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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Internal Revenue Service Information about Form 990 and its instructions is at www.irs.gov/form990

A For the 2013 calendar year, or tax year beginning JUL 1, 2013 and ending JÜN 30, 2014

В	Check applica	if C Name of organization	D Employer identi	ication number
Ĺ	⊐Add	UNIVERSITY OF BALTIMORE FOUNDATION, INC.		
F	Nar Cha	ne Television de la companya della companya della companya de la companya della c		7036780
F	Initi		/suite E Telephone numb	***************************************
Ē	Terr	ein 1120 N. CHADIEC CODEEM		-837-6148
Ē		ended	G Gross receipts \$	11,894,411
Ē		lica- DATESTMODE MD 91901	H(a) is this a group	
	pen	F Name and address of principal officer: STUART J. SILBERG	for subordinate	
		SAME AS C ABOVE	H(b) Are all subordinates	·····- —
1	Tax∙e	xempt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	· · ·	ı list. (see instructions)
J	Webs	ite: ► WWW.UBFOUNDATION.ORG	H(c) Group exemption	•
K	Form		Year of formation: 1969	M State of legal domicile; MI
Р	<u>art l</u>			
ø	1	Briefly describe the organization's mission or most significant activities: ESTABLI	SHED TO RAISE,	MANAGE
Governance	1	FUNDS, AND PROVIDE FINANCIAL SUPPORT TO THE	***************************************	
er	2	Check this box if the organization discontinued its operations or disposed of	į.	
<u>ွ</u>	3		3	33
≪	"	Number of independent voting members of the governing body (Part VI, line 1b)		33
tie	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	F .	250
Activities &	6	Total number of volunteers (estimate if necessary)		250
Ă		Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34		0.
_	 	Net directed business taxable income nom Form 950-1, line 54	Prior Year	Current Year
40	8	Contributions and grants (Part VIII, line 1h)		3,790,004.
Revenue	9	Program service revenue (Part VIII, line 2g)	E2 E72	44,617.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,737,052.
α	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,307.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,576,980.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	233,620.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		339,347.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 314,948.	148,343.	150,423.
ă				
ш	17	Other expenses (Part IX, column (A), lines 11a·11d, 11f·24e)	19,382,528.	4,592,894.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	19,859,739.	5,316,284.
<u></u>	19	Revenue less expenses. Subtract line 18 from line 12	-9,872,148.	1,260,696.
Net Assets or Fund Balances		T. () () () () () ()	Beginning of Current Year	End of Year
SSE	20	Total assets (Part X, line 16)	61,927,711.	64,480,989.
let /	21 22	Total flabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20	3,336,012.	870,257. 63,610,732.
Pa	rt II	Signature Block	1 30,391,099.	03,010,732.
		allies of perjury, I declare that I have examined this return, including accompanying schedules and st	atements, and to the hest of my	knowledge and helief it is
		ct, and complete. Declaration of preparer tother than efficer) is based on all information of which pre		ranomoago ana aciloi, a la
			2-1	P-15
Sigr	1	Signature of officer / ///	Date	13000
Her		STUART J//SILBERG, BOARD CHAIRMAN		
		Type or print national title		***************************************
_		Print/Type preparer's name SUSAN KELLER Preparer's signature	Date Check L	PTIN
Paid			Self-employe	
Prep		Firm's name ELLIN & TUCKER, CHARTERED	Firm's EIN ▶	52-0959934
Use	Unly	Firm's address 400 EAST PRATT ST. SUITE 200) MAG EDAE
11.	11	BALTIMORE, MD 21202	Phone no. 4 1 (0-727-5735
iviay	me l	RS discuss this return with the preparer shown above? (see instructions)		X Yes No

UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Form 990 (2013) Page 3 Part IV | Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A Х Is the organization required to complete Schedule B, Schedule of Contributors? 2 X 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 Х 3 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 Х 4 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 X 5 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 X 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 X 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III X 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Х Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V Х 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI X 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Х 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII X 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX X 11d e Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part X X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Х 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII X 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business. investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Х 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

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Х

X

Х

X

X

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Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I

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

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

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

complete Schedule G, Part III

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

foreign organization? If "Yes," complete Schedule F, Parts II and IV

Form 990 (2013) UNIVERSITY OF BALT
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	<u> </u>
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			l
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a	24a]	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		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			1
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			٠,,
	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):			Х
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		X
b	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		- 11
·	C. L. L. L. L. L. L. L. C. L. Was S. annual de Calendaria f. David C.	28c		х
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			
	contributions? If "Yes," complete Schedule M	30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete]]		
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		., l	
	Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	^	
Đ	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	- [X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
-	If "Yes," complete Schedule R, Part V, line 2	36	ļ	Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
			<u>በበ</u> ብ //	

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Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	i 📉		
b		Ī		
c	5117	1		ĺ
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		ı	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required		İ	
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting		1	
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:		l	
	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	Ī		
11	Section 501(c)(12) organizations. Enter:		l	
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against]	
	amounts due or received from them.)		1	
	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			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	1		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			V
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>X</u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	000 ::	2040.
		Form !	990 (2	:U13\

Form 990 (2013) UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Page 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 in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			,			X
Sec	tion A. Governing Body and Management						
			.			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		33			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent	1b		33			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other			ĺ	
	officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	t supervision				
	of officers, directors, or trustees, or key employees to a management company or other person?			ı	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9				4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as			·····	5		X
6	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 a			····	-		
	more members of the governing body?			ł	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockho	lders. or	····			
	persons other than the governing body?		-		7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by the	following:	····			
а	The governing body?		-	1	8a	х	
	Each committee with authority to act on behalf of the governing body?		***************************************		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea			···· -			
Ŭ	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			1	9	1	Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re					L	
	The state of the control of account to the state of the s	701140	0000.)			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			Г	10a	103	X
	If "Yes," did the organization have written policies and procedures governing the activities of such ch			-	104		
-	and branches to ensure their operations are consistent with the organization's exempt purposes?],	10b		
119	Has the organization provided a complete copy of this Form 990 to all members of its governing bod				11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	y Deloi	e ming the form	' ·	ı ıa		
	Did the apparituation become sufficient and the first of interest and in the first 10			1.	12a	$_{\rm X}$	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				\neg	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yo			····	12b		
						$_{\rm X}$	
	***************************************				12c	X	
	Did the organization have a written whistleblower policy?				13	$\frac{x}{x}$	
	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 approva	i by inc	iependent			-	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					w l	
	The organization's CEO, Executive Director, or top management official				15a	X	
	Other officers or key employees of the organization			[1	l5b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	_			ļ	1	
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements.	nent wil	ih a				37
	taxable entity during the year?			<u> </u> 1	6a		X
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	•	•		- 1		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization	's		- 1	İ	
	exempt status with respect to such arrangements?			1	6b		
	ion 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 (or 1024 if applicable), 990, and 990-T	(Sectio	n 501(c)(3)s on	ily) ava	ailabi	Э	
	for public inspection. Indicate how you made these available. Check all that apply.						
	X Own website X Another's website X Upon request Other (explain i		•				
	Describe in Schedule O whether (and if so, how), the organization made its governing documents, cor	ıflict of	interest policy	, and f	inand	cial	
	statements available to the public during the tax year.						
	State the name, physical address, and telephone number of the person who possesses the books an	d recor	ds of the organ	nizatio	n: ►		
	JENNIFER SCHWARTZ - 410-837-6148						
	1130 N. CHARLES STREET, BALTIMORE, MD 21201						

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

Form 990 (2013)

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 ourrent highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(di	o not e x, unk licer a	Pos check	C) sitios more erson	n s than	one th an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below (line)	Individual	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ANTHONY S. FUGETT DIRECTOR	1.00	x						0.	0.	0.
(2) BARRY M. CHASEN	1.00		\vdash		_		Ħ			
DIRECTOR		X			İ		l	0.	0.	0.
(3) CAROLYN H. THALER	1.00			Г						
DIRECTOR	1 4 60	X	<u> </u>		_	<u> </u>	<u> </u>	0.	0.	0.
(4) CLIFTON L. BROWN, JR DIRECTOR	1.00	x						0.	0.	0.
(5) CYNTHIA H. JONES	1.00				 		┢			<u> </u>
DIRECTOR		х						0.	0.	0.
(6) DANIEL KLEIN	1.00	Ť	Н	Н			\vdash			
DIRECTOR		Х				l		0.	0.	0.
(7) DAVID L. THURSTON	1.00									
DIRECTOR		X						0.	0.	0.
(8) DONALD C. FRY	1.00									
DIRECTOR		X						0.	0.	0.
(9) G. LAWRENCE FRANKLIN	1.00									
DIRECTOR		X						0.	0.	0.
(10) GEORGE J. NEMPHOS	1.00			-				_	- "	
DIRECTOR	1 4 66	Х	_	_				0.	0.	<u> </u>
(11) HARRY C. STORM DIRECTOR	1.00			ŀ					_	
(12) HOLLY SADEGHIAN	1.00	Х				\dashv		0.	0.	0.
PAST SECRETARY	1.00	х		\mathbf{x}				0.	0.	•
(13) JAMES P NOLAN	5.00	<u> </u>	\dashv	弁		-	\dashv		U • 1	0.
VICE-CHAIR	3.00	х		x				0.	0.	0.
(14) JANA HOWARD CAREY	1.00				一	\dashv	_			<u></u>
DIRECTOR		x					ı	0.	0.	0.
(15) JEFFREY C. GLOCK	1.00	-	\dashv	寸		_	\dashv			<u>··</u>
EX-OFFICIO		х		- 1	J		Ì	0.	0.	0.
(16) JOAN WORTHINGTON	1.00		_	┪	一	_	7			
DIRECTOR		X						0.	0.	0.
(17) JOHN F. RIPLEY	1.00		T	T			7			
DIRECTOR 332007 10-29-13		X						0.	0.	0.

Form 990 (2013) UNIVERSI	TY OF B	AL'	TI	MO:	RE	F	QU.	NDATION, IN	23-7	036	780	Pa	age 8
Part VII Section A. Officers, Directors, True	stees, Key En	plo	yees	, an	d H	ighe	est (Compensated Employ	ees (continued)				
(A)	(B)	1		- (C)			(D)	(E)		(F)		
Name and title	Average	1 (46	not c	Pos heck	itior more	ገ e than	one	Reportable	Reportable		Estimated		
	hours per	1 000	Position (do not check more than one box, unless person is both a officer and a director/trustee				រោ ខា	compensation	compensatio		ount c	əf	
	Week	⊢	_	T	345011	U.U.	1	from	from related		1	other	
	(list any hours for	director]	l	the	organizations			pensat	
	related	2				謀	ı	organization	(W-2/1099-MIS	iC)		om the	
	organizations	1	ğ		9 1	Ē		(W-2/1099-MISC)				ınizatlı	
	below	1 2	Cons	١.	Į į	25 8						l relate nizatio	
	line)	individual trustee or	institutional trustee	8	Xey employee	Highest compensated employee	ė.		-		Uiga.	IIEGIIC	/113
(18) KENNETH R. SHUTTS	1.00	Ī	=	Ť	~	1	 -						
DIRECTOR		Х						1 0.		0.			0.
(19) L. CONTENT MCLAUGHLIN	1.00		Г			T	Т						
DIRECTOR		X						0.		0.	l		0.
(20) LAURENCE M. KATZ	1.00						┢						
DIRECTOR		х				ł		l 0.		0.	l		0.
(21) MARIANNE S. HELLAUER	1.00					-	-		<u> </u>	••	 		
DIRECTOR	- 100	X		l				l 0.		0.	ĺ		0.
(22) MARIE VAN DEUSEN	5.00	<u> </u>		_	-	-		- "		٠.	-		<u> </u>
SECRETARY	3.00	x		x						_			^
	1 00	4	Н	Δ			_	0.		0.			0.
(23) MICHAEL L. CURRY	1.00									_	İ		_
DIRECTOR	4 00	X						0.	ļ	0.			0.
(24) PAUL C. LATCHFORD	1.00							_					
DIRECTOR		X						0.		0.	l		0.
(25) PETER G. ANGELOS	1.00												
DIRECTOR		X						0.		0.			0.
(26) PETER PINKARD	1.00									\neg			
DIRECTOR		X		ŀ		i		0.		0.			0.
1b Sub-total							•	0.		0.	0		
c Total from continuation sheets to Part Vi	Section A	****	******		*****	 I		100,016.		0.	13	,90	
d Total (add lines 1b and 1c)								100,016.		ŏ.l		.90	
2 Total number of individuals (including but no	at limited to th	08A	lieto	d ak		\ wh	O FA					720	<u> </u>
compensation from the organization				- u	,010	,		Octivati motorii patricol	hood of reportable	,			1
		-									$\overline{}$	/es	No.
3 Did the organization list any former officer,	director or tru	oioo	. ka		nla		ar h	ishaai aammaasata		г	- '	-	-
line 1s? If "Yes " complete Schedule . I for su	unottor, or tru ich individual	3100	, ne	A Att	ipio	y 60,	O! II	iiBiiest combensated e	mpioyee on	- [x
iine 1a? If "Yes," complete Schedule J for so		•••••			,,,,,		-41-			···- }	3	+	<u> </u>
	ni oi reportasi	9 00	mpe	nsa o	tton	ano	otn	er compensation from	tne organization	- 1			32
and related organizations greater than \$150	,0007 // Tes,	con	npie:	10 \$	cne	aute	J 10	or such individual	************************	····	4	— -	<u> </u>
5 Did any person listed on line 1a receive or a	ccrue compen	satio	on m	om a	any	unre	elate	ed organization or indivi	dual for services		ł		
rendered to the organization? If "Yes," comp	olete Schedule	J fo	r su	ch p	ersc	on		*****************************	***************************************		5		<u>x</u>
Section B. Independent Contractors													
Complete this table for your five highest con	npensated ind	epe	nder	nt co	ntra	icto	rs th	at received more than	\$100,000 of comp	ensa	ition fro	m	
the organization. Report compensation for ti	he calendar ye	ar e	ndin	g w	th o	r wi	inin	the organization's tax	/ear.				
(A)							Т	(B)			(C)		
Name and business a	address	МО	NE				丄	Description of s	ervices	Co	mpens	ation	
							L						
								-					_
-							T						_
							T						
							\top	·- ·					—
							1		İ				
2 Total number of independent contractors (in	cluding but no	t lim	ited	to t	hose	e list	ed s	above) who received m	ore than				***********
\$100,000 of compensation from the organize					0		•						
SEE PART VII, SECTION		IN	UA'	ΓI	ÔŃ	Ŝ	HE	ETS			om 99	0 (20	12\

Form	990
	1211

Form 990 UNIVERS	TAY OF B	AL	TI.	MQ.	RE	F	OU.	NDATION, INC	<u>23-703</u>	6780
Part VII Section A. Officers, Directors, T	rustees, Key E	mpl	loye	9 5 , E	ind i	Higi	10St	Compensated Emplo	yees (continued)	
(A) Name and title	(B) Average hours	Average Position hours (check all that apply				1		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individua	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W·2/1099·MISC)	from related organizations (W·2/1099·MiSC)	other compensation from the organization and related organization
(27) R. THOMAS CRAWFORD TREASURER	5.00	x		x				0.	0.	
(28) RENEE B. ADES DIRECTOR	1.00	X						0.	0.	C
(29) RICHARD A. SNBLLINGER DIRECTOR	1.00	x						0.	0.	(
(30) RICHARD DAVISON DIRECTOR	1.00	х						0.	0.	(
(31) ROBERT C. RUSSEL DIRECTOR	1.00	x						0.	0.	C
(32) ROBERT L. BOGOMOLNY EX-OFFICIO	1.00	x						0.	0.	<u> </u>
(33) SAYRA WELLS MEYERHOFF DIRECTOR	1.00	X								(
(34) STUART J. SILBERG	20.00	X		х	1		\dashv	0.	0.	0
(35) STUART M. GOLDBERG	1.00							0.	0.	0
(36) SYDNEY COMITZ	1.00	X		\dashv	-		\dashv	0.	0.	0
37) VERNON H.C. WRIGHT	5.00	X		-	\dashv	-	┪	0.	0.	0
EXEC VICE-PRESIDENT (38) JENNIFER SCHWARTZ	40.00	Х		X	\dashv	_	\dashv	0.	0.	0
PO 39) THERESA SILANSKIS	40.00		\dashv	X	-	_		100,016.	0.	13,901
EXECUTIVE DIRECTOR, EX-OFFICIO		_	_	X	\dashv	\dashv		0.	0.	0
		_	_	_		\dashv			<u>.</u>	
		4	_	\downarrow	4	_	\dashv			
		\downarrow	\downarrow		_	_	\bot			
		\perp	_	\perp		_	_			
otal to Part VII, Section A, line 1c								100,016.		13,901

Pa	ırt V	III Statement of Reve	nue			•		
_		Check if Schedule O con	tains a respons	e or note to any lin			•••••	<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts	1 :	a Federated campaigns	1a		13 0 000			
Contributions, Gifts, Grants and Other Similar Amounts	1	b Membership dues]		
A, E		c Fundraising events						
유	۱ ۱	d Related organizations	1d					
ns,)	 Government grants (contribute 		601,788.]		
e të	1	f All other contributions, gifts, gran	1 1	ĺ				
뗠美		similar amounts not included abo		3,188,216.		ĺ		
ort od (ŧ	g Noncash contributions included in lines		216,691.				
<u>0 8</u>	1	h Total. Add lines 1a-1f			3,790,004.			
				Business Code	• • • • •			4
Program Service Revenue	2 8	·		900099	44,617,	44,617.		
	k	<u> </u>						
	(
	C							
	•							
	Ť	All other program service reve			44 617			1
-		Total. Add lines 2a-2f			44,617.			
	3	Investment income (including			866 060			966 060
		other similar amounts)			866,069,			866,069.
	4	Income from investment of ta		·			-11-1111	
	5	Royalties	1	1				
	6 -	Cross routs	(i) Real	(ii) Personal				
ļ	6 a							
		Less: rental expenses		<u> </u>				
		Rental income or (loss)	*					
		Net rental income or (loss) Gross amount from sales of	(i) Securities	(ii) Other				
[, a	assets other than inventory	7,188,414					
	h	Less: cost or other basis	- ,,	1				
		and sales expenses	5,317,431.	1				
1	c	Gain or (loss)						
ĺ	ď	Net gain or (loss)			1,870,983.			1,870,983.
ايو		Gross income from fundraising			, , ,			_,,
	-	including \$	of	İ				
S		contributions reported on line	 -	1]			
بت		Part IV, line 18	•	1	j			
Other Revenu	b	Less: direct expenses						
١		Net income or (loss) from fund						
	9 a	Gross income from gaming ac	tivities. See					
		Part IV, line 19	a					
1	b	Less: direct expenses						
	c	Net income or (loss) from gam	ing activities					
	10 a	Gross sales of inventory, less i	returns					
-		and allowances	a					
İ	b	Less: cost of goods sold	b					
L	С	Net income or (loss) from sales	s of inventory	>				1
		Miscellaneous Revenue	•	Business Code				
	11 a	MISCELLANEOUS		900099	5,307.	5,307.		
	b							
	C							
	d	All other revenue						
I	е	Total. Add lines 11a-11d		▶ Ĺ	5,307.			
t	40	Total rayanya Con instructions		. .	6 576 000	40 024	^	* 0 000 000

Form 990 (2013)

Sec	tion 501(c)(3) and 501(c)(4) organizations must con	pplete all columns. All oti	ner organizations must co	omplete column (A).	
	Check if Schedule O contains a respo	nse or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	• • • • • • • • • • • • • • • • • • • •	222 620	222 620		
_	organizations in the United States. See Part IV, line 21	233,620.	233,620.		
2	Grants and other assistance to individuals in				
_	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
5	Benefits paid to or for members				
9	Compensation of current officers, directors, trustees, and key employees	102,100.	10,210.	91,890.	
6	Compensation not included above, to disqualified	102,1001	10,210.	71,070.	
٥	persons (as defined under section 4958(f)(1)) and				
	normana denorihad in esetian (OEO/a)(O)(D)		İ		
7	Other salaries and wages	164,202.	16,420.	147,782.	
8	Pension plan accruals and contributions (include	10172021	20,120.	217,7021	
•	section 401(k) and 403(b) employer contributions)	19,046.	1.905	17.141	
9	Other employee benefits	32,057.	1,905. 3,206.	17,141. 28,851.	
10	Payroli taxes	21,942.	2,194.	19,748.	
11	Fees for services (non-employees):				
	' ' ' '				
	Legal	20,067.		20,067.	
С	Accounting	30,460.		30,460.	
d	Lobbying			·	
e	Professional fundraising services. See Part IV, line 17	150,423.			150,423
f	Investment management fees	191,939.		191,939.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	404,461.	347,660.	54,684.	2,117. 573.
12	Advertising and promotion	21,772.	21,199.		573
13	Office expenses	50,831.	39,172.	11,659.	
14	Information technology	82,529.	16,183.	16,485.	49,861
15	Royalties				
16	Occupancy				
17	Travel	10,967.	8,748.	1,327.	892.
18	Payments of travel or entertainment expenses	Ì			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	377,454.	362,268.	8,038.	7,148.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	12,765.		12,765.	
	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	LAW BUILDING EXPENSE	1,354,661.	1,354,661.	0.	0.
b	STUDENT/FACULTY SUPPORT	1,004,182.	1,004,182.	0.	0.
c	OTHER PROGRAM SUPPORT	774,896.	774,896.	0.	0.
ď	MISCELLANEOUS	255,910.	117,154.	34,822.	103,934.
	All other expenses				
	Total functional expenses. Add lines 1 through 24e	5,316,284.	4,313,678.	687,658.	314,948.
*****	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined	1			
	educational campaign and fundraising solicitation.			ļ	
	Check here if following SOP 98-2 (ASC 958-720)				
22010	10-29-13				Form 990 (2013)

Form 990 (2013)
Part X Balance Sheet

F	art X	Balance Sneet					······································
		Check if Schedule O contains a response or no	e to any line in this Part X		· · · · · · · · · · · · · · · · · · ·		L
					(A) Beginning of year		(B) End of year
-	1	Cash ⋅ non-interest-bearing			10,502,713.	1	9,471,629.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net		7,886,934.	3	6,952,141.	
	4	Accounts receivable, net			4		
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensa	ited employees. Complete	9		1	
	İ	Part II of Schedule L				5	
	6	Loans and other receivables from other disquali	ied persons (as defined u	nder			
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contrib	outing			
		employers and sponsoring organizations of sect	ion 501(c)(9) voluntary				
ş	ļ	employees' beneficiary organizations (see instr).	Complete Part II of Sch L			6	
Assets	7	Notes and loans receivable, net			1,020,607.	7	0.
∢	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges	***************************************		19,500.	9	21,071.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		0.			
	b	Less: accumulated depreciation		0.	0.	10c	0.
	11	Investments - publicly traded securities			29,966,013.	11	33,807,703.
	12	Investments - other securities. See Part IV, line 1			12,092,660.	12	13,774,161.
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets		120 003	14	151 001	
	15	Other assets. See Part IV, line 11			439,284.	15	454,284.
	16	Total assets. Add lines 1 through 15 (must equa			61,927,711.	16	64,480,989.
	17	Accounts payable and accrued expenses			2,884,697.	17	487,570.
	18	Grants payable		451,315.	18	202 607	
	19	Deferred revenue			401,310.	19	382,687.
	20	Tax-exempt bond liabilities		·····-		20	
۲۵.	21	Escrow or custodial account liability. Complete F		-		21	
Liabilities	22	Loans and other payables to current and former key employees, highest compensated employees					
iid	ĺ						
Ë	23	Complete Part II of Schedule L. Secured mortgages and notes payable to unrelated	and third parties	<u> </u>		22	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay		····· -		-24	
	~~	parties, and other liabilities not included on lines		,		1	
;		Schedule D		- 1		25	
	26	Total liabilities. Add lines 17 through 25		·····	3,336,012.	26	870,257.
		Organizations that follow SFAS 117 (ASC 958)		nd			
Ş.		complete lines 27 through 29, and lines 33 and					
nc.	27	Unrestricted net assets			5,491,629.	27	5,074,322.
ala	28	Temporarily restricted net assets	***************************************		17,678,340.	28	22,437,657.
E E	29		·····		35,421,730.	29	36,098,753.
Ē		Organizations that do not follow SFAS 117 (AS					
ō		and complete lines 30 through 34.				1	
ets	30	Capital stock or trust principal, or current funds	******************************			30	
Ass		Paid-in or capital surplus, or land, building, or equ				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated inc	ome, or other funds	[32	
z	33	Total net assets or fund balances		[58,591,699.	33	63,610,732.
	34	Total liabilities and net assets/fund balances			61,927,711.	34	64,480,989.
							Form 990 (2013)

Form **990** (2013)

Act and OMB Circular A-133?

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

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

Х

SCHEDULE A

(Form 990 or 990-EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

Employer identification number

			SITY OF BALT							23-	-703	6780)
Part I	Reasor	for Public Cha	ı rity Status (All organi	izations m	ust compl	ete this pa	rt.) See in	structions					
The organ	nization is not	a private foundation	n because it is: (For lines	1 through	11, check	conly one	box.)						
1 🖳	A church, c	onvention of church	es, or association of chu	rches des	cribed in s	ection 17	0(b)(1)(A)(i).					
2 🖳	A school de	scribed in section	170(b)(1)(A)(ii). (Attach S	chedule E.	.)								
з 🖳	A hospital c	r a cooperative hos	pital service organization	described	in sectio	n 170(b)(1)(A)(iii).						
4 🔲	A medical re	esearch organizatior	n operated in conjunction	with a ho	spital des	cribed in s	ection 17	0(b)(1)(A)(iii). Ente	r the	hospita	al's nar	ne,
	city, and sta	ate:											
5 🗀	An organiza	tion operated for the	e benefit of a college or u	iniversity o	owned or c	perated b	y a goverr	nmental ur	nit descri	bed	in		
	section 17	0(b){1)(A){iv). (Comp	lete Part II.)										
6 🔲	A federal, st	ate, or local governi	ment or governmental un	it describe	ed in secti	on 170(b)	(1)(A)(v).						
7 X	An organiza	tion that normally re	ceives a substantial part	of its sup	port from a	a governm	ental unit	or from th	e denera	l put	olic des	cribed	in
		(b)(1)(A)(vi). (Compi		•	•	ū			Ū	•			
8 🔲	A communit	y trust described in	section 170(b)(1)(A)(vi).	(Complete	e Part II.)								
9 🔲			ceives: (1) more than 33			from conti	ributions, i	membersh	ip fees, a	and e	aross re	eceipts	from
			unctions - subject to cert						-		-		
			taxable income (less sec										
		509(a)(2). (Complet			,		,	-,,				,	
10			perated exclusively to te	est for pub	lic safety.	See secti	on 509(a)(4).					
11			pperated exclusively for t	=	=			•	rv out the	e pu	rooses	of one	or
			rations described in secti						•		•		
			g organization and compl				, ,		(, (- , -				
	а 🔲 Туре		· · · · · · · · · · · · · · · · · · ·	ype III - Fu	_		1	d 🔲 Tyr	e III - No	n-fu	nctiona ¹	llv inter	arated
е 🔲			at the organization is not			_							
			than one or more publicl										
f			itten determination from						. (-)(-)			- (-71-7-	
		rganization, check t			-								
g	Since Augus	t 17, 2006, has the	organization accepted ar									•••••	
			directly controls, either al			-		• •		i,		Yes	No
			supported organization?								11g(i)	1 -	
			n described in (i) above?								11g(ii)		
			a person described in (i) o								11g(iii)		
h			about the supported or			••••••	***************************************			[
		-	••		. ,								
(i) Name	of supported	(ii) EIN	(iii) Type of organization	(iv) Is the c	organization	(v) Did yo	u notify the	(vi) Is organizații	the	(vii)) Amount	of mor	netary
• •	nization	(11) 2.11	(described on lines 1-9	in col. (i) lis	sted in your	organizat	ion in col.	organization	on in col. ed in the	``''' <i>'</i>		port	iciary
-				governing	document?	(i) of you	r support?	(i) organiz U.S	.?	l			
			(see instructions))	Yes	No	Yes	No	Yes	No				
				į				Í		l			
			<u> </u>							İ			
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otal								İ					

332021 09-25-13

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 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			416			
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not					i	
	include any "unusual grants.")	11169244.	2636713.	4334158.	8654694.	3790004.	30584813.
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						
	fumished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	11169244.	2636713.	4334158.	8654694.	3790004.	30584813.
5	The portion of total contributions						
	by each person (other than a	ļ					
	governmental unit or publicly						
	supported organization) included			Ï			
	on line 1 that exceeds 2% of the			•			
	amount shown on line 11,	-					
	column (f)						8763678.
6	Public support. Subtract line 5 from line 4.						21821135.
Se	ction B. Total Support						
Cale	indar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	11169244.	2636713.	4334158.	8654694.	3790004.	30584813.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	372,067.	492,818.	619,227.	652,793.	866,069.	3002974.
9	Net income from unrelated business		1				
	activities, whether or not the			Í			
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital		Í	1			
	assets (Explain in Part IV.)	142,846.	113,023.	81,098.	58,360.	49,924.	<u>445,251.</u>
11	Total support. Add lines 7 through 10						34033038.
12	Gross receipts from related activities,	etc. (see instruction	ons)	*****		12	
13	First five years. If the Form 990 is for	the organization's	first, second, third	l, fourth, or fifth ta	x year as a sectior	1 501(c)(3)	
_	organization, check this box and stop	here					<u></u>
	tion C. Computation of Publ		 				<u> </u>
	Public support percentage for 2013 (I					14	64.12 %
	Public support percentage from 2012				_	15	64.67 %
	33 1/3% support test - 2013. If the o						
	stop here. The organization qualifies						
	33 1/3% support test - 2012. If the o	*				•	
	and stop here. The organization quali						
	10% -facts-and-circumstances test						
	and if the organization meets the "fac-						
	meets the "facts-and-circumstances"						
	10% -facts-and-circumstances test						0% or
	more, and if the organization meets th						, , , , , ,
	organization meets the "facts-and-circ						
18	Private foundation, If the organization	n did not check a b	ox on line 13, 16a	, 16b, 17a, or 17b,			
					Sched	lule A (Form 990 d	or 990-EZ) 2013

Schedule A (Form 990 or 990 EZ) 2013 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	•	Í				ĺ
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-					-	
	formed, or facilities furnished in	!	ĺ			-	
	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-				1		
	iness under section 513	1	ĺ				
4	Tax revenues levied for the organ-						
7	ization's benefit and either paid to		ļ				
	or expended on its behalf						
	The value of services or facilities		I				
9							
	furnished by a governmental unit to						
_	the organization without charge				1		
	Total. Add lines 1 through 5						
7 <i>a</i>	Amounts included on lines 1, 2, and						
•	3 received from disqualified persons						
17	Amounts included on fines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support (Subtractline 7c from line 6.)						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 📂	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties				1		
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses	ı					
	acquired after June 30, 1975						
C	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital						
13	assets (Explain in Part IV.)						-
	First five years. If the Form 990 is for	the organization's	first second third	fourth or fifth to	I av vear as a sectio	n 501/e)/3\ organiz:	ation
		-	•		-		·
Sec	tion C. Computation of Publi	c Support Per	rcentage	***************************************			<u></u>
	Public support percentage for 2013 (li			oluma (fi)		15	%
	Public support percentage from 2012					16	
	tion D. Computation of Inves					101	70
	Investment income percentage for 20			a 13 column (fl)		17	%
	Investment income percentage for 20 Investment income percentage from 2			9 13, Column (1))	i i	18	
	33 1/3% support tests - 2013. If the		. ,				
							101101
	more than 33 1/3%, check this box ar						
	33 1/3% support tests - 2012. If the	•					<u> </u>
	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization	ı ala not check a b	oox on line 14, 19a	, or 19b, check th		edulo A (Form 990	

16340212 132974 08009.000

Also complete this part for any additional information. (See instructions).	
 	, ,

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

D.	UNIVERSITY OF BALTIMORE FOUNDATION, INC.	23-7036780
Pě	organizations Maintaining Donor Advised Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.	BAP de and aller and aller
-		(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fur	
	are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confe	
Do	impermissible private benefit? In I Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV	
_		, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education) Preservation of an historica	
	Protection of natural habitat	istoric structure
_	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a c	onservation easement on the last
	day of the tax year.	I I I I I I I I I I I I I I I I I I I
		Held at the End of the Tax Year
а	***************************************	2a
b	• • • • • • • • • • • • • • • • • • • •	2b
c	1 /	2c
Ci	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	_ ,
_	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	nization during the tax
4	year ▶ Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
3	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during t	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(E	
•		
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense state.	ment and halance cheet and
•	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization.	•
	conservation easements.	gatilization s accounting to:
Pai	t III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement at	nd balance sheet works of art.
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	-
	the text of the footnote to its financial statements that describes these items.	p, p,
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and b	alance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public set	
	relating to these items:	the special and to the same and a second
	(i) Revenues included in 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 treasures, or other similar assets for financial gain,	
-	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	• -
а	Revenues included in Form 990, Part VIII, line 1	▶ \$
	Assets included in Form 990, Part X	
		· · · · · · · · · · · · · · · · · · ·

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

Schedule D (Form 990) 2013

		SITY OF BAL							
Pa	art III Organizations Maintaining (
3	Using the organization's acquisition, access	sion, and other recor	ds, check any of t	ne following that are	a sigr	nificant	use of its	collectio	n items
	(check all that apply):								
а		•		xchange programs					
b		•	Other						
C	3								
4	Provide a description of the organization's c						ose in Pa	rt XIII.	
5	During the year, did the organization solicit of						_	_	
	to be sold to raise funds rather than to be m							_l Yes	X No
Pa	rt IV Escrow and Custodial Arran		ete if the organiza	tion answered "Yes	' to Fo	rm 990), Part IV,	line 9, or	
	reported an amount on Form 990, Pa								
1a	Is the organization an agent, trustee, custod		-					٦	 1
	on Form 990, Part X?			•••••			L	_ Yes	∟ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing table:						
	Particular technical							Amount	
	Beginning balance					1c			
	Additions during the year					1d			
•	Distributions during the year					1e 1f			
) 29	Ending balance Did the organization include an amount on F	orm 000 Part V line				<u> </u>	<u> </u>	Yes	□ No
	If "Yes," explain the arrangement in Part XIII.			on provided in Part				J 162	
	rt V Endowment Funds. Complete i								
		(a) Current year	(b) Prior year	(c) Two years bac	_	Three	rears back	(a) Four	years back
1a	Beginning of year balance	37,802,093.					04,245.		287,968.
	Contributions	822,294.					48,437		992,177.
c		5,691,333.					00,470.		940,372.
d					1		, ·	,	
	Other expenditures for facilities				1				
•	and programs	1,584,450.	933,154	938,61	2.	9	89,673.		616,272.
f	Administrative expenses				\top				
g		42,731,270.	37,802,093	33,862,61	7.	34.7	63,479.	30,	604,245.
2	Provide the estimated percentage of the curr			1			. ,		
а	Board designated or quasi-endowment	22.69	%	(),					
b	Permanent endowment ► 77.31	%							
С	Temporarily restricted endowment ▶	·00 %							
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%.							
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are held	and administered fo	r the	organiz	ation		
	by:							[·	Yes No
	(i) unrelated organizations							3a(i)	X
	(ii) related organizations							3a(ii)	X
b	If "Yes" to 3a(ii), are the related organizations	listed as required o	n Schedule R?	**********				3b	
4	Describe in Part XIII the intended uses of the		wment funds.						
Par	t VI Land, Buildings, and Equipm								
****	Complete if the organization answered	d "Yes" to Form 990	Part IV, line 11a.	See Form 990, Part	X, line	10.			
	Description of property	(a) Cost or of	1 ' '	, , ,		mulate	d	(d) Book	value
		basis (investr	nent) basis	(other)	depred	ciation			
	Land								
	Buildings								
	Leasehold improvements								
	Equipment								_
	Other Add lines to through to (Column (d) must ex			10(-))					0.
		DIST MORN QUIL DAR	x nouman (G) lino				_		8.1

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013

^{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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

	dule D (Form 990) 2013 UNIVERSITY OF BALTIMO			23-	7036780 Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial		ith Revenue per	Retur	n.
_	Complete if the organization answered "Yes" to Form 990, Part i	THE STATE OF THE S		1.	10,161,795.
1 2	Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12:	s		-	10,101,793
	Net unrealized gains on investments	2a	3,758,337		
	Donated services and use of facilities		57.50,557	7	
	Recoveries of prior year grants			1	
	Other (Describe in Part XIII.)		18,417	_	
	Add lines 2a through 2d			2e	3,776,754.
3	Subtract line 2e from line 1	*********			6,385,041.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		•••••		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	191,939	.	
	Other (Describe in Part XIII.)		• • • • • • • • • • • • • • • • • • • •	7	
	Add lines 4a and 4b			1 4c	191,939.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	9 12.)		5	6,576,980.
Par	t XII Reconciliation of Expenses per Audited Financia	l Statements W	/ith Expenses pe	r Retu	
	Complete if the organization answered "Yes" to Form 990, Part IV		•		
1	Total expenses and losses per audited financial statements			1	5,170,155.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		***************************************		
а	Donated services and use of facilities	2a			
	Prior year adjustments		····	7 /	
	Other losses			7	
	Other (Describe in Part XIII.)		58,311	.	
e	Add lines 2a through 2d			2e	58,311.
3	Subtract line 2e from line 1		•••••	3	5,111,844.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	191,939		
b	Other (Describe in Part XIII.)	4b	12,501	<u>.</u>] [
	Add lines 4a and 4b			4c	204,440.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 18.)		5	5,316,284.
	XIII Supplemental Information.				
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a			4; Part	X, line 2; Part XI,
lines 2	d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid	de any additional inf	ormation.		
DAD	T III, LINE 4:				
FAN	I III, DING 4:	0.1000			
EXP	LANATION: ART AND HISTORICAL COLLECT	TONG THOLE	TERRARY	COLI	T.ECTTONG
	diamitton, incl ind hiptoricing conduct	TOND INCLE	DE HIDIVILLE	CODI	JECT TOND,
POS	TERS, PRINTS AND OTHER ARTIFACTS.				
- 00	ZERO, IRLINIO IIIO OIIIIR IIRLIIIIOIO.				
					
PAR	r V, LINE 4:				

EXP	LANATION: THE FOUNDATION'S PERMANENT	ENDOWMENT	CONSISTS C	F V	ARIOUS
DON	OR RESTRICTED FUNDS ESTABLISHED TO P	ROVIDE A S	OURCE OF IN	ICOME	FOR
ONG	DING PROGRAMS, AS WELL AS SCHOLARSHI	PS AND PRO	FESSORSHIPS	١.	
PAR	ΓX, LINE 2:				
	ANAMAN MUD ADALISTED TO THE TOTAL TOTAL				
EXP.	LANATION: THE ORGANIZATION FOLLOWS TI	HE PROVISI	ONS OF ACCC	UNTI	NG FOR
יים אדי	ERTAINTY IN INCOME TAXES UNDER THE IN	ለነጣር መመጣጣለ	ማለ ከተፈለጥ ያ	មាក្រ	
01NC. 32054 19-25-13		NCOME TAKE	P TOPIC OF		.I. B (F
19-25-13		26		Schedu	ule D (Form 990) 2013

Schedule D (Form 990) 2013 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Page 5 Part XIII Supplemental Information (continued)
CODIFICATION. THE CODIFICATION REQUIRES THE EVALUATION OF TAX POSITIONS,
WHICH INCLUDE MAINTAINING THEIR TAX-EXEMPT STATUS AND THE TAXABILITY OF
ANY UNRELATED BUSINESS INCOME, AND DOES NOT ALLOW RECOGNITION OF TAX
POSITIONS WHICH DO NOT MEET A MORE-LIKELY-THAN-NOT THRESHOLD OF BEING
SUSTAINED BY THE APPLICABLE TAX AUTHORITY. MANAGEMENT DOES NOT BELIEVE IT
HAS TAKEN ANY TAX POSITIONS THAT WOULD NOT MEET THIS THRESHOLD.
THE ORGANIZATION FILES FEDERAL AND STATE INFORMATION RETURNS AND ARE NO
LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY MAJOR TAX AUTHORITIES FOR
YEARS PRIOR TO 2010.
PART XI, LINE 2D - OTHER ADJUSTMENTS:
REVENUE FROM UNIVERSITY PROPERTIES, INC. 30,918.
BAD DEBT EXPENSE -12,501.
TOTAL TO SCHEDULE D, PART XI, LINE 2D 18,417.
PART XII, LINE 2D - OTHER ADJUSTMENTS:
EXPENSES FROM UNIVERSITY PROPERTIES, INC. 58,311.
PART XII, LINE 4B - OTHER ADJUSTMENTS:
BAD DEBT EXPENSE 12,501.
PART XI, LINE 2D
EXPLANATION: REVENUE OF \$30,918 FROM UNIVERSITY PROPERTIES, INC., AN
AFFILIATE, IS INCLUDED IN THE AUDITED FINANCIAL STATEMENTS, BUT NOT
INCLUDED IN THE FORM 990. BAD DEBTS OF \$(12,501) IS INCLUDED IN REVENUE
IN THE AUDITED FINANCIAL STATEMENTS, BUT AS AN EXPENSE IN THE FORM 990.

Schedule D (Form 990) 2013 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Page 5 Part XIII Supplemental Information (continued)
PART XII, LINE 2D
EXPLANATION: EXPENSES OF \$58,311 FROM UNIVERSITY PROPERTIES, INC., AN
AFFILIATE, ARE INCLUDED IN THE AUDITED FINANCIAL STATEMENTS, BUT NOT
INCLUDED IN THE FORM 990.
PART XII, LINE 4B
EXPLANATION: BAD DEBTS OF \$12,501 IS INCLUDED IN REVENUE IN THE AUDITED
FINANCIAL STATEMENTS, BUT AS AN EXPENSE IN THE FORM 990.
FORM 990, PART XI, LINE 10
EXPLANATION: THE AUDITED FINANCIAL STATEMENTS WERE PREPARED ON A
CONSOLIDATED BASIS. THE CONSOLIDATED NET INCOME(LOSS) EQUALS \$4,991,640.
THE NET INCOME FOR THIS ENTITY ON AN UNCONSOLIDATED BASIS IS \$5,019,033.
THE DIFFERENCE IS (\$27,393), OR THE EXCESS FOR UNIVERSITY PROPERTIES,
INC., THE CONSOLIDATED ENTITY.
·

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number

UNIVERSITY OF I	BALTIMORE	FOUNDAT	TION, INC.		23-70367	30
			tside the United States. Compl	ete if the organ		
Form 990, Part			,			
 For grantmakers. Doe 	s the organization	n maintain reco	ds to substantiate the amount of its gr	ants and other		. —
the grantees' eligibility	for the grants or	assistance, and	the selection criteria used to award the	e grants or ass	istance?	Yes L No
 For grantmakers. Designation United States. 	cribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and o	ther assistance out	side the
3 Activities per Region. (1	he following Par	t I, line 3 table c	an be duplicated if additional space is	needed.)		
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	is a prod describe	vity listed in (d) gram service, e specific type se(s) in region	(f) Total expenditures for and investments in region
CENTRAL AMERICA AND THE CARIBBEAN			INVESTMENTS ONLY			7,076,953.
						,,,
		!				
		:				
						B 000 050
3 a Sub-total	0	0				7,076,953.
b Total from continuation sheets to Part I c Totals (add lines 3a	o	0				0.
and 3h)	o	0				7 076 953.

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

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013

Part II

23-7036780

Page 2

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

(i) Method of valuation (book, FMV, appraisal, other)	- -				1904		
(h) Description of non-cash assistance						The state of the s	
(g) Amount of non-cash assistance						xempt by	A
(f) Manner of cash disbursement						recognized as tax-e)	
(e) Amount of cash grant						foreign country,	
(d) Purpose of grant						Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	
(c) Region						Enter total number of recipient organizations listed above that are rethe IRS, or for which the grantee or counsel has provided a section	r entities
(b) IRS code section and EIN (if applicable)			e de la companya de l			recipient organization he grantee or counse	other organizations o
1 (a) Name of organization						2 Enter total number of r the IRS, or for which th	s Enter total number of other organizations or entities

Schedule F (Form 990) 2013

UNIVERSITY OF BALTIMORE FOUNDATION, INC.

Schedule F (Form 990) 2013

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

Page 3

23-7036780

(h) Method of valuation (book, FMV,	appraisal, other)					Schedule F (Form 990) 2013
(g) Description of non-cash assistance	, T. C. C. C. C. C. C. C. C. C. C. C. C. C.		And the state of t			Schedul
(f) Amount of non-cash assistance						
(e) Manner of cash disbursement						
(d) Amount of cash grant				AND THE RESIDENCE OF TH		
c) Number of recipients						
(b) Region						
(a) Type of grant or assistance (b) Region (control of the control						

	Totalgiri onlis		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	X Yes	□ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2013

Schedule F	(Form 990) 2013 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Page 9
Part V	Supplemental Information
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of
	investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c)
	(estimated number of recipients), as applicable. Also complete this part to provide any additional information.
н	

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or 15 to

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

➤ Attach to Form 990 or Form 990-EZ.

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form 990

OMB No. 1545-0047

2013

Open To Public Inspection

Name of the organization		7.011.011.		000010 10 01 1010 11 11 1	Employ	er identification number
	SITY OF BALTIMORE					036780
Part I Fundraising Activities required to complete this pa	 Complete if the organization answ rt. 	ered "\	Yes" to	o Form 990, Part IV,	line 17. Form 9	90·EZ filers are not
Indicate whether the organization rate in X Mail solicitations X Internet and email solicitation X Phone solicitations X In-person solicitations X In-person solicitations	e X Solicite f Solicite g Specia	ition of ition of I fundra	non-g gover alsing	overnment grants nment grants events	stees or	
key employees listed in Form 990, F b If "Yes," list the ten highest paid inc compensated at least \$5,000 by the				-		Yes No is to be
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundi have c or con contrib	Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	(v) Amount p to (or retained fundraise listed in col.	organization
RUFFALO CODY - 65 KIRKWOOD NORTH ROAD SW, CEDAR RAPIDS,	TELEMARKETING	Yes	No X	250,506.	139,	257. 111,249.
				,		
·					.	
	100.00					
Total	***************************************		•	250,506.	139,2	257, 111,249.
 List all states in which the organization or licensing. 	n is registered or licensed to solicit o	contrib	utions	or has been notified	l it is exempt fro	om registration
MD, VA						

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

SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2013

Schedule G (Form 990 or 990 EZ) 2013 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Page 2 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col. (a) through col. (c)) (event type) (event type) (total number) 1 Gross receipts 2 Less: Contributions 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs 7 Food and beverages 8 Entertainment Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d)

TD:	art III	Gaming. Complete if the organization				
1.6		\$15,000 on Form 990-EZ, line 6a.	answered res to rom:	1990, Fait IV, inle 19, or	reported more trian	
Revenue		,	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
Rev	1 Gro	ss revenue				
ses	2 Cas	h prizes				
Expen	3 Nor	cash prizes				
Direct Expenses	4 Ren	t/facility costs				
	5 Oth	er direct expenses			·	
	6 Volu	inteer labor	Yes% No	Yes% No	☐ Yes % ☐ No	
	7 Dire	ct expense summary. Add lines 2 through	5 in column (d)		>	
	8 Net	gaming income summary. Subtract line 7	from line 1, column (d)		>	
а	is the or	e state(s) in which the organization operat ganization licensed to operate gaming ac explain:	tivities in each of these s	states?		☐ Yes ☐ No
_						
		y of the organization's gaming licenses re explain:			/ear?	Yes No

332082 09-12-13

Schedule G (Form 990 or 990-EZ) 2013

Schedule G (Form 990 or 990 EZ) 2013 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-	-7036780 Page 3
11 Does the organization operate gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity operated in:	
a The organization's facility	. 13a %
b An outside facility	13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:	
Name	
Address >	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount of gaming revenue retained by the third party ▶\$	
c If "Yes," enter name and address of the third party:	
Name ►	
Address ►	
16 Gaming manager information:	
Name	
Gaming manager compensation > \$	
Description of services provided >	
Director/officer Employee Independent contractor	
 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year 	Yes No
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III,	lines 9, 9b, 10b, 15b,
15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).	
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISE	RS:
(I) NAME OF FUNDRAISER: RUFFALO CODY	
(I) ADDRESS OF FUNDRAISER:	
65 KIRKWOOD NORTH ROAD SW, CEDAR RAPIDS, IA 52404	

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations,

2013	Open to Public	Increation
-		

ջ □ Employer identification number 23-7036780 FORGIVENESS OF LOAN - A COMMUNITY CONTRIBUTION. OMB No. 1545-0047 (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 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 (g) Description of non-cash assistance Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. (f) Method of valuation (book, FMV, appraisal, Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States other) 0 (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▼ Attach to Form 990. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. INC. (d) Amount of cash grant 233,620 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table UNIVERSITY OF BALTIMORE FOUNDATION, (c) IRC section if applicable LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501(C)(3) Enter total number of other organizations listed in the line 1 table criteria used to award the grants or assistance? 52-6080460 General Information on Grants and Assistance (b) EIN 1 (a) Name and address of organization AVENUE, NO. or government 110 WEST MOUNT ROYAL LYRIC FOUNDATION INC BALTIMORE, MD 21201 Name of the organization Department of the Treasury Internal Revenue Service Part Part

Schedule I (Form 990) (2013)

23-7036780 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. INC. UNIVERSITY OF BALTIMORE FOUNDATION, Schedule I (Form 990) (2013) Part

Page 2

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (d) Amount of non-cash assistance EXPLANATION: AS NOTED THIS GRANT WAS LOAN FORGIVENESS. (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance PART I, LINE 2:

Schedule I (Form 990) (2013)

332102 10-29-13

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www irs gov/form990. Inspection | Employer identification number

UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780

Pa	rt I Types of Property				· · · · · · · · · · · · · · · · · · ·	•	
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of d noncash contrib	etermining	
1	Art - Works of art	Х	3		APPRAISAL		
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded	X	23	201,691.	COMPARABLE	SALES	5
10	Securities - Closely held stock						
11	Securities · Partnership, LLC, or						
	trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution · Other					-	
15	Real estate · Residential						
16	Real estate - Commercial				11-118-11818		
17	Real estate - Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ()						
26	Other ()						
27	Other ()				***************************************		
28	Other ()						
29	Number of Forms 8283 received by the organization appropriate appropriate and Form 826	_		1 1			
	for which the organization completed Form 828	o, Part IV, L	onee Acknowledg	ement 29		- Iv-	Т
30.5	During the year, did the organization receive by	, contribution	anu proportu ran	orted in Dort I lines 1 00 H	at it may sat bald for	Ye	s No
ova	at least three years from the date of the initial of						-
						200	x
h	If "Yes," describe the arrangement in Part II.	•••••••	• • • • • • • • • • • • • • • • • • • •			30a	+*-
	Does the organization have a gift acceptance p	olicy that re	quires the review o	if any non-standard contribu	tions?	31 X	
	Does the organization hire or use third parties of				tions:	31 22	
🕶	contributions?	-		• •		32a	x
b	If "Yes," describe in Part II.			************************************	***************************************	V_u	+
	If the organization did not report an amount in	column (c) fo	r a type of propert	y for which column (a) is che	cked.		
	describe in Part II.	Cyra	21 - Franks	(17) 01.(1			

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

Schedule M (Form 990) (2013)

Schedule M	(Form 990) (2013)	UNIVERSITY	OF	BALTIMORE	FOUNDAT	PION,	INC.	23-7036780	Page 2
Part II	Supplemental is reporting in Part this part for any ac	I Information. Prot I I, column (b), the num dditional information.	vide th nber c	ne information require f contributions, the	red by Part I, lir number of item	nes 30b, 3 is receive	32b, and 33 d, or a com	, and whether the organi bination of both. Also co	zation mplete
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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.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

UNIVERSITY OF BALTIMORE FOUNDATION, INC. Employer identification number 23-7036780

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: THE AUDIT AND EXECUTIVE COMMITTEES OF THE BOARD ARE AUTHORIZED TO REVIEW AND APPROVE THE FORM 990 PRIOR TO FILING. A COPY OF THE RETURN

IS MADE AVAILABLE TO ALL BOARD MEMBERS.

FORM 990, PART VI, SECTION B, LINE 12C:

EXPLANATION: THE CONFLICT OF INTEREST FORMS ARE REQUIRED TO BE COMPLETED AT THE BEGINNING OF THE FISCAL YEAR.

FORM 990, PART VI, SECTION B, LINE 15:

EXPLANATION: THE COMPENSATION OF THE CFO WAS DETERMINED BASED ON MARKET

FACTORS AND IN CONSULTATION WITH AN INDEPENDENT RECRUITING FIRM. THE

EXECUTIVE DIRECTOR IS PAID BY THE UNIVERSITY AND AS SUCH IS SUBJECT TO

UNIVERSITY'S COMPENSATION STRUCTURE.

FORM 990, PART VI, SECTION C, LINE 19:

EXPLANATION: THESE DOCUMENTS ARE AVAILABLE UPON REQUEST.

PART XI, LINE 2C

EXPLANATION: THE AUDIT PROCESS WAS UNCHANGED FROM THE CURRENT YEAR,

IS OVERSEEN BY THE AUDIT COMMITTEE.

SCHEDULE R, PART II:

EXPLANATION: PURCHASES, LEASES, AND HOLDS TITLE TO BOTH REAL AND

PERSONAL PROPERTY FOR THE BENEFIT OF THE FOUNDATION.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332211 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

Name of the organization	UNIVERSITY	OF	BALTIMORE	FOUNDATION,	INC.	Employer identification number 23-7036780
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	<u>.</u>					
					III. T. C. L. H. S. III.	
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SCHEDULE R (Form 990)

Department of the Teasury Internal Revenue Service
Name of the organization

Part

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
 ▶ Attach to Form 990.

▶Information about Schedule R (Form 990) and its instructions is at www irs gov/form990.

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

UNIVERSITY OF BALTIMORE FOUNDATION, INC.

Inspection

Employer identification number 23-7036780

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets		(f) Direct controlling entity	
			7				
					The state of the s		
			7.7	The state of the s			
		The state of the s					
Part II Identification of Related Tax-Exempt Organizations Complete organizations during the tax year.		if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt	Part IV, line 34 be	cause it had one o	r more related tax-exer	mpt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	Section 512(b)(13) controlled entity?	(b)(13) ed
UNIVERSITY PROPERTIES INC - 52-1040390	1000	- Annual Control of the Control of t		((0)(0))		Yes	ŝ
000000000000000000000000000000000000000	O BILLIAND GRA				<u>!</u>		i
TITUTES INC - 23-7439340		CINTER I VICES	20T(C) (Z)		N/A		×
	SEE SCHEDULE O	MARYLAND	501(0)(3)	13	N/A		×
	ALL THE PARTY OF T						

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

332161 09-12-13 LHA

Schedule R (Form 990) 2013

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INC. Schedule R (Form 990) 2013 UNIVERSITY OF BALTIMORE FOUNDATION,

Page 2 23-7036780

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. Part III

(a)	(q)	(၁)	(p)	(ə)	Œ	(6)	Ē	(1)	8	8
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or toreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets	Disproportionate allocations?	n box	General or managing partner?	General or Percentage managing ownership
		country)		sections 512-514)			Yes No	K-1 (Form 1065)	Yes No	
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Part IV 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.	ganizations Taxable a	is a Corpo	ration or Trust Cor	nplete if the organization	on answered "Yes'	on Form 990, Pa	rt IV, line 34	because it had on	le or mo	e related

corporation or trust during the tax year.

1	_ ਕੁੰਨ	ŝ	İ		1					1				9
e	Section 512(b)(13) controlled entity?	Yes			1		Ė							100
Ê	eg.c	λ												Schedille B (Ecrm 990) 2012
	Share of end-of-year													School
(£)	Share of total income						The state of the s							
(e)	Type of entity (C corp, S corp, or trust)				- Application of the second									
(Q)	Direct controlling Type of entity S (C corp, S corp, or trust)													
(2)	ರ	country)				·							••	44
(q)	Primary activity													
(a)	Name, address, and EIN of related organization	The state of the s		American Company of the Company of t	White the second	TANKS.	Address of the second of the s	and the second s	And the second s		And the second s			332162 09-12-13

Schedule R (Form 990) 2013

23-7036780

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 Darts II III at IV of this appealable.					L
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Boats II NO	ns with one or more re	lated organizations listed	50 C C C C C C C C C C C C C C C C C C C	۶	Yes No
a Receipt of (i) interest (ii) annuities (iii) rovalties or (iv) rent from a controlled entity.				,	Þ
b Giff grant or capital coptribl those to related occanization(s)	***************************************		***************************************	Та	4
	***************************************		***************************************	9	×
wit, glant, or capital contribution from related organization(s)	***************************************			2	M
d Loans or loan guarantees to or for related organization(s)				7	×
				2 ,	
· · · · · · · · · · · · · · · · · · ·	***************************************		***************************************	<u>Т</u> е	4
Children of the second property of the second secon					
	***************************************			+	×
g Sale of assets to related organization(s)				Ç	X
h Purchase of assets from related organization(s)			***************************************	P. J	Þ
			***************************************	= ;	4 >
i long of formal History and the management of the state	***************************************	***************************************	***************************************	F	4
Lease of actities, equipment, or other assets to related organization(s)			***************************************	Ē	×
k Lease of facilities, equipment or other assets from related organization(s)					
	***************************************		***************************************	¥	ধ
	anization(s)			=	×
m Performance of services or membership or fundraising solicitations by related organization(s)	Janization(s)			1m	×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ttion(s)			d d	╀
 Sharing of paid employees with related organization(s) 				╀	
			***************************************	╀	
p Reimbursement paid to related organization(s) for expenses				Ę	×
q Reimbursement baid by related organization(s) for expenses				1	; >
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Q.	***************************************	***************************************		+	+
	14 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	1 1 1		15	4
i tie diswei to dily of	wno must complete tr	is 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	nvolved	
(1) UNIVERSITY PROPERTIES, INC.	Z	• 0			. د برېزې استان
(2) UNIVERSITY INSTITUTES, INC.	R	10,000.	CASH		
(3)			office and the state of the sta		
(4)			And the second s		
(5)					
(9)			and a property of the control of the		
332163 09-12-13	45		Schedule	Schedule R (Form 990) 2013	90) 2013

Page 4

INC. Schedule R (Form 990) 2013 UNIVERSITY OF BALTIMORE FOUNDATION,

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.

(K)	Per Per Owl	oN sa														1107.0.23		 						<u></u>	Schedule R (Form 990) 2013
(3)	Code V-UBI Germount in box 20 m of Schedule K-1	(Form 1065) Y																							Schedule R
Œ	ج ″ ري اع	Yes No																		 					
(6)	Share of end-of-year	assets																							
(μ)		ıncome																							
(e)	partners sec. 501(c)(3) ords.?	Yes No										 									+				-
(q)	Predominant income predated, unrelated, excluded from tax	under section 512-514)																							
(0)	ë ë	country)																				•			
(q)	Primary activity																								
(e)	Name, address, and EIN of entity	The second secon		A CONTRACTOR OF THE CONTRACTOR		described to the second		All the state of t	The state of the s	And the second s	Application of the state of the		Marie Commission of the Commis	and the second s			Additional Control of the Control of	 The state of the s					· Marie and the second		

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Provide addition	tal Information	sponses to que	estions on Sche	dule R (see inst	ructions).	· · · · · · · · · · · · · · · · · · ·	
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