Department of the Treasury Internal Revenue Service

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EXTENDED TO MAY 17, 2021

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

Open to Public Inspection

	<u>A</u> I	For th	e 2019 calendar year, or tax year beginning JU	L 1, 2019 and	ending (<u>JUN 30, 20</u>	20
	В	Check if applicab				D Employer ide	ntification number
		Addre	BALTIMORE FESTIVAL OF TH	HE ARTS, INC.		1	
		Name		52-155	9145		
		Initial	Number and street (or P.O. box if mail is not delive	ered to street address)	Room/suite	E Telephone nui	mber
		Final	, 10 EAST BALTIMORE STREET			410-75	
		termir ated	City or town, state or province, country, and ZIF	P or foreign postal code		G Gross receipts \$	2,643,740.
		Amen	BALTIMORE, MD 21202			H(a) Is this a grou	•
		Application pendi	F Name and address of principal officer DKIAL	N WENTZ	_	for subordin	ates? Yes X No
			SAME AS C ABOVE	<	<u></u>	H(b) Are all subordina	
				(insert no.) 4947(a)(1)	or / 52	┥ :	ch a list (see instructions)
			te: N/A	author Other	1 1. 1/	H(c) Group exem	
		orm of	organization X Corporation Trust Asso	ciation Other >	[L_Year	of formation 190	8 M State of legal domicile: MD
ク	·	1	Briefly describe the organization's mission or most significant	gnificant activities TO PI	ROMOTE	E PUBLIC PA	ARTICIPATION
lo	Activities & Governance	[AND APPRECIATION OF THE ART				
`	rna	2	Check this box If the organization disconting	nued its operations or dispos	sed of more	than 25% of its ne	assets
	ove	3	Number of voting members of the governing body (Pa	art VI, line 1a)	200	MINED IN TOR	$\frac{3}{3}$ $\frac{12}{3}$
	<u>ຫ</u>	4	Number of independent voting members of the govern	ning body (Part VI, line 1b)	REC	EIVED IN COR IRS - OSC - 19	
ľ	es		Total number of individuals employed in calendar year	r 2019 (Part V, line 2a)		IN3 - 0007 10	<u> </u>
	ivit		Total number of volunteers (estimate if necessary)	001		AUG 1 3 2021	6 300
• •	Act		Total unrelated business revenue from Part VIII, colun			AUG I D LOLI	7a 0.
!	_	Ь	Net unrelated business taxable income from Form 99	0-1, line 39		A SPENJ, VITALI	
		8	Contributions and grants (Part VIII, line 1h)	AUG 2 4 2021		OGDIFIN YEFAH 1,987,91	Current Year 8. 2,304,518.
:	Jue	9	Program service revenue (Part VIII, line 2n)	- COEPT	۲	290,39	
	Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, an	ad-Zd) EN ENTITY UP	·		0. 0.
	æ	11	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, ar Other revenue (Part VIII, column (A), lines 5, 6d,	10c, and 11e)		-25,78	5. 93,527.
		12	Total revenue - add lines 8 through 11 (must equal Pa	urt VIII, column (A), line 12)		2,252,52	
		13	Grants and similar amounts paid (Part IX, column (A),	lines 1-3)		184	51,817.
		14	Benefits paid to or for members (Part IX, column (A), li	ine 4)			0. 0.
	တ္သ	15	Salaries, other compensation, employee benefits (Par	t IX, column (A), lines 5-10)	<u> </u>	<u>376,918</u>	
	Expenses		Professional fundraising fees (Part IX, column (A), line	•	<u> </u>		0. 0.
	ă		Total fundraising expenses (Part IX, column (D), line 2	,	0.	1 426 254	2 410 720
	ш		Other expenses (Part IX, column (A), lines 11a-11d, 11	-	<u> </u>	1,436,358	
			Total expenses Add lines 13-17 (must equal Part IX, o		\vdash	1,813,460	
	- 9		Revenue less expenses Subtract line 18 from line 12				
	ances	20	Total assets (Part X, line 16)		P	eginning of Current Ye 1,518,59	
•	Asse		Total liabilities (Part X, line 16)			1,109,21	
	Net Asset Eund Bala		Net assets or fund balances Subtract line 21 from line	e 20		409,385	
- 1		rt II	Signature Block				
Ì	Unde	r pena	Ities of perjury, I declare that I have examined this return, inc	luding accompanying schedules	and statem	ents, and to the best o	f my knowledge and belief, it is
	true,	correc	t, and complete. Declaration of preparer (other than officer) is	s based on all information of wh	ich preparer	has any knowledge.	
			A Share	\		5/17	1/2/
	Sign		Signature of officer) 	D 3 m T O 1	Date	1
-	Here	9	BRIAN WENTZ, DIRECTOR OF Type or print name and title	FINANCIAL OPE	KATTOI	NS	
	_	-	<u></u>		— т	Date Check	PTIN
	Paid		Print/Type preparer's name ASHLEY ZUMBRUN	eparer's signature	- 1	أأأ	mployed P02050856
•	raiu Prep	1	Firm's name SC&H GROUP, INC.			Firm's EIN	
	Use (Firm's address > 910 RIDGEBROOK ROA	ND		, in selling	
١			SPARKS, MD 21152			Phone no.	(410) 403-1500
, i	May	the IF	S discuss this return with the preparer shown above?	(see instructions)			X Yes No
•		1 01-20			ns.		Form 990 (2019)

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form	1 990 (2019) BALTIMORE FESTIVAL OF THE ARTS, INC. 52-1559145	Page 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission	
	TO PROMOTE PUBLIC PARTICIPATION AND APPRECIATION OF THE ARTS IN ITS MANY FORMS.	
	MANI PORMS.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	X No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	X No
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, a revenue, if any, for each program service reported	nd
		548.)
74	ARTSCAPE - ARTSCAPE IS AMERICA'S LARGEST FREE ARTS FESTIVAL, ATTRACT	
	350,000+ ATTENDEES OVER THREE DAYS. ARTSCAPE FEATURES 150+ FINE	
	ARTISTS, FASHION DESIGNERS, AND CRAFTSPEOPLE; VISUAL ART EXHIBITS ON	
	AND OFF-SITE, INCLUDING EXHIBITIONS, OUTDOOR SCULPTURES, PHOTOGRAPHY	
	AND THE JANET & WALTER SONDHEIM PRIZE; INCREDIBLE LIVE CONCERTS ON	
	OUTDOOR STAGES; A FULL SCHEDULE OF PERFORMING ARTS INCLUDING DANCE,	
	OPERA, THEATER, FILM, EXPERIMENTAL MUSIC AND THE BALTIMORE SYMPHONY	
	ORCHESTRA; FAMILY EVENTS SUCH AS HANDS-ON PROJECTS, DEMONSTRATIONS,	
	COMPETITIONS, CHILDREN'S ENTERTAINERS AND STREET THEATER; AND A MENU FOOD AND BEVERAGE THAT IS AVAILABLE THROUGHOUT THE FESTIVAL SITE.	OF
	TOOD AND BEVERAGE THAT IS AVAIDABLE THROUGHOUT THE FESTIVAL SITE.	
		
4b	(Code) (Expenses \$1,905,808. including grants of \$ 50,917.) (Revenue \$ 128,	789.)
	LIGHT CITY - LAUNCHED BY THE BALTIMORE OFFICE OF PROMOTION & THE ART	
	IN 2016, LIGHT CITY BALTIMORE IS! THE FIRST LARGE-SCALE, INTERNATIONA	ŗ
	LIGHT FESTIVAL IN THE UNITED STATES. INLITS FIRST YEAR, LIGHT CITY	
	WELCOMED MORE THAN 400,000 PEOPLE OVER SEVEN NIGHTS. LIGHT CITY IS	<u> </u>
	FREE FESTIVAL THAT TRANSFORMS BALTIMORE WITH LARGE-SCALE LIGHT	
	INSTALLATIONS, PERFORMANCES, MUSIC AND INNOVATION. CENTRAL TO LIGHT	
	CITY IS THE BGE LIGHT ART WALK ALONG BALTIMORE'S INNER HARBOR, FEATURING MORE THAN 50 ATTRACTIONS INCLUDING ILLUMINATED SCULPTURES,	
	PROJECTIONS, INTERACTIVE TECHNOLOGIES, PERFORMANCES, CONCERTS, FOOD	
	VENDORS AND A CHILDREN'S AREA. LIGHT CITY'S INNOVATION PROGRAMMING,	
	LABS@LIGHTCITY GENERATES AN ECOSYSTEM OF IDEAS AND LEARNING DURING T	HE
	DAY WHILE LIGHTS, PERFORMANCES AND LIVE MUSIC RE-IMAGINE BALTIMORE A	
4c	(Code) (Expenses \$) (Revenue \$)	
		<u>. </u>
4d	Other program services (Describe on Schedule O)	
	(Expenses \$ including grants of \$) (Revenue \$)	
<u>4e</u>	Total program service expenses ▶ 2,852,760.	
	Form See SCHEDULE O FOR CONTINUATION(S)	90 (2019)

Fdrm 990 (2019) BALTIMORE FESTIVAL OF THE ARTS, INC.
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	_X	
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_		X
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		X
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		<u> X</u>
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		X
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_		_ <u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		ľ	37
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	_	ĺ	17
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		[v
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		<u>X</u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X		1	
	as applicable	-		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		.,	
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	اءما	1	Х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	+	
a	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			Х
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	x	
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	^	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		x	
100	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	^	
128	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12a		Х
h	Schedule D, Parts XI and XII Was the property projection and the consolidated undependent audited financial statements for the tax year?	128		
U	Was the organization included in consolidated, independent audited financial statements for the tax year?	12b	х	
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	170		
-	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	j	Х
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	- 1	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	\neg		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
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 ⁹ If "Yes," complete Schedule G, Part I	17_		X
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		X
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	T	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	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 12 If "Yes." complete Schedule I. Parts I and II	21		X
32003		Form	990 c	2019

Forn	990 (2019) BALTIMORE FESTIVAL OF THE ARTS, INC. 52-155	145	<u>. P</u>	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			٠.,
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	22	x	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
2 5 a	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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			•
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		1	
-	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II			Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	26		
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled		}	
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29_		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			37
24	contributions? If "Yes," complete Schedule M	30		$\frac{x}{x}$
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
32	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
•	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	"		
	Part V, line 1	34	х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	,,	х	
Par	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	Α	
	Check if Schedule O contains a response or note to any line in this Part V			
	and the same of th]	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 91			
	Enter the number of Forms W-2G included in line 1a Enter ·0· if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
	(gambling) winnings to prize winners?	1c		
932004	01-20-20	Form	990 (2019)

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X**/	i (commod)				Т.:-	Т:
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1		* #	Yes	No
	filed for the calendar year ending with or within the year covered by this return	2a) \	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ADDLES
h	If at least one is reported on line 2a, did the organization file all required federal employment tax retuin			2b	access.	XXXX
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instruction			15.55	KINGS.	7-19:25
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	٥,		3a	ملا المشاكسية	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	_		3b	 	
	At any time during the calendar year, did the organization have an interest in, or a signature or other		ity over a	30	f	
74	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		x
h	If "Yes," enter the name of the foreign country	accoun		~ 7.40 KI	· 256.4	Belle,
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccour	te (EBAR)	27.12.78 2.12.78	12.50	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	CCOUI	its (i DAir)	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?	,	5b	 	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	Ction		5c	<u> </u>	 -
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orga	inization solicit	100		
-	any contributions that were not tax deductible as charitable contributions?			6a	ĺ	x
h	If "Yes," did the organization include with every solicitation an express statement that such contribution	ions oi	raifts	1 50		
_	were not tax deductible?		5	6b		
7	Organizations that may receive deductible contributions under section 170(c).				WAL.	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and sei	rvices r	rovided to the navor?	· 7a	XXXXXX	X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	*1000 p	novided to the payor	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as ren	ured			
Ŭ	to file Form 8282?	uo 10q	an od	7c	}	Х
а	If "Yes," indicate the number of Forms 8282 filed during the year	7d	1		14 14 14 14	(4)
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c		t?	7e	· ····································	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri		•	7f	<u> </u>	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained			", "", "2", t		(30)
	sponsoring organization have excess business holdings at any time during the year?	-,		8	3	
9	Sponsoring organizations maintaining donor advised funds.			3 ' 2 '		
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
0	Section 501(c)(7) organizations. Enter			DOMESTICAL STREET	Children,	
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		1, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,	3, 14	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1	Section 501(c)(12) organizations. Enter		,			
а	Gross income from members or shareholders	11a	1		1 4 3	
b	Gross income from other sources (Do not net amounts due or paid to other sources against				1. A.	
	amounts due or received from them)	11b			1110	
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			T. Carlo	(1) A
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			3	ر زید ا	
а	Is the organization licensed to issue qualified health plans in more than one state?		•	13a		ļ
	Note: See the instructions for additional information the organization must report on Schedule O					
b	Enter the amount of reserves the organization is required to maintain by the states in which the				. آن التي الأمرية	
	organization is licensed to issue qualified health plans	13b		13 , 15	182	
c	Enter the amount of reserves on hand	13c		1.18	e spale	
4a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu.	le O		14b		ļ
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune	ration	or			
	excess parachute payment(s) during the year?			15	<u> </u>	X
	If "Yes," see instructions and file Form 4720, Schedule N		•	25-7-13 25-7-13		
6	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incon	ne?	16		X
	If "Yes," complete Form 4720, Schedule O					- WW.
				Form	990	(2019)

BALTIMORE FESTIVAL OF THE ARTS, INC. Form 990 (2019) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI $|\mathbf{X}|$ Section A. Governing Body and Management Ye<u>s</u> No 1a Enter the number of voting members of the governing body at the end of the tax year 12 1a 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 on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent 12 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х Did the organization have members or stockholders? 6 X 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a b-Each committee with authority to act on behalf of the governing body? ___ X 8b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a **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 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? Х 13 X Did the organization have a written document retention and destruction policy? 14 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 b Other officers or key employees of the organization X 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed **MD** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Other (explain on Schedule O) ___ Own website X Another's website X Upon request Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

Form **990** (2019)

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

10 EAST BALTIMORE STREET 10TH FLOOR, BALTIMORE,

21202

BRIAN WENTZ - 443-263-4324

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above

Check this box if neither the organization	nor any related	orga	anıza	tion	con	nper	nsate	ed any current officer, d	rector, or trustee	г
(A)	(B)			_ (C	C)			(D)	(E)	(F)
Name and title	Average	(de	not c	Pos heck	itior more	l than	one	Reportable	Reportable	Estimated
	hours per	bo	k, unle içer ar	ss pe	rson	s bot	h an	compensation	compensation	amount of
	week (list any	\vdash	1			Γ	T	from the	from related organizations	other compensation
	hours for	direct				-		organization	(W-2/1099-MISC)	from the
	related	10 aa	stee	1	ĺ	nsate		(W-2/1099-MISC)	(** 2, 1000 *************	organization
	organizations	i is	la tr		oyee	adwo .				and related
	below	Individual trustee or director	nstitutional trustee	 	Key employee	Highest compensated employee	ner			organizations
	line)	重	18	Officer	Key	돌	Former			
(1) ANANA KAMBON	1.00	┨.								
PRESIDENT	1.00	Х		Х	_	<u> </u>	_	0.	0.	0.
(2) MICHAEL SHECTER	1.00	┨		l		ł				•
VICE PRESIDENT	1.00	X		Х	_	_	_	0.	0.	0.
(3) JEFFREY P. PILLAS	1.00	┨							•	_
TREASURER	1.00	X	<u> </u>	X	<u>.</u>	_	Ш	<u>0.</u>	0.	0.
(4) E. SCOTT JOHNSON	1.00	↓		'					•	
SECRETARY	1.00	Х	-	X	<u> </u>	ļ	Н	0.	0.	0.
(5) THOMAS CRAWFORD	1.00	↓								•
BOARD MEMBER	1.00	X	\vdash		-	<u> </u>		0.	0.	0.
(6) HEIDI DANIEL	1.00	↓			ŀ			•	•	
BOARD MEMBER	1.00	X			Ĺ—	ļ_	Н	0.	0.	0.
(7) MICHAEL DAVENPORT	1.00	۱						•	0	•
BOARD MEMBER	1.00	X		_			├	0.	0.	_0.
(8) JACK LEWIN	1.00	ļ.,] .					0.	0.	
BOARD MEMBER	1.00	X	\vdash			-	Н	<u>U.</u>	U •	0.
(9) BRIAN LYLES	1.00	١,,						0.	0.	^
BOARD MEMBER	1.00	X					Н	<u> </u>	U •	0.
(10) FRANKLIN N. MCNEIL JR.	1.00	∤						0.	0.	0
BOARD MEMBER	1.00	Х	\vdash			_	Н			0.
(11) PAULA ROME	1.00	١.,						0.	0.	0
BOARD MEMBER	1.00	X				<u> </u>	\vdash		<u> </u>	0.
(12) LAURIE RUSH	1.00	x						0.	0.	0.
BOARD MEMBER		┢	H			_	\vdash		<u> </u>	
(13) KIMBERLY A. CLARK (PART YEAR)	1.00	₩.						0.	0.	0.
BOARD MEMBER	1.00	X								
(14) DONNA DREW SAWYER	35.00	┨	1 1	v				0.	150 067	12 063
CEO	35.00	-	Н	Х	_		\dashv		159,867.	12,963.
(15) BRIAN WENTZ DIRECTOR OF FINANCIAL OPERATIONS	35.00 35.00	1		х				0.	49,106.	1,678.
(16) ROSALIND HEALY	25.00	├		♣		-	┝╌┥	<u>U•</u>	49,100.	1,0/0.
CHIEF OF STAFF	10.00	1				х		0.	124,605.	8,718.
(17) KATHLEEN HORNIG	25.00		$\vdash \dashv$	\dashv		Λ		<u> </u>	124,003.	0,710.
COO	10.00	1				х		0.	116,389.	8,897.
932007 01-20-20	1 10.00	<u> </u>				Λ			110,309	Form 990 (2019)

Form **990** (2019)

\$100,000 of compensation from the organization

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Total revenue Related or exempt Unrelated Revenue excluded from tax under function revenue business revenue 1 a Federated campaigns Membership dues 1b Fundraising events Related organizations' 618,730 Government grants (contributions) All other contributions, gifts, grants, and 685,788 similar amounts not included above 1g \$ Noncash contributions included in lines 1a-1f 304,518. Total, Add lines 1a-1f 的一种是一种 Business Code FEE FOR SERVICE 900099 Program Service Revenue All other program service revenue Total, Add lines 2a-2f 212,810. Investment income (including dividends, interest, and other similar, amounts) Income from investment of tax-exempt bond proceeds Royalties (II) Personal (ı) Real 6 a Gross rents -6a 6b Less rental expenses Rental income or (loss) Net rental income or (loss) (i) Securities (II) Other 7 a Gross amount from sales of assets other than inventory b Less cost or other basis Other Revenue and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$1 contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a _Gross income from gaming activities. See Part IV, line 19 **b** Less direct expenses c Net income or (loss) from gaming activities Gross sales of inventory, less returns 10a126,412 and allowances 32,885 b. Less cost of goods sold Net income or (loss) from sales of inventory d All other revenue e Total. Add lines 11a-11d 2,610,855. Total revenue. See instructions

932009-01-20-20

Form 990 (2019)

Sec	ion 501(c)(3) and 501(c)(4) organizations must com			mplete column (A)	
	Check if Schedule O contains a respo	nse or note to any line in (A)		(C)	X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	51,817.	51,817.		
2	Grants and other assistance to domestic			PROBLEM CARN	
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign]		
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	,		•	
	trustees, and key employees				
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	645,699.	431,287.	214,412.	
8	Pension plan accruals and contributions (include	. دیا عالمات است	u dest mush man in in i	· ; ; - · · · · · · · · · · · · · · · ·	
	section 401(k) and 403(b) employer contributions)	= K K*		-	
9	Other employee benefits		•		
- 10	Payroll-taxes				
11	Fees for services (nonemployees)				-
а	Management				
b	Legal	17,221.		17,221.	
С	Accounting				
	Lobbying				
e	Professional fundraising services. See Part IV, line 17		"吃饭"个"食品"。		
f	Investment management fees			Location of the Contraction of t	
g					
9	column (A) amount, list line 11g expenses on Sch O.)	1,381,476.	1,381,476.		
12	Advertising and promotion	96,610.	96,610.		
13	Office expenses	32,048.	32,048.		
14	Information technology	95.	95.		
15	Royalties	,,,,			
16	Occupancy	51,154.	51,154.		
<u></u> 17	Travel	70,847.	70,847.		
18	Payments of travel or entertainment expenses	70,047.	70,047.		
10	· ·				
40	for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest				
	Payments to affiliates	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
21		5,802.	5,802.		
22	Depreciation, depletion, and amortization	3,002.	3,002.		
23	Insurance Other expenses, Itamize expenses not covered		în i i r‱∰a pix en aprî - i_g	Juga - "Millio dar" ord» (Lidil do s	- SECTION MARKET - OV FERSEL
24	Other expenses, Itemize expenses not covered above (List miscellaneous expenses on line 24e. If			Prance and the	
	line 24e amount exceeds 10% of line 25, column (A)				
_	amount, list line 24e expenses on Schedule 0.) EQUIPMENT RENTAL	543,912.	543,912.	NOTE TO THE PROPERTY OF THE PR	
a	FOOD AND BEVERAGE	184,744.	184,744.		<u> </u>
D -	MISCELLANEOUS	20,705.	2,968.	17 727	
С	BAD DEBT EXPENSE		4,900.	17,737.	
d		15,114.		15,114.	
	All other expenses	2 117 244	2 052 760	264 404	
<u>25</u>	Total functional expenses. Add lines 1 through 24e	3,117,244.	2,852,760.	264,484.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.		·		٧
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2019)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 103,196. 427,694. Cash - non-interest-bearing 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 908,695 3,000. 4 Accounts receivable, net 4 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 8 Inventories for sale or use 135,900. Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 148,126. basis Complete Part VI of Schedule D 10a 107,620. 46,308. 40,506. b Less accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 1,518,597. 146,702. 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 82,863. 14,743. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 80,263. 85,359. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, 22 Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 940,990. 1,623,859. of Schedule D 25 1,109,212. 718,865. Total liabilities. Add lines 17 through 25 26 Organizations that follow FASB ASC 958, check here 🕨 🗓 Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. -1,088,186. -1,814,337. Net assets without donor restrictions 497,571. 28 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 31 Retained earnings, endowment, accumulated income, or other funds 31

146,702. Form 990 (2019)

572,163.

32

Total net assets or fund balances

Total liabilities and net assets/fund balances

409,385

518,597

32

	990 (2019) BALTIMORE FESTIVAL OF THE ARTS, INC.	52-	1559	145	Pa	ge 12
Pai	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	_1		,61		
2	Total expenses (must equal Part IX, column (A), line 25)	2		,11		
3	Revenue less expenses Subtract line 2 from line 1	3				<u>89.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		40	<u>9,3</u>	<u>85.</u>
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	_6				
7	Investment expenses	7				
8	Prior period adjustments	8	-1	<u>, 47</u>	<u>5,1</u>	<u>59.</u>
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	-1	<u>,57</u>	2,1	<u>63.</u>
Par	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
1	Accounting method used to prepare the Form 990 Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule C)			Yes	No
2a	5			2a		X
; -	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed of separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis	on a	i	•	i e	
ь	Were the organization's financial statements audited by an independent accountant?	-	•	2b	X	فسيس
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate I	haeie			_ 	
	consolidated basis, or both Separate basis M Consolidated basis Both consolidated and separate basis		-	;°	,, 	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audıt,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	<u> </u>	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sched	dule O	ļ			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	le Audi	t			
	Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audi	t	ļ		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			<u>3</u> b		
				Form	990	(2019)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2019

Open to Public

Open to Public Inspection
Employer identification number

52-1559145 BALTIMORE FESTIVAL OF THE ARTS, INC. Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in X section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization listed (v) Amount of monetary (vi) Amount of other (II) EIN (iii) Type of organization (i) Name of supported in your go una document (described on lines 1 10 support (see instructions) support (see instructions) organization Yes No above (see instructions)) Total

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 932021 09-25-19 Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990 EZ) 2019 BALTIMORE FESTIVAL OF THE ARTS, INC. 52-1559145 Page 2

[Part II] Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and		•	1		10,000	197.5.5
	membership fees received (Do not						
	include any "unusual grants ")	4677292.	3861908.	2745040.	1987918.	2304518.	15576676.
2	Tax revenues levied for the organ-	,					
	ization'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						L
4	Total. Add lines 1 through 3	4677292.	3861908.	2745040.	1987918.	2304518.	15576676.
5	The portion of total contributions				HEALANGE	r istració	
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included	国际基础基					
:,	on line 1 that exceeds 2% of the						- " . "
	amount shown on line 11,	10 - 21 E 10 E	المستخدة المنافية				
	column (f)	Partition Age					2533119.
	Public support. Subtract line 5 from line 4	裁別、出籍和司集		the contract of the contract of the	want parties and		13043557.
	ction B. Total Support						•
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	4677292.	3861908.	2745040.	1987918.	2304518.	15576676.
8	Gross income from interest,						
	dividends, payments received on		,			-	
	securities loans, rents, royalties,	, , ,					
	and income from similar sources	48.				· · · · · · · · · · · · · · · · · · ·	48.
9	Net income from unrelated business	٧				`	
	activities, whether or not the	•	•				
	business is regularly carried on						-
10	Other income Do not include gain			•			
	or loss from the sale of capital	7 202	244	12 600	2 7 7 7	106 410	151 205
	assets (Explain in Part VI)	7,282.	344.	13,600.	3,757.	126,412.	
	Total support. Add lines 7 through 10	1 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1961/4-1862/47 (F 1982)	1,500 1980 19			15/28119.
	-Gross receipts-from related activities,	•	•	1 6		12	
13	First five years. If the Form 990 is for organization, check this box and stop		iirsi, secona, inirc	i, iourth, or litth ta	x year as a section	501(0)(3)	
Sec	tion C. Computation of Publi	c Support Per	centage			· · · · · · · · · · · · · · · · · · ·	
	Public support percentage for 2019 (li			alumn (f))		14	82.93 %
	Public support percentage from 2018			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ì	15	83.47 %
				line 13 and line 1	ں 4 is 33 1/3% or ma		
	ia 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
b	33 1/3% support test - 2018. If the o	- · · · ·		ne 13 or 16a. and	line 15 is 33 1/3%	or more, check this	
	and stop here. The organization quali	=			``\		▶□
17a	10% -facts-and-circumstances test				13, 16a, or 16b, a	nd line 14 is 10% c	or more,
	and if the organization meets the "fact						
	meets the "facts-and-circumstances" t		•			3	
b	10% -facts-and-circumstances test	-			- ;	7a, and line 15 is 1	0% or
	more, and if the organization meets th				•		
	organization meets the "facts-and-circ				-		
	Private foundation. If the organization						▶□
			<u> </u>			dule À (Form 990	or 990-F7) 2019

Schedule A (Form 990 or 990-EZ) 2019

Pa	irt III Support Schedule for (Organizations	Described in	Section 509(a)	(2)		/	
	(Complete only if you checked	I the box on line 1	0 of Part I or if the	organization failed	to qualify under P	art II If the organia	zation fails to	
	qualify under the tests listed b	elow, please com	plete Part II)					
Se	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f)/Total	
1	Gifts, grants, contributions, and				, i			
	membership fees received (Do not		}			1		
	include any "unusual grants ")						./	
2	Gross receipts from admissions, merchandise sold or services per-							
	formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that					/		
	are not an unrelated trade or bus-					/		
	iness under section 513	j		J	J	/		
4	Tax revenues levied for the organ-							
	ization's benefit and either paid to				/			
	or expended on its behalf				/			
5	The value of services or facilities							
	furnished by a governmental unit to				/		ľ	
	the organization without charge				/			
6	Total. Add lines 1 through 5							
	Amounts included on lines 1, 2, and				/		1	
	3 received from disqualified persons				/	}	1	
ь	Amounts included on lines 2 and 3 received	-			/		 -	
_	from other than disqualified persons that			/			1	
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			/				
_	Add lines 7a and 7b			/-				
						=		
	Public support. (Subtract line 7c from line 6) tion B. Total Support		<u> </u>	/	l		L	
		(a) 2015	(b) 2016	(g) 2017	(d) 2018	(a) 2019	(f) Total	
	Amounts from line 6	(a) 2015	(b) 2016	(2) 2017	(u) 2016	(e) 2019	(i) Total	
	Amounts from line 6 Gross income from interest,			/		 -		
IUa	dividends, payments received on securities loans, rents, royalties, and income from similar sources			/				
b	Unrelated business taxable income						1	
	(less section 511 taxes) from businesses		/					
	acquired after June 30, 1975							
С	Add lines 10a and 10b							
11	Net income from unrelated business							
	activities not included in line 10b, whether or not the business is							
	regularly carried on		Y				_	
12	Other income Do not include gain							
	or loss from the sale of capital assets (Explain in Part VI)		İ				•	
13	Total support. (Add lines 9, 10c, 11, and 12)					-		
	First five years. If the Form 990 is for	the organization's	s first, second, third	. fourth, or fifth ta	x vear as a section	501(c)(3) organiza	ation.	
	check this box and stop here			, , , , , , , , , , , , , , , , , , , ,	,	(-)(-)	▶□	
Sec	tion C. Computation of Public	Support Per	centage				··- <u></u> -	
	Public support percentage for 2019 (l)			olumn (fl)		15	%	
	Public support percentage from 2018	• • •	•	0.0 (1)/		16	%	
	tion D. Computation of Inves					···		
	Investment income percentage for 20			ne 13 column (f)		17	%	
	Investment income percentage from 2	•	* * * * * * * * * * * * * * * * * * * *	10 10, COMMINT (I))		18	%	
	· /		•	on line 14 and line	15 is more than 2'			
ıya	33 1/3% support tests - 2019. If the						, 18 HOL	
	more than 33 1/3%, check this box an						▶	
	33 1/3% support tests - 2018. If the	-					na	
	line 18 is not more than 33 1/3%, chec					_		
_20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions							

932023 09-25-19

Schedule A (Form 990 or 990-EZ) 2019

Part IV. Supporting Organizations

(Complete only if you checked a box in line 12 on Part I if you checked 12a of Part I, complete Sections A and B if you checked 12b of Part I, complete Sections A and C if you checked 12c of Part I, complete Sections A, D, and E if you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 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)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination
- c 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
- 4a Was any supported organization not organized in the United States ("foreign supported organization")?
 [Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b 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 supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a 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 amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** 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.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

C RATE TO A	Yes	No
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	edule A (Form 990 or 990 EZ) 2019 BALTIMORE FESTIVAL OF T			2-1559145 Pager6
7.4				
1	Check here if the organization satisfied the Integral Part Test as a qualifyin			art VI) See instructions. All
Sect	other Type III non-functionally integrated supporting organizations must co	implete s	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3	İ	
4		4		- , , , , , , , , , , , , , , , , , , ,
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
·	collection of gross income or for management, conservation, or			•
	maintenance of property held for production of income (see instructions)	6	<u> </u>	
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	tion B - Mınimum Asset Amount	, -	(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	() ax		
_=.	instructions for short tax year or assets held for part of year)	řák z		
а	Average monthly value of securities	1ā	-	
b	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other			
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
_ 5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	tion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	De Francisk 145	
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-functional	y integra	ated Type III supporting organ	nization (see

52-1559145 Page 7 Schedule A (Form 990 or 990 EZ) 2019 BALTIMORE FESTIVAL OF THE ARTS, INC. Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2019 from Section C, line 6 Line 8 amount divided by line 9 amount Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Amount for 2019 Pre-2019 interiori Distributable amount for 2019 from Section C, line 6 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI) See instructions TRANSPORTED TO THE STEP PROPERTY AND Excess distributions carryover, if any, to 2019 a From 2014 **b** From 2015 c From 2016 为自己的原理,如果是一种的原理,但是是一种的原理,但是是一种的原理,但是是一种的原理,但是是一种的原理,但是是一种的原理,但是是一种的原理,但是是一种的原理,但 d From 2017 HERETON DESIGNATION e From 2018 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2019 distributable amount Carryover from 2014 not applied (see instructions) 12011 12112 2212 Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2019 from Section D, a Applied to underdistributions of prior years THE STATE OF THE LOCAL PROPERTY OF THE PROPERT b Applied to 2019 distributable amount Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions Remaining underdistributions for 2019 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions Excess distributions carryover to 2020. Add lines 3; and 4c 医氯基醋霉素 的复数不足证券 Tenkingson bilings 1、14度14、18度27、18度21 Breakdown of line 7 全型化制度使用24倍度; a Excess from 2015 **b** Excess from 2016 c Excess from 2017 VARANTEO VARIOTE d Excess from 2018

Schedule A (Form 990 or 990-EZ) 2019

e Excess from 2019

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME: SALES OF MERCHANDISE		line 1, l Section	lemental Information. Prov., Section A, lines 1, 2, 3b, 3c, 4b, Part IV, Section D, lines 2 and 3, Fin D, lines 5, 6, and 8, and Part V, structions)	4c, 5a, 6, 9a, 9b, 9c, 11a Part IV, Section E, lines 1	ı, 11b, and 11c, c. 2a. 2b. 3a. an	Part IV, Section B, lines id 3b. Part V. line 1: Part	1 and 2, Part IV, Section C, V. Section B. line 1e. Part V.
SALES OF MERCHANDISE	ALES OF MERCHANDISE	SCHEDULE A	, PART II, LINE 1	0, EXPLANATION	ON FOR O	THER INCOME:	
		SALES OF M	ERCHANDISE				
							
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

D-	BALTIMORE FESTIVAL O		52-1559145
Pa		unds or Other Similar Funds (or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6		
	<u></u>	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing	ng that the assets held in donor advise	d funds
	are the organization's property, subject to the organization's excl	usive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advis	- · ·	
	for charitable purposes and not for the benefit of the donor or do	nor advisor, or for any other purpose co	
<u> </u>	impermissible private benefit?		Yes No
Pa			art IV, line 7
1	Purpose(s) of conservation easements held by the organization (c		
	Preservation of land for public use (for example, recreation	or education) Preservation of a	a historically important land area
	Protection of natural habitat	Preservation of a	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form of	f a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structu	· · ·	2c
d	Number of conservation easements included in (c) acquired after	7/25/06, and not on a historic structure	e
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	ed, extinguished, or terminated by the c	organization during the tax
	year ▶		
4	Number of states where property subject to conservation easeme	ent is located	
5	Does the organization have a written policy regarding the periodic	monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it hold		L Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, hand	dling of violations, and enforcing conse	rvation easements during the year
			
7	Amount of expenses incurred in monitoring, inspecting, handling	of violations, and enforcing conservation	on easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above sa	tisfy the requirements of section 170(h)	
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation ea	·	
	balance sheet, and include, if applicable, the text of the footnote	to the organization's financial statemer	its that describes the
<u> </u>	organization's accounting for conservation easements	Listorical Tuescomes on Oth	au Cimilau Anasta
Pai	t III Organizations Maintaining Collections of Ar		er Similar Assets.
	Complete if the organization answered "Yes" on Form 990	, Part IV, line 8	
1a	If the organization elected, as permitted under FASB ASC 958, no	•	
	of art, historical treasures, or other similar assets held for public e	xhibition, education, or research in furt	herance of public
	service, provide in Part XIII the text of the footnote to its financial	statements that describes these items	
b	If the organization elected, as permitted under FASB ASC 958, to	report in its revenue statement and ba	lance sheet works of
	art, historical treasures, or other similar assets held for public exh	ibition, education, or research in furthe	rance of public service,
	provide the following amounts relating to these items		_
	(i) Revenue included on Form 990, Part VIII, line 1		► \$ ► \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treasure		gain, provide
	the following amounts required to be reported under FASB ASC 9	958 relating to these items	_
	Revenue included on Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		▶ \$

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

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Schedule D (Form 990) 2019

	edule D (Form 990) 2019 BALTIMO	RE FESTIVA	L OF	THE A	RTS, I	NC.		52-15	59145	Page 2	
Pa	rt III Organizations Maintaining C								s (continu	ued)	
3	Using the organization's acquisition, accessi	on, and other record	is, checl	k any of the t	following tha	at make si	gnificant	use of its			
	collection items (check all that apply)										
а	Public exhibition	(a 🖳	Loan or exc	hange progr	ram					
b	Scholarly research	•	e []	Other			~		,		
С	Preservation for future generations										
4	Provide a description of the organization's co							se in Part	XIII		
5	During the year, did the organization solicit of					er sımılar	assets		_		
100	to be sold to raise funds rather than to be m	aintained as part of t	he orgai	nization's co	llection?				Yes	No	
Pa	rt IV Escrow and Custodial Arran	gements. Compl	lete if the	e organizatio	n answered	"Yes" on	Form 990	D, Part IV,	line 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contributions	s or other as	sets not i	ncluded		_		
	on Form 990, Part X?								Yes	L No	
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	table							
									Amount		
С	Beginning balance						1c				
d	Additions during the year	1d									
е	Distributions during the year						1e				
f	Ending balance						1f	L			
	Did the organization include an amount on F						ty?		Yes	∐ Nŏ	
	If "Yes," explain the arrangement in Part XIII	Check here if the ex	cplanatio	n has been	provided on	Part XIII					
Pa	rt V Endowment Funds. Complete	1							-		
		(a) Current year	<u>(b) F</u>	Prior year	(c) Two yea	rs back	(d) Three	years back	(e) Four y	rears back	
1a	Beginning of year balance	<u></u>									
b											
С	c Net investment earnings, gains, and losses										
d											
е	e Other expenditures for facilities										
	and programs		ļ		ļ						
f	Administrative expenses	-	<u> </u>								
g	End of year balance		<u> </u>								
2	, , , , , , , , , , , , , , , , , , , ,										
	Board designated or quasi-endowment		%								
	Permanent endowment	%									
С		%									
_	The percentages on lines 2a, 2b, and 2c short	•									
За	Are there endowment funds not in the posse	ssion of the organiza	ation tha	t are held an	id administer	red for the	e organiza	ation	_		
	by									es No	
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ir)		
	If "Yes" on line 3a(ii), are the related organiza	•							_3b	i	
Bar	t VI Land, Buildings, and Equipm		wment to	unds							
rai			. D. + N.		F 000						
	Complete if the organization answered					Γ .		_	4.0.5		
	Description of property	(a) Cost or o		(b) Cost			cumulate	ed	(d) Book	value	
		basis (investr	nent)	basis (otrier)	aep	reciation	-			
	Land										
	Buildings	 									
	Leasehold improvements				2,176.	<u> </u>	52,1	76			
	Equipment	-	-		5,950.		$\frac{52,1}{55,46}$		40	<u>0.</u> ,506.	
	Other Add lines 1a through 1e (Column (d) must en					<u></u>	JJ,44	==-		,506.	
- Utal	, naa mes ta uudugu te (Cojumn (a) must ei	uuai FOITTI 990. PAR .	л. сошт	ırı ıbı. iine 10	IG.I				- 	,	

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019 BALTIMORE FE Part VII Investments - Other Securities.	STIVAL OF TH	IE ARTS, INC. 52	-1559145 Page
Complete if the organization answered "Yes" of	on Form 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	(c) Method of valuation Cost or end	of-year market value
(1) Financial derivatives		:	
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D) '			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line	11c See Form 990, Part X, line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)	<u></u>		
(9)			
Fotal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	<u>-</u>		
Part IX Other Assets.		-	
Complete if the organization answered "Yes" or	n Form 990, Part IV, line	11d See Form 990, Part X, line 15	
(a) D	escription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	15.)		
Complete if the organization answered "Yes" or	n Form 990, Part IV, line	11e or 11f See Form 990, Part X, line 25.	
1. (a) Description of liability	<u> </u>		(b) Book value
(1) Federal income taxes			
(C) DITE TO APPTITATE			1 622 550

1,300. DEPOSIT (3) (4) (5) (6) (7) (8) (9) 1,623,859. Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740 Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019 BALTIMORE FESTIVAL OF		52-1	1559145	Page 4
Part XI Reconciliation of Revenue per Audited Financial Sta	-	leturn.		
Complete if the organization answered "Yes" on Form 990, Part IV, I	ine 12a			
1 Total revenue, gains, and other support per audited financial statements		1	<u>2,939,</u>	665.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 - 1			
a Net unrealized gains (losses) on investments	2a 295 925			
b Donated services and use of facilities	2b 295,925	•		
c Recoveries of prior year grants d Other (Describe in Part XIII)	2c 32,885	-{-;		
e Add lines 2a through 2d	2d 32,885		328	810.
3 Subtract line 2e from line 1		2e 3	2,610,	855
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		1	2,010,	033.
a Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b Other (Describe in Part XIII)	4b	7.		
c Add lines 4a and 4b		4c		0.
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12		5	2,610,	855.
Part XII Reconciliation of Expenses per Audited Financial St	atements With Expenses per	Return	l.	
Complete if the organization answered "Yes" on Form 990, Part IV, I	ne 12a			
1 Total expenses and losses per audited financial statements		1	3,446,	054.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25				
a Donated services and use of facilities	2a 295,925	•		
b Prior year adjustments	2b	_ ; ,		
c Other losses	2c	-		
d Other (Describe in Part XIII)	2d 32,885		220	010
e Add lines 2a through 2d 3 Subtract line 2e from line 1		2e	3,117,	810.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1		3	<u> </u>	244.
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	1 1		
b Other (Describe in Part XIII)	4b	┥		
c Add lines 4a and 4b		4c		0.
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	(8.)	5	3,117,	
Part XIII Supplemental 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 XI	,
lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide a	ny additional information			
DADM W LIND O				
PART X, LINE 2:				
-ASC-740, INCOME TAXES, PRESCRIBES A RECOG	NTMTON: MUDECUALD AN	n ,		
ASC 140, INCOME TAXES, PRESCRIBES A RECOG	NITION THRESHOLD AN	D A	·	
MEASUREMENT ATTRIBUTE FOR THE FINANCIAL S	TATEMENT PECOCNITIO	רואג זא		
MANDONDALI MITATOGIL TON THE TIMMCIAL O	TATEMENT RECOGNITIO	N MIN		
MEASUREMENT OF TAX POSITIONS TAKEN OR EXP	ECTED TO BE TAKEN T	т а и	AX RETU	RN
			11110	
AS WELL AS GUIDANCE ON DE-RECOGNITION, CL	ASSIFICATION, INTER	EST A	ND	
PENALTIES, AND FINANCIAL STATEMENT REPORT	ING DISCLOSURES. F	OR TH	ESE	
BENEFITS TO BE RECOGNIZED, A TAX POSITION	MUST BE MORE-LIKEL	Y- <u>THA</u>	N NOT T	0
BE SUSTAINED UPON EXAMINATION BY TAXING A	UTHORITIES. THE AM	OUNT		
DECOMPTED TO WELCHED LO MUD LIDORGE INC		T 0 0		
RECOGNIZED IS MEASURED AS THE LARGEST AMO	UNT OF BENEFIT THAT	IS G	REATER	
MUNN ETEMY DEDOEMM ITEMIY OF DEING DENITO	ED LIDON CEMMI EMENM	mrra		
THAN FIFTY PERCENT LIKELY OF BEING REALIZE	ED UPON SETTLEMENT.	THE		
ORGANIZATION HAS NOT IDENTIFIED ANY UNREC	OCNIZED WAY EVECTION	ביכ ה	ਧਧ	
ONOTHITEM HAD NOT IDENTIFIED ANT UNKEC	CONTRED TAK EAFOSUR	1 . C	1112	-
ORGANIZATION RECOGNIZE INTEREST AND PENAL	TIES ACCRUED ON ANY	UNRE	COGNIZE	D
932054 10-02-19			ile D (Form 99	

Schedule D (Form 990) 2019 BALTIMORE FESTIVAL OF THE ARTS, INC. 52-1559145 Page 5 Part XIII Supplemental Information (continued)
Supplemental information (continued)
TAX EXPOSURES AS A COMPONENT OF INCOME TAX EXPENSE. THE ORGANIZATION DOES
NOT HAVE ANY AMOUNTS ACCRUED RELATED TO INTEREST AND PENALTIES AS OF JUNE
30, 2020 AND 2019.
PART XI, LINE 2D - OTHER ADJUSTMENTS:
COST OF GOODS SOLD REPORTED ON PAGE 9 . 32,885.
PART XII, LINE 2D - OTHER ADJUSTMENTS:
COST OF GOODS SOLD REPORTED ON PAGE 9 32,885.

2 Employer identification number 52-1559145 Open to Public OMB No 1545-0047 2019 Inspection X Yes Part II 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 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations, Governments, and Individuals in the United States ► Go to www.irs.gov/Form990 for the latest information. 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ► Attach to Form 990. BALTIMORE FESTIVAL OF THE ARTS, INC. General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE I (Form 990) Part

	recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	,000 Part II can t	be duplicated if addition	onal space is neede	þí			
1 (a) N	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
						+		
:						~ •		
2 Enter 3 Enter	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	d government organisted in the line 1	anizations listed in the table	line 1 table		_		
LHA For	LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instructio	ins for Form 990.			-		Schedule (Form 990) (2019)

32

Page 2 Schedule I (Form 990) (2019) (f) Description of noncash assistance 52-1559145 (e) Method of valuation (book, FMV, appraisal, other) Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. (d) Amount of non-cash assistance BALTIMORE FESTIVAL OF THE ARTS, INC. (c) Amount of cash grant 33 (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) (2019) 932102 10-26-19 Part IV .Part III

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

OMB No 1545-0047

......Inspection

Internal Revenue Service Name of the organization

Questions Regarding Compensation

Department of the Treasury

BALTIMORE FESTIVAL OF THE ARTS, INC.

Employer identification number 52-1559145

		_	Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items			1950 as
	First-class or charter travel Housing allowance or residence for personal use			N.
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	100 min		
	Discretionary spending account Personal services (such as maid, chauffeur, chef)	K		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			27.14
- ·	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
	The state of the s	5	.1	San Sa
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's	Marian, y		AND TO
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III		J. Harring	
	Compensation committee Written employment contract	100		
	Independent compensation consultant Compensation survey or study	多要		N. T.
	Form 990 of other organizations Approval by the board or compensation committee		LW#	
		37.33	, "" "" """, """, """,	
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing	100 C	MAG POS	
	organization or a related organization		3 36 6 C PG.	
a	Receive a severance payment or change-of-control payment?	4a		X
ь	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	, Milio	47 %)\$	4040
			579.3	
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.	数4 公		
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	\$40,340 \$40,340		
	contingent on the revenues of			
а	The organization?	5a	ajeciński, parijak.	X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III		LONG TO	A STORY
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III	\$ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\$ 17 th.	F" - 1 3
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	II.		
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	i i	Hiji.	
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in		/-22-7 	1107
	Regulations section 53 4958-6(c)?	9		

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Schedule J (Form 990) 2019

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i) (iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of V	W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(I) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) DONNA DREW SAWYER CEO	€ 🥫	159,867.	000	0	12,800.	163.	172,830.	0.0
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	(ii)							
	(3)							
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Schedule J (Form 990) 2019

932113 10-21-19

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

2019
Open to Public Inspection

Name of the organization Employer identification number BALTIMORE FESTIVAL OF THE ARTS, INC. 52-1559145 FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: NIGHT. FORM 990, PART VI, SECTION B, LINE 11B: FORM 990 IS REVIEWED INTERNALLY AND PROVIDED TO BOARD MEMBERS FOR REVIEW, COMMENT, AND APPROVAL PRIOR TO FILING. FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION'S POLICY IS INITIATED AT THE START OF THE FISCAL YEAR ALONG WITH THE DISCLOSURE DOCUMENT. BOARD MEMBERS REVIEW THE DOCUMENT, ASK QUESTIONS AND THEN COMPLETE THE FORM AT THAT TIME. BOARD MEMBERS ARE ALSO INFORMED ABOUT THE NEED TO DISCLOSE IMMEDIATELY, RATHER THAN WAIT FOR A BOARD MEETING, IF THERE IS ANY CHANGE IN THEIR BUSINESS RELATIONSHIPS THAT APPEARS TO BE CONFLICT OF INTEREST. FORM 990, PART VI, SECTION C, LINE 18: UPON REQUEST FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST FORM 990, PART IX, LINE 11G, OTHER FEES: ARTIST FEES: PROGRAM SERVICE EXPENSES 1,069,583. 0. MANAGEMENT AND GENERAL EXPENSES FUNDRAISING EXPENSES

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

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

932211 09-06-19

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Part

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

Attach to Form 990.

2019	Open to Public
	0

OMB No 1545-0047

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

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33

BALTIMORE FESTIVAL OF THE ARTS, INC.

Employer identification number 52-1559145

(g) Section 512(b)(13) controlled No × entily Direct controlling Yes entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year ε Direct controlling entity End-of-year assets Public charity status (if section 501(c)(3)) CHARITY PUBLIC Total income Exempt Code section 9 501(C)(3) ত্ত Legal domicile (state or Legal domicile (state or foreign country) foreign country) MARYLAND ART AND CULTURE PROMOTION Primary activity Primary activity <u>e</u> BALTIMORE OFFICE OF PROMOTION AND THE ARTS 90-0091850, 10 E. BALTIMORE STREET, 10TH Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity FLOOR, BALTIMORE, MD 21202 Part II

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

932161 09-10-19 LHA

Schedule R (Form 990) 2019

52-1559145

Page 2

Schedule R (Form 990) 2019 BALTIMORE FESTIVAL OF THE ARTS, INC.

Part III

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year

General or Percentage managing ownership 3 Yes Code V-UB! amount in box 20 of Schedule 2 K-1 (Form 1065) Ξ Disproportionate Yes No allocations? Ξ Share of end-of-year assets **6** Share of total income Predominant income (related, unrelated, excluded from tax under sections 512-514) <u>e</u> (d)
| Direct controlling entity (c)
Legal
domicile
(state or
foreign Primary activity 9 Name, address, and EIN of related organization

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year Partiv

	_	tion 5(13) colled	Yes No						•	,	
		Section 512(b)(13) controlled entity?	ke ×								
	(£)	ged	-								
	(6)	Share of end-of-year	dosels		i						
		Sha						1			
	(e)	ĔÖ.	(ien ii								
	(p)	GIIIO									
	(0)	Legal domicile (state or foreign	country)								
mo(, , , , , , , , , , , , , , , , , , ,	(q) ·	Primary activity									
	(e)	Name, address, and EIN of related organization									

Schedule R (Form 990) 2019

Page 3

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	S No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	with one or more rela	ated organizations listed i	n Parts II-IV?		_
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1 a	×
b Gift, grant, or capital contribution to related organization(s)				1 b	×
c Gift, grant, or capital contribution from related organization(s)				ٻ	×
d Loans or loan guarantees to or for related organization(s)				19	×
e Loans or loan guarantees by related organization(s)				1e	×
				and the same	- -
 Dividends from related organization(s) 				=	ا
g Sale of assets to related organization(s)				19	×
h Purchase of assets from related organization(s)				무	×
 Exchange of assets with related organization(s) 				-	×
j Lease of facilities, equipment, or other assets to related organization(s)				į.	×
K Lease of facilities, equipment, or other assets from related organization(s)				*	×
1 Performance of services or membership or fundraising solicitations for related organization(s)	nzation(s)			× =	
m Performance of services or membership or fundraising solicitations by related organization(s)	ıızatıon(s)			# X	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	(s)			t X	
 Sharing of paid employees with related organization(s) 				۶ X	
 Beimbursement paid to related organization(s) for expenses 				- q-	
				19	×
					Þ
 Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s) 				+ 1	∢ ×
If the answer to any of the above is "Yes," see the instructions for	ho must complete the	s line, including covered i	information on who must complete this line, including covered relationships and transaction thresholds		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	olved	
(1) BALTIMORE OFFICE OF PROMOTION & THE ARTS	0	431,287.	COST		
(2) BALTIMORE OFFICE OF PROMOTION & THE ARTS	W	295,925.	COST		
(3)					
(4)					
(5)					
(9)					
932163 09-10-19	41		Schedule R (Form 990) 2019	≀ (Form 9	90) 2019

Page 4

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) (b) ' (c) (d)	(q)	(2)	1	(a)	(£)	(6)	3	3	9	3
Name, address, and EIN of entity	Primary activity	흫	Predominant income (related, unrelated, excluded from tax under	Are all partners sec. 501(c)(3) orgs?	Share of total	Share of end-of-year	Dispropor tonate allocations?	Dispropor Code V-UBI General or Percentage tonde amount in box 20 managing ownership allocations? of Schedille K-1 partner?	General o managing partner?	Percentage ownership
		country)	sections 512-514) Yes	Yes No	Income	assets	Yes No	(Form 1065)	Yes No	
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Schedule R	(Form 990) 2019	BALTIMORE	FESTIVAL	OF THE	ARTS,	INC.	52-1559145 Page
Part VII	(Form 990) 2019 Supplemental Info	rmation					
	Provide additional inform	ation for responses to	a allestions on Sc	hedule R. See	instructions		
	Trovide additional imogni	action for responses to	questions on oc	rica <u>dic 11 Occ</u>	ii isti dottoi is	<u></u>	
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