOTHING, SHELTER, COMMUNITY REFERRALS AND MENTAL HEALTH SUPPORTS 212 CLIENTS FACING ECONOMIC CRISIS, HUNGER OR FOOD INSECURITY RECEIVED EMERGENCY FINANCIAL AND FOOD ASSISTANCE OVER 100 INDIVIDUALS WHO WERE AFFECTED BY THE DEVASTATING ELLICOTT CITY FLOODING IN 2018 RECEIVED SUPPORT SUCH AS MEALS, BASIC NEEDS SUPPLIES, TEMPORARY SHELTERING, PROPERTY DAMAGE ASSESSMENT AND COUNSELING ON FEBRUARY 28 AND MARCH 1, 2019, UNITED WAY HELD ITS 3RD BALTIMORE MISSION OF ME RCY DENTAL CLINIC OFFERING PREVENT ATIVE (CLEANINGS, HYGIENE) AND URGENT CARE (FILLINGS, EXTRACTIONS) SERVICES TO PEOPLE WHO LACK ACCESS TO BASIC DENTAL CLINIC THE BALTIMORE MISSION OF MERCY IS A FREE DENTAL CLINIC OFFERING PREVENT ATIVE (CLEANINGS, HYGIENE) AND URGENT CARE (FILLINGS, EXTRACTIONS) SERVICES TO PEOPLE WHO LACK ACCESS TO BASIC DENTAL CARE HIGHLIGHTS FROM THE 2019 EVENT INCLUDE \$612,340 IN DENT AL SERVICES PROVIDED A 61 RATIO OF RETURN ON INVESTMENT 899 PATIENT IN JANU ARY OF 2016 THE 4TH ANNUAL PHOL

Return Reference	Explanation
FORM 990, PART III, LINE 4A	A COURT SUPERVISED, COMPREHENSIVE AND VOLUNTARY TREATMENT-BASED PROGRAM FOR JUSTICE-INVOLV ED VETERANS CHARGED WITH MISDEMEANORS IN THE DISTRICT COURT VETERANS CHARGED WITH THESE O FFENSES WHO HAVE HAD PRIOR MILITARY SERVICE, WHETHER ELIGIBLE FOR VA BENEFITS OR NOT, ARE ELIGIBLE FOR THE VTC IN RECOGNITION OF THE TOLL ON VETERANS THAT ACCOMPANIES MILITARY SER VICE, THE MISSION OF THE VTC IS TO SERVE THE COMMUNITY AND INCREASE PUBLIC SAFETY BY INTEG RATING AND INCORPORATING A COORDINATED TREATMENT RESPONSE FOR JUSTICE-INVOLVED VETERANS WITH SUBSTANCE USE AND/OR MENTAL HEALTH ISSUES WITH THE GOAL OF RETURNING PRODUCTIVE, LAW-AB IDING CITIZENS TO THE COMMUNITY AND THEREBY REDUCING RECIDIVISM AND CRIMINAL JUSTICE COSTS THE TRANSITION FROM ACTIVE DUTY TO CIVILIAN LIFE CAN BE OVERWHELMINGLY DIFFICULT FOR VET ERANS TO NAVIGATE THE MOST COMMON STRUGGLES THEY FACE RELATE TO EMPLOYMENT, FINANCES, LEG AL MATTERS, SUBSTANCE ABUSE, MENTAL HEALTH, RELATIONSHIPS AND HOMELESSNESS VTC BRINGS TOG ETHER AN ARRAY OF SERVICE PROVIDERS THAT CONNECT VETERANS TO THE PROGRAMS, BENEFITS AND SE RVICES THEY HAVE EARNED THE VETERAN IS ALSO MATCHED WITH A VETERAN MENTOR WHO WILL SUPPOR T THE VETERAN AS HE/SHE PROGRESSES IN THE PROGRAM THE VTC ALLOWS VETERANS TO MOVE TOWARD SELF-SUFFICIENCY BY REMOVING NUMBEROUS BARRIERS, INCLUDING MINOR LEGAL ISSUES A TOTAL OF 9 0 VETERANS WERE SERVED THROUGH THE TWO VTCS IN FY19 THE DOCKET FOR HOMELESS PRESONS (DHP) IS A SPECIALIZED COURT DOCKET WITHIN BALTIMORE CITY'S DISTRICT COURT FOR INDIVIDUALS EXPE RIENCING HOMELESSNESS WHO HAVE BEEN ACCUSED OF NONVIOLENT MISDEMEANORS (NO CIVILIAN VICTIM'S) OR WHO CURRENTLY HAVE OUTSTANDING WARRANTS FOR MISDEMEANORS AND TRAFFIC OFFENSES ANY P ERSON EXPERIENCING HOMELESSNESS ON THE STREET, IN A SHELTER OR RESIDING IN A MULTIPLE FAMI LY/PERSON LYPERIENCING HOMELESSNESS ON THE STREET, IN A SHELTER OR RESIDING IN A MULTIPLE FAMI LY/PERSON LYPERIENCING HOMELESSNESS ON THE STREET, IN A SHELTER OR RESIDING HOMELESSNESS TO HELP THEM RECEIVE SUPPORTIVE SERVICES AS AN ALTERNATI

Return Reference	Explanation
FORM 990, PART III, LINE 4A	UNITED WAY OF CENTRAL MARYLAND (UWCM) LAUNCHED ITS EDUCATION PROGRAM, ON TRACK 4 SUCCESSTM (OT4S), IN SEPTEMBER 2016 OT4S IS AN INNOVATIVE DATA-DRIVEN APPROACH THAT IS WORKING TO ENSURE UNDERSERVED STUDENTS HAVE THE RESOURCES THEY NEED TO GET AND STAY ON-TRACK FOR HIGH SCHOOL GRADUATION SUPPORTED BY JOHNS HOPKINS UNIVERSITY'S SCHOOL OF EDUCATION (JHU) AND BASED ON THEIR EARLY WARNING HIGH SCHOOL DROPOUT PREVENTION MODEL, OT4S UTILIZES STUDENT DATA TO EXAMINE PROVEN PREDICTORS OF DROPPING OUT POOR ATTENDANCE, BEHAVIOR AND COURSE PERFORMANCE (ABC'S) WHEN A STUDENT FALLS BEHIND IN ANY OF THESE AREAS, A CROSS-DISCIPLINARY TEAM OF SCHOOL STAFF, INCLUDING A UNITED WAY SOCIAL WORKER AND SITE MANAGER, MEET TO DISCUSS THE STUDENT'S UNIQUE SITUATION AND DETERMINE APPROPRIATE INTERVENTIONS IN FY 2019 UWCM PARTNERED WITH TWO SCHOOL DISTRICTS IN CENTRAL MARYLAND AND IMPLEMENTED THE PROGRAM IN FOUR SCHOOLS BALTIMORE CITY PUBLIC SCHOOLS (MAREE G FARRING ELEMENTARY/MIDDLE SCHOOL, GRADES 4-8 AND BEN FRANKLIN HIGH SCHOOL, GRADE 9) AND ANNE ARUNDEL COUNTY PUBLIC SCHOOLS (MEADE MIDDLE SCHOOL, GRADES 6-8 AND MEADE HIGH SCHOOL, GRADE 9) HIGHLIGHTED RESULTS FOLLOW - OVER 1500 STUDENTS WERE SERVED BY THE OT4S PROGRAM DURING THE 2018-19 SCHOOL YEAR AT THE FOUR SCHOOLS - SERVICE INCLUDED CLASS-WIDE PREVENTION STRATEGIES TO KEEP STUDENTS ON TRACK FOR GRADUATION, AS WELL AS HUNDREDS AND HUNDREDS OF INTERVENTIONS FOR THOSE WHO FELL OFF TRACK - DURING THE 2018-19 SCHOOL YEAR, ACROSS OUR BALTIMORE CITY SCHOOLS (MAREE G FARRING AND BENJAMIN FRANKLIN HIGH SCHOOL COMBINED), 62% OF ALL STUDENTS ENDED THE YEAR BETTER THAN HOW THEY DID DURING THE SCHOOL YEAR - AS PART OF THE SCHOOLWIDE EFFORT TO IMPROVE BEHAVIOR, MEADE MIDDLE SCHOOL REDUCED DISCIPLINE REFERRALS 28% FROM SY 17-18 TO SY 18-19 THE 7TH GRADE CLASS OF 17-18 HAD THE LARGEST REDUCTION IN NUMBER OF REFERRALS (DESPITE HAVING MORE STUDENTS) THE 8TH GRADE STUDENTS OF 18-19 (7TH GRADERS IN 17-18) REDUCED REFERRALS BY 63% - AT MEADE HIGH SCHOOL, 76% OF STUDENTS WHO RECEIVED DIRECT INTERVENTION

FORM IS FILED WITH THE INTERNAL REVENUE SERVICE

Return

Reference	·
FORM 990,	FORM 990 IS PREPARED BY UWCM, REVIEWED BY INDEPENDENT AUDITORS AND PRESENTED TO THE FINANCE
PART VI,	COMMITTEE FOR REVIEW AFTER REVIEW AND ACCEPTANCE, THE DOCUMENT IS ELECTRONICALLY MAILED TO
SECTION B,	BOARD MEMBERS FOR THEIR REVIEW THE FORM 990 IS DISCUSSED AT A BOARD MEETING AND IS PRESENTED BY
LINE 11B	THE TREASURER THE TREASURER CALLS FOR A MOTION TO ACCEPT THE FORM 990 DOCUMENT AND THEN THE \parallel

Explanation

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	CONFLICT OF INTEREST POLICY FOR UWCM EACH YEAR ALL STAFF AND VOLUNTEERS ARE REQUIRED TO R E-VERIFY THE CODE OF ETHICS WHICH INCLUDES THE CONFLICT OF INTEREST POLICY AND THE WHISTLE BLOWER POLICY CONFLICT OF INTEREST FOR STAFF UNITED WAY OF CENTRAL MARYLAND IS A NON-PRO FIT CHARITABLE CORPORATION ITS PRINCIPAL PURPOSES AND ACTIVITIES ARE INFORMATION AND REFE RRAL SERVICES AND FUND-RAISING AND APPORTIONMENT OF FUNDS FOR THE BENEFIT OF OTHER NON-PRO FIT CHARITABLE CORPORATIONS IN CENTRAL MARYLAND AND THE PERSONS WHOM THOSE ORGANIZATIONS S ERVE ULTIMATE AUTHORITY AND RESPONSIBILITY FOR MANAGING UNITED WAY OF CENTRAL MARYLAND'S AFFAIRS RESIDES WITH ITS BOARD OF DIRECTORS THE BOARD OF DIRECTORS AND THE COMMITTEES THE Y FORM CONSIST OF VOLUNTEERS WITH THE GOAL OF AVOIDING ANY APPEARANCE OF EVEN THEORETICAL CONFLICTS OF INTEREST AND TO SET AN EXAMPLE FOR AGENCY MEMBER ORGANIZATIONS THAT MAY LOOK TO UNITED WAY OF CENTRAL MARYLAND FOR GUIDANCE WITH RESPECT TO THE CONDUCT OF THEIR OWN A FFAIRS, UNITED WAY OF CENTRAL MARYLAND HAS ESTABLISHED THE FOLLOWING GUIDELINES FOR YOU TO FOLLOW IN CONDUCTING YOURSELF IN BUSINESS IN WHICH YOU MAY HAVE OR MAY DEVELOP A CONFLICT OF INTEREST I A CONFLICT OF INTEREST OCCURS WHENEVER YOU PERMIT THE PROSPECT OF DIRECT OR INDIRECT PERSONAL GAIN TO IMPROPERLY INFLUENCE YOUR JUDGMENT OR ACTIONS IN THE CONDUCT OF UNITED WAY OF CENTRAL MARYLAND BUSINESS EXAMPLES OF POTENTIAL CONFLICTS OF INTEREST ARE A A ACQUISITION OR SALE OF ANY PROPERTY OR SERVICES BY UNITED WAY OF CENTRAL MARYLAND WHE ERE THERE IS COMPENSATION OR OTHER DIRECT OR INDIRECT FINANCIAL BENEFIT TO YOU OR A MEMBER OF YOUR FAMILY B PLACEMENT OF UNITED WAY OF CENTRAL MARYLAND BUSINESS OF ANY KIND WITH A COMPANY OWNED OR CONTROLLED BY YOU OR YOUR FAMILY II A CONFLICT OF INTEREST ARISES WHE N, FOR PERSONAL OR FAMILY BAILY GAIN, YOU IMPROPERLY USE CONFIDENTIAL INFORMATION OF UNITED WAY OF CENTRAL MARYLAND WHY FREE THERE IS COMPENSATION OR OVOUR FAMILY II A CONFLICT OF INTEREST ARISES WHE N, FOR PERSONAL OR FAMILY GAIN, YOU IMPROPERLY US

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ENEFIT OF OTHER NON-PROFIT CHARITABLE ORGANIZATIONS IN CENTRAL MARYLAND AND THE PERSONS WHOM SUCH ORGANIZATIONS SERVE ULTIMATE AUTHORITY AND RESPONSIBILITY FOR MANAGING THE UNITED WAY'S AFFAIRS RESIDES WITH ITS BOARD OF DIRECTORS THE MEMBERSHIP OF THE BOARD AND ALL CO MMITTEES OF THE BOARD CONSISTS ENTIRELY OF VOLUNTEERS ("VOLUNTEERS") IN VIEW OF THE PURPO SES OF THE UNITED WAY AND THE NATURE OF ITS ACTIVITIES, VOLUNTEERS MAY FIND THEMSELVES IN SITUATIONS WHERE THEIR OUTSIDE BUSINESS, PERSONAL OR CIVIC ACTIVITIES COME INTO CONFLICT WITH THEIR FIDUCIARY DUTIES TO THE UNITED WAY AND THE UNITED WAY ADOPTS THE FOLLOWING POLICY WITH RESPECT TO PARTICIPATION BY VOLUNTEERS IN MATTERS COMING BEFORE THE BOARD AND ITS COMM ITTEES IN WHICH THEY MAY HAVE A POTENTIAL CONFLICT OF INTEREST 1 NO VOLUNTEER SHALL KNOW INGLY PARTICIPATE IN ANY DECISION OF THE BOARD OF DIRECTORS OR ANY COMMITTEE THEREOF OR OT HERWISE ATTEMPT TO INFLUENCE THE CONDUCT OF THE UNITED WAY WHERE SUCH DECISION OR CONDUCT WOULD DIRECTLY OR INDIRECTLY CONFER ON SUCH VOLUNTEER, OR ANY MEMBER OF SUCH VOLUNTEER'S FAMILY, OR ON ANY FIRM OR ORGANIZATION IN WHICH SUCH VOLUNTEER, OR AN OFFICER OR DIRECTOR OR HAS A MATERIAL FINANCIAL INTEREST, ANY FINANCIAL BENEFIT, BUSINESS ADVANTAGE, PREFERENTIA L TREATMENT OR OTHER ADVANTAGE OR BENEFIT (A "CONFLICT OF INTEREST") FOR THE PURPOSES OF THIS POLICY, THE TERM "CONFLICT OF INTEREST" DOES NOT INCLUDE CONFLICTS OF A PURELY PHILOS OPHICAL OR IDEOLOGICAL NATURE 2 IN THE EVENT THAT THERE IS A MATTER FOR CONSIDERATION OR DECISION THAT RAISES A POTENTIAL CONFLICT OF INTEREST TO THE BOARD OR TO THE COMMITTEER, AND ANATTER THE VOLUNTEER SHALL IMMEDIATELY DISCLOSE THE POTENTIAL CONFLICT OF INTEREST TO THE BOARD OR TO THE COMMITTEE CONSIDERING THE MATTER, AS THE CASE MAY BE, AND SHALL NOT CAST A VOTE ON THE MATTER 3 THIS POLICY SHALL NOT BE CONSTRUED AS PREVENTING OR DISCOURAGING ANY VOLUNTEER FROM PARTI CIPATING IN THE DISCUSSION OF A MATTER WITH RESPECT TO WHICH SUCH VOLUNTEER FRAS A CONFLICT OF INTEREST, PROVIDED SUCH VOLUNTE

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THIS DISCLOSURE PROVIDES INFORMATION ON THE GOVERNANCE AND OVERSIGHT OF THE COMPENSATION FOR UWCM EXECUTIVES (CONSISTING OF THE PRESIDENT/CHIEF EXECUTIVE OFFICER (CEO) AND CHIEF FINANCIAL OFFICER (CFO) 1 EXECUTIVE COMPENSATION AT UWCM IS OVERSEEN BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS IN SETTING EXECUTIVE COMPENSATION, THE EXECUTIVE COMMITTEE EMPLOYS AN INDEPENDENT THIRD PARTY COMPENSATION CONSULTANT AND EVALUATES UWCM EXECUTIVE COMPENSATION AGAINST A GROUP OF SIMILAR NON-PROFIT ORGANIZATIONS, USING DATA FROM COMPARABLE UNITED WAYS AND PUBLISHED COMPENSATION SURVEYS 2 UNDER THE DIRECTION OF THE BOARD CHAIR, THE EXECUTIVE COMMITTEE ESTABLISHES ANNUAL PERFORMANCE OBJECTIVES FOR THE PRESIDENT/CEO 3 THE CEO AND BOARD CHAIR MEET PERIODICALLY DURING THE FISCAL YEAR TO REVIEW THE CEO'S PROGRESS AGAINST MEASURABLE, PRE-ESTABLISHED PERFORMANCE OBJECTIVES THE PERFORMANCE OBJECTIVES ARE ESTABLISHED BY THE EXECUTIVE COMMITTEE AND REVIEWED BY THE BOARD. IN ADVANCE OF EACH FISCAL YEAR 4 THE CEO PRESENTS A PROGRESS REPORT ON THE PRE-ESTABLISHED PERFORMANCE OBJECTIVES TO THE EXECUTIVE COMMITTEE AND BOARD OF DIRECTORS AT REGULARLY SCHEDULED MEETINGS 5 EACH YEAR, THE CEO IS PROVIDED A COMPREHENSIVE, CONFIDENTIAL REVIEW OF HIS/HER PERFORMANCE HE BOARD CHAIR, IN CONSULTATION WITH THE EXECUTIVE COMMITTEE, DETERMINES A PERFORMANCE HAD BOARD CHAIR, IN CONSULTATION WITH THE EXECUTIVE COMMITTEE, DETERMINES A PERFORMANCE RATING FOR THE CEO, USING ESTABLISHED UWCM PERFORMANCE RATING CATEGORIES 6 TO DETERMINE SALARY RANGES, UWCM USES A MARKET PRICING PROCESS THE HUMAN RESOURCES DEPARTMENT (I'R) WORKS WITH AN INDEPENDENT THIRD PARTY COMPENSATION CONSULTANT TO COMPARE EXECUTIVE SALARIES TO SALARIES PAID TO COMPARABLE EXECUTIVES (BASED ON UWCM'S PEER GROUP OF SIMILAR NON-PROFIT ORGANIZATIONS AND PUBLISHED COMPENSATION CONSULTANT TO COMMITTEE. A SEPARATE INDEPENDENT WRITTEN COMPENSATION ARE REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE A SEPARATE INDEPENDENT COMPENSATION ARE REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE A

Return Explanation
Reference

FORM 990, UWCM MAKES THE FORM 990 AVAILABLE FOR PUBLIC INSPECTION ON OUR WEBSITE THE FORM 990 IS ALSO PART VI, AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST SECTION C, LINE 18

990 Schedule O, Supplemental Information

Return Explanation

Reference

FORM 990,	UWCM MAKES THE ANNUAL AUDIT AVAILABLE FOR PUBLIC INSPECTION ON OUR WEBSITE THE CONFLICT OF
PART VI,	INTEREST AND WHISTLEBLOWERS POLICIES ARE INCLUDED AS PART OF THE FORM 990 FILING THESE DOCUMENTS
SECTION C,	ARE AVAILABLE UPON REQUEST FOR THE SAME PERIOD OF TIME AS SET FORTH IN IRC SECTION 6104(D)
LINE 19	

990 Schedule O, Supplemental Information Return Explanation Reference FORM 990. LOSS ON ASSET IMPAIRMENT 15,899 PART XI.

LINE 9

Return Explanation
Reference

UNITED WAY OF CENTRAL MARYLAND'S AUDIT AND FINANCE COMMITTEE IS RESPONSIBLE FOR THE OVERSIGHT OF THE ANNUAL AUDIT AND THE REVIEW PROCESS FOR THE SELECTION OF THE INDEPENDENT PUBLIC ACCOUNTANT
(IPA) THE TREASURER OF THE BOARD HEADS THE AUDIT AND FINANCE COMMITTEE AND REPORTS THE
RECOMMENDATIONS FROM THE AUDIT AND FINANCE COMMITTEE TO THE BOARD OF DIRECTORS DURING THE
REVIEW, PRIOR TO FILING THE ANNUAL AUDIT, THE IPA HAS INDEPENDENT ACCESS TO THE AUDIT AND FINANCE
COMMITTEE WHERE NO UWCM STAFF IS PRESENT