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Form	3	9	U

Department of the Treasury Internal Revenue Service

EXTENDED TO MAY 15, 2020

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Pr section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundation Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047

-			areet miller mil	actorn.				
<u>A</u>	For the	2018 calendar year, or tax year beginning $ { m JUL}1,2018$ and ending	g JUN 3	30, 2019				
В	Check if applicabl	C Name of organization	D Em	ployer identifi	cation number			
	Addre	UNIVERSITY OF BALTIMORE FOUNDATION, INC.						
	Name chang	0		23-7	036780			
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/	suite E Tele	ephone numbe	r			
	Final return	1130 N. CHARLES STREET	410-837-6148					
Ē	termin ated			s receipts \$	13,300,262.			
H	Ireturn Applic			this a group re				
	Ition pendir	SAME AS C ABOVE		or subordinates	? Yes X No			
Ť.	Taxex	empt status: 🗶 501(c)(3) 🛄 501(c) ()◀ (insert no.) 🛄 4947(a)(1) or 📃			list. (see instructions)			
		e: > WWW.UBFOUNDATION.ORG		roup exemptio				
		organization: 🗶 Corporation 🔄 Trust 🔄 Association 🔄 Other 🍉 🛛 L			State of legal domicile; MD			
P	art I	Summary						
e	1	Briefly describe the organization's mission or most significant activities: ESTABLIS	SHED TC	RAISE,	MANAGE			
S D C		FUNDS, AND PROVIDE FINANCIAL SUPPORT TO THE	UNIVER	SITY OF	BALTIMORE.			
ЖŰ	2	Check this box 🕨 🛄 if the organization discontinued its operations or disposed of	more than 25	5% of its net as	sets.			
Ň	3	Number of voting members of the governing body (Part VI, line 1a)		3	22			
0 8	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	22			
es	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)		5	4			
viti	6	Total number of volunteers (estimate if necessary)		6	28			
Activities & Governance	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.			
	b	Net unrelated business taxable income from Form 990-T, line 38			0.			
				r Year	Current Year			
ବ	8	Contributions and grants (Part VIII, line 1h)	3,3	46,825.	3,038,492.			
enu	9	Program service revenue (Part VIII, line 2g)		74,151.	178,091.			
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	3,1	47,697.	2,482,753.			
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,6	68,673.	5,699,336.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
		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)		49,606.	288,957.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		85,483.	65,440.			
ğ	p.	Total fundraising expenses (Part IX, column (D), line 25)						
	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		07,084.	4,167,591.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		42,173.	4,521,988.			
- 76	19	Revenue less expenses. Subtract line 18 from line 12		26,500.	1,177,348.			
S Or			Beginning o	of Current Year	End of Year			
Fund Balan	20	Fotal assets (Part X, line 16)	69,1	16,061.	70,178,800.			
DI H	21	Fotal liabilities (Part X, line 26)		85,536.	1,116,830.			
	22 1	Net assets or fund balances. Subtract line 21 from line 20	67,4	30,525.	69,061,970.			
_		Signature Block						
		ties of perjury, I declare that I have examined this return, including accompanying schedules and sta			knowledge and belief, it is			
rue,	, correct	, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any k	nowledge.				
		Signature of officer J. Selloure		12/13/1	<u> </u>			
Sig		STUART J. SILBERG, EXECUTIVE VICE PRESIDENT		Date				
Her	e	Type or print name and title						
_	-		Date		1 PTIN			
0		Print/Type preparer's name	12/11/19	Check	00/90/05			
Paid		SUSAN KELLER SUSAN KELLER		self-employed				
		Firm's name ELLIN & TUCKER, CHARTERED		Firm's EIN 🕨	52-0959934			
056	Only	Firm's address 400 EAST PRATT ST. SUITE 200		DI 444				
		BALTIMORE, MD 21202		Phone no.41()-727-5735			

May the IRS discuss this return with the preparer shown above? (see instructions)

	990 (2018) UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Page
Pa	rt III Statement of Program Service Accomplishments
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission:
	TO RAISE AND MANAGE FUNDS AND TO PROVIDE FINANCIAL SUPPORT TO THE
	UNIVERSITY OF BALTIMORE. THE FOUNDATION PROVIDES LEADERSHIP, GUIDANCE,
	AND SUPPORT TO THE UNIVERSITY'S ADMINISTRATION IN ADVANCING THE
	MISSION AND VISION OF THE UNIVERSITY.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ? Yes X No
-	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 3,642,903. including grants of \$) (Revenue \$ 178,091.
	ALL PROGRAM SERVICE EXPENSES AND DISTRIBUTIONS SUPPORT THE EDUCATIONAL
	ACTIVITIES OF THE UNIVERSITY OF BALTIMORE. THE FOUNDATION SUPPORTED
	INITIATIVES OF THE UNIVERSITY SUCH AS SCHOLARSHIPS, FACULTY SUPPORT,
	AND COMMUNITY OUTREACH PROGRAMS.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
44	Other program convisor (Describe in Schedule O.)
40	Other program services (Describe in Schedule O.)
4e	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ► 3,642,903.
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Form 990 (2018) UNIVERSITY OF BALTIMORE FOUNDATION, INC. Part IV Checklist of Required Schedules 23-7036780 Page **3**

Fai	Checklist of hequiled Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> " <i>Yes</i> ," <i>complete Schedule C, Part I</i>	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			x
_	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i>	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	x	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			x
	Part VI	11a		
D	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? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i>	11b	x	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VIII</i>	11c		x
Ь	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			
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		x	
10	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		x
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	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i>	14b	x	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any		-	
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i>	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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 Form 990 (2018)
 UNIVERSITY OF BALTIMORE FOUNDATION, INC.

 Part IV
 Checklist of Required Schedules (continued)
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22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No						
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X						
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			x						
	Schedule J									
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								
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d								
5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit									
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X						
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete</i>									
	Schedule L, Part I	25b		X						
6	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or									
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		x						
7	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial									
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member									
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X						
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):			37						
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	<u> </u>	X						
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	<u> </u>	X						
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,									
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X						
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X						
D	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		x						
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x						
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete Schedule N, Part II</i>	32		x						
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations									
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x						
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and									
	Part V, line 1	34	x							
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X							
	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						
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?									
	If "Yes," complete Schedule R, Part V, line 2	36		X						
57	Did the organization conduct more than 5% of its activities through an entity that is not a related organization									
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X						
8	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 t V Statements Regarding Other IRS Filings and Tax Compliance	38	X							
Par	Check if Schedule O contains a response or note to any line in this Part V		<u></u>							
Par			Yes	No						
_										
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable									
1a b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	-								
1a b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	-								
1a b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	1c	X 1990							

Form 990 (2018)	UNIVERSITY	OF	BALTIMORE	FOUNDATION,	INC.	23-7036780	Page 5
Part V Statements	Regarding Other I	RS F	ilings and Tax (Compliance (continue	ed)		

			Vac	Na							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		Yes	No							
	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	Х								
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)										
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х							
	b If "Yes," has it filed a Form 990 T for this year? If "No" to line 3b, provide an explanation in Schedule O										
	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)?										
b	If "Yes," enter the name of the foreign country:										
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		37							
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X X							
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u> </u>							
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c									
ъа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6.		х							
h	any contributions that were not tax deductible as charitable contributions?	6a		<u></u>							
a		6b									
7	Organizations that may receive deductible contributions under section 170(c).	00									
'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		х							
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b									
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	1.0									
	to file Form 8282?	7c		х							
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d										
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х							
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?										
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?										
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?										
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the										
_	sponsoring organization have excess business holdings at any time during the year?	8									
9	Sponsoring organizations maintaining donor advised funds.	-									
a L	Did the sponsoring organization make any taxable distributions under section 4966?	9a									
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b									
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12										
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b										
11	Section 501(c)(12) organizations. Enter:										
	Gross income from members or shareholders										
	Gross income from other sources (Do not net amounts due or paid to other sources against										
	amounts due or received from them.)										
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a									
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b										
13	Section 501(c)(29) qualified nonprofit health insurance issuers.										
а	Is the organization licensed to issue qualified health plans in more than one state?	13a									
	Note. See the instructions for additional information the organization must report on Schedule O.										
b	Enter the amount of reserves the organization is required to maintain by the states in which the										
	organization is licensed to issue qualified health plans 13b										
	Enter the amount of reserves on hand			x							
	Did the organization receive any payments for indoor tanning services during the tax year?	14a									
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b									
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15		x							
	excess parachute payment(s) during the year?	15									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х							
	If "Yes," complete Form 4720, Schedule O.										

Form **990** (2018)

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Form 9	990 ((2018)
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UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780

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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	<u></u>			
Sec	tion A. Governing Body and Management				
		2		Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	22			
	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 0.	22			
	Enter the number of voting members included in line 1a, above, who are independent 1b		4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other				
_	officer, director, trustee, or key employee?		2		
3	Did the organization delegate control over management duties customarily performed by or under the direct super				
	of officers, directors, or trustees, or key employees to a management company or other person?		3		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		\vdash
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		
6	Did the organization have members or stockholders?		6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or				
	more members of the governing body?		7a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, o	r			
	persons other than the governing body?		7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	ig:			
а	The governing body?		8a	X	
b	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 reached at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)				-
				Yes	L
0a	Did the organization have local chapters, branches, or affiliates?		10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliat	es,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		12b	X	Γ
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe				T
	in Schedule O how this was done		12c	X	
3	Did the organization have a written whistleblower policy?		13	Х	t
4	Did the organization have a written document retention and destruction policy?		14	X	t
15	Did the process for determining compensation of the following persons include a review and approval by independ				t
-	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		15a	x	L
	Other officers or key employees of the organization		15b	x	t
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		100		t
62	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a				
u	taxable entity during the year?		16a		Ľ
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participa		100		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's				
			16b		
	exempt status with respect to such arrangements?				-
	List the states with which a copy of this Form 990 is required to be filed ►MD, CO, MA, MI, NJ, NY, OH	WA CZ	ΔΤ	СП	-
17					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section of the section of the se	on 501(c)(3	s only) avai	ar
	for public inspection. Indicate how you made these available. Check all that apply.	N			
	X Own website Another's website Other (explain in Schedule C				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interes	it policy, an	d finan	cial	
_	statements available to the public during the tax year.				
20	State the name, address, and telephone number of the person who possesses the organization's books and record	ds ▶			
	JENNIFER SCHWARTZ - 410-837-6148				
	1130 N. CHARLES STREET, BALTIMORE, MD 21201				_
32006	6 12-31-18 SEE SCHEDULE O FOR FULL LIST OF STATES		Form	1 990	(2
• •	6		• -		
01	125 132974 08009.000 2018.05000 UNIVERSITY OF BALTIMOR	RE FOU	080	09	

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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)	(B)	(C)					(D)	(E)	(F)	
Name and Title	Average			Position check more than one				Reportable	Reportable	Estimated
	hours per	box	, unles	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week		cer an	dad	irecto	or/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC)	from the
	related organizations	ustee	trust		ee	upens		(W-2/1099-MISC)		organization and related
	below	ual tr	ional		vold	t con /ee				organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) BARNETT BROOKS	1.00	_		0	×	1 0				
DIRECTOR		х						0.	Ο.	0.
(2) CARMINE DALESSANDRO	1.00									
DIRECTOR		Х						0.	0.	0.
(3) CLIFTON L. BROWN, JR	1.00									
DIRECTOR		Х						0.	0.	0.
(4) CYNTHIA H. JONES	1.00									
DIRECTOR		Х						0.	0.	0.
(5) DONALD C. FRY	1.00									
DIRECTOR		Х						0.	0.	0.
(6) HARRY C. STORM	1.00								0	0
DIRECTOR	1 00	X						0.	0.	0.
(7) JAMES P. NOLAN	1.00	37						0	0	0
DIRECTOR	1 00	X						0.	0.	0.
(8) JOAN WORTHINGTON	1.00	v		v				0	0	0
SECRETARY	1.00	Х		Х				0.	0.	0.
(9) KURT L. SCHMOKE	1.00	x						0.	0.	0.
EX-OFFICIO (10) MARIANNE S HELLAUER	1.00	^						0.	0.	0.
(10) MARIANNE S HELLAUER DIRECTOR	1.00	x						0.	0.	0.
(11) MARIE VAN DEUSEN	1.00	~						0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(12) MICHAEL L. CURRY	1.00									
DIRECTOR		х						0.	0.	0.
(13) NINA YUDELL	5.00									
TREASURER		х		х				0.	Ο.	0.
(14) PETER PINKARD	1.00									
DIRECTOR		Х						0.	0.	0.
(15) PIERCE FLANIGAN	1.00									
DIRECTOR		Х						0.	0.	0.
(16) R. THOMAS CRAWFORD	10.00								_	
CHAIR		х		Х				0.	0.	0.
(17) RACHEL T MCGUCKIAN	1.00									-
DIRECTOR		Х						0.	0.	0.
832007 12-31-18						_				Form 990 (2018)

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Page 7

	TY OF BA	AL	LIJ	40I	RE	FC	DU	NDATION, INC	. 23-7	036	780	Page	e 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A) Name and title	Name and title Average hours per week			Pos heck ss pe	more erson	ר than is bot or/trus	h an	(D) Reportable compensation from the	(E) Reportable compensatio from related	n I	Est amo	(F) imated ount of other	
	hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	organization (W-2/1099-MIS		fro orga and	pensatio om the anizatior related nization	n I
(18) RICHARD DAVISON DIRECTOR	1.00	x						0.		0.		1	ο.
(19) SAYRA MEYERHOFF DIRECTOR	1.00	x						0.		0.			0.
(20) STUART J. SILBERG	10.00	x		x				0.		0.			0.
EXECUTIVE VICE-PRESIDENT (21) STUART M. GOLDBERG	1.00												
DIRECTOR (22) TRACEY A. DUBREE	1.00	X						0.		0.			0.
DIRECTOR (23) JENNIFER SCHWARTZ	40.00	X						0.		0.			0.
CFO (24) THERESA SILANSKIS	40.00			x				112,677.		0.	17	7,338	8.
EXECUTIVE DIRECTOR, EX-OFF				x				0.		0.			0.
1b Sub-total c Total from continuation sheets to Part V								112,677.		0.	,		
d Total (add lines 1b and 1c)								112,677.		0.	17	7,338	
2 Total number of individuals (including but i compensation from the organization	not limited to th	nose	liste	ed al	bov	e) wł	10 r	eceived more than \$100),000 of reportab	le			1
3 Did the organization list any former officer	director or tri	ister	o ke	ov er	nnlo	nvee	or	highest compensated e	mplovee on			Yes N	No
line 1a? If "Yes," complete Schedule J for	such individual										3	2	X
4 For any individual listed on line 1a, is the s and related organizations greater than \$15			•					•	•		4		x
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," con	-				-	-		-			5		Х
Section B. Independent Contractors 1 Complete this table for your five highest co	mpensated in	dona	ande	ont c	ont	racto	ore t	that received more than	\$100.000 of corr	none	ation fr	rom	
the organization. Report compensation for								n the organization's tax		ipene			
(A) Name and business	address	NC	ONE	3				(B) Description of s	services	С	(C) compen		
							_						
2 Total number of independent contractors		not lii	mite	d to		~	stec	d above) who received n	nore than				
\$100,000 of compensation from the organ	ization 🕨					0					Form 9	990 (20)	18)

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Form **990** (2018)

					BALTIMO	RE FOUNDAT	ION, INC.	23-7036	780 Page 9
Pa	rt V	/	Statement of Rever	nue					
			Check if Schedule O cont	ains a response	or note to any lin		(5)		
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts	1	а	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues						
S, G			Fundraising events						
Gift lar			Related organizations						
imi imi			Government grants (contribut		105,077.				
r S		f	All other contributions, gifts, gran	ts, and					
ibu			similar amounts not included abo	ve 1f	2,933,415.				
ontr of O		g	Noncash contributions included in lines	1a-1f: \$					
arC		h	Total. Add lines 1a-1f		►	3,038,492.			
					Business Code				
e	2	а	PROGRAM INCOME		900099	178,091.	178,091.		
Program Service Revenue		b							
n S ent		С							
Jrar Rev		d							
roc		е							
<u>с</u>			All other program service reve						
			Total. Add lines 2a-2f			178,091.			
	3		Investment income (including			1 010 757			1 010 757
			other similar amounts)			1,010,757.			1,010,757.
	4		Income from investment of ta		F				
	5		Royalties						
	6	_	Cross rents	(i) Real	(ii) Personal				
	0		Gross rents Less: rental expenses		<u> </u>				
			Rental income or (loss)						
			N	L					
	7		Gross amount from sales of	(i) Securities	(ii) Other				
	•		assets other than inventory	9,072,922.					
		b	Less: cost or other basis						
			and sales expenses	7,600,926.					
		с	Gain or (loss)						
			Net gain or (loss)		►	1,471,996.			1,471,996.
Other Revenue	8	а	Gross income from fundraisin including \$	•					
eve			contributions reported on line						
r R			Part IV, line 18						
the		b	Less: direct expenses						
0			Net income or (loss) from fund		>				
	9		Gross income from gaming ac						
			Part IV, line 19	аа					
		b	Less: direct expenses	b					
		С	Net income or (loss) from gam	ning activities	►				
	10	а	Gross sales of inventory, less	returns					
			and allowances						
			Less: cost of goods sold						
		С	Net income or (loss) from sale						
			Miscellaneous Revenu	e	Business Code				
	11				<u> </u>				
		b							
		с С			├				
			All other revenue						
	12		Total. Add lines 11a-11d Total revenue. See instructions			5,699,336.	178,091.	0	2,482,753.
83200						2,000,000.	1,0,001.	0	Form 990 (2018

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	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons		-		
	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	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	116,378.		116,378.	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	122,559.	7,390.	115,169.	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	14,712.		14,712.	
9	Other employee benefits	17,726.		17,726.	
0	Payroll taxes	17,582.	643.	16,939.	
1 1 a	Fees for services (non-employees): Management				
b		9,591.		9,591.	

27,302.

65,440.

152,428

61,156.

15,137.

54,336.

12,159.

434,765.

2,404,708.

3,642,903.

337,058.

155,035.

8,088.

152,958.

264,308.

61,411.

17,834.

18,274.

446,116.

11,450.

2,404,708.

4,521,988.

337,058.

263,356.

8,088.

145,137.

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Form 990 (2018)

65,440.

55,973.

55,931.

6,115.

8,878.

0.

0.

0.

81,270.

273,862.

255.

10

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MISCELLANEOUS

e All other expenses

Check here

b Legal

d

е

f

q

12

13

14

15 16

17

18

19 20

21

22

23

24

а

h

С

25

26

Insurance

c Accounting Lobbying

Professional fundraising services. See Part IV, line 17

Investment management fees _____

Other. (If line 11g amount exceeds 10% of line 25,

column (A) amount, list line 11g expenses on Sch 0.)

Advertising and promotion

Office expenses

Information technology Royalties

Occupancy

Travel

Payments of travel or entertainment expenses for any federal, state, or local public officials ...

Conferences, conventions, and meetings

Interest Payments to affiliates _____

Depreciation, depletion, and amortization

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 0.)

STUDENT/FACULTY SUPPORT

Total functional expenses. Add lines 1 through 24e

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Joint costs. Complete this line only if the organization

if following SOP 98-2 (ASC 958-720)

OTHER PROGRAM SUPPORT

d BUILDING RENOVATION

Other expenses. Itemize expenses not covered

2018.05000 UNIVERSITY OF BALTIMORE FOU 08009_01

27,302.

152,958.

55,907

2,697.

2,473.

11,450.

27,051.

605,223.

0.

0.

0.

34,870.

7026700

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UNIVERSITY	OF	BALTIMORE	FOUNDATION,	INC.	23-7036780	Page 11
						Tuge .

1 0		balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	8,166,087.	1	9,449,664.
	2	Cash - non-interest-bearing Savings and temporary cash investments	0/100/00/0	2	5,115,001
	3	Pledges and grants receivable, net	4,549,681.	3	3,700,707.
	4	Accounts receivable, net	30,182.	4	38,719.
	5	Loans and other receivables from current and former officers, directors,	5071021		507715
		trustees, key employees, and highest compensated employees. Complete			
				5	
	6	Part II of Schedule L Loans and other receivables from other disgualified persons (as defined under		5	
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
s		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	61,593.	9	52,911
		Land, buildings, and equipment: cost or other	- ,	-	- , -
		basis. Complete Part VI of Schedule D 10a			
	ь	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities	37,381,016.	11	37,570,720
	12	Investments - other securities. See Part IV, line 11	18,473,218.	12	18,911,795
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	454,284.	15	454,284
	16	Total assets. Add lines 1 through 15 (must equal line 34)	69,116,061.	16	70,178,800
	17	Accounts payable and accrued expenses	494,154.	17	445,297
	18	Grants payable		18	
	19	Deferred revenue	1,191,382.	19	671,533.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		key employees, highest compensated employees, and disqualified persons.			
iab		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	1 605 526	25	1 11 0 0 0 0
	26	Total liabilities. Add lines 17 through 25	1,685,536.	26	1,116,830.
		Organizations that follow SFAS 117 (ASC 958), check here \blacktriangleright X and			
sec		complete lines 27 through 29, and lines 33 and 34.			
ano	27	Unrestricted net assets	4,956,644. 21,584,151.	27	5,688,600
Ba	28	Temporarily restricted net assets	40,889,730.	28	22,799,575 40,573,795
pur	29	Permanently restricted net assets	40,009,730.	29	40,575,795
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here			
0		and complete lines 30 through 34.		00	
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net	32	Retained earnings, endowment, accumulated income, or other funds	67,430,525.	32	69,061,970.
	33	Total net assets or fund balances	69,116,061.	33	70,178,800
	34	Total liabilities and net assets/fund balances		34	

Form 990 (2018) Torm 990 Part X Balance Sheet

Form	UNIVERSITY OF BALTIMORE FOUNDATION, INC.	23-7	036780	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,699		
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,523		
3	Revenue less expenses. Subtract line 2 from line 1	3	1,17		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	67,430		
5	Net unrealized gains (losses) on investments	5	454	4,0	97.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	69,063	1,9	70.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th			37	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit			37
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			000	

Form **990** (2018)

1	Form	990	or	990-EZ
J		330	UI.	330-LZ

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.

OMB No. 1545-0047
2018
Open to Public Inspection

		of the Treasury nue Service			Attach to Form 990 or F //Form990 for instruction			nformation		Open to Public Inspection
Nam	ne of	the organizat		Go to www.ii3.go					Employer	identification number
		ine el gamzat		ERSITY OF	BALTIMORE FO	TINDAT	TON	TNC		3-7036780
Pa	rt I	Reason			All organizations must co		-			
					For lines 1 through 12, c					
1			•		on of churches described		•	()(A)(i)		
2	\square				Attach Schedule E (Form		• • •	•//~//)•		
3	H				anization described in se					
4	H	•	•		njunction with a hospital				Viii) Entor	the hospital's name
7		city, and stat		ation operated in co		uescribed	a in Sectio			the hospital s hame,
5		•		or the benefit of a co	llege or university owned	d or opera	ted by a d	overnmental	unit descrit	ned in
Ŭ		-	-	Complete Part II.)			lou by u g	overnmentar		
6					nental unit described in :	section 17	70(b)(1)(A)	(v)		
	X				intial part of its support f				the general	public described in
•				omplete Part II.)		ionia gov	onniontai		ano gonora	
8					(1)(A)(vi). (Complete Par	t II.)				
9					in section 170(b)(1)(A)(ed in coniu	inction with a	land-grant	college
					ulture (see instructions).					
		university:		5 5 5	(,		, ,	,,		,
10			ion that norma	Illy receives: (1) more	than 33 1/3% of its sup	port from	contributi	ons, member	ship fees, a	and gross receipts from
		-		•	ct to certain exceptions,	-				•
					(less section 511 tax) fr					
				mplete Part III.)						
11		An organizat	ion organized a	and operated exclus	ively to test for public sa	ifety. See	section 50)9(a)(4).		
12		An organizat	ion organized a	and operated exclus	ively for the benefit of, to	perform	the functio	ons of, or to c	arry out the	e purposes of one or
		more publicly	/ supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section	509(a)(3). (Check the box in
		lines 12a thro	ough 12d that	describes the type o	of supporting organizatio	n and con	nplete lines	s 12e, 12f, an	d 12g.	
а		Type I. A s	upporting orga	anization operated, s	upervised, or controlled	by its sup	ported org	ganization(s),	typically by	/ giving
		the suppor	ted organizatio	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or trust	ees of the s	supporting
	_	organizatio	n. You must o	complete Part IV, Se	ections A and B.					
b		Type II. As	supporting org	anization supervised	l or controlled in connec	tion with it	s support	ed organizatio	on(s), by ha	aving
			-		anization vested in the s	ame perso	ons that co	ontrol or mana	age the sup	oported
	_	¬ ĭ	()	t complete Part IV,						
С					g organization operated				ally integrate	ed with,
		-			b). You must complete I					
d		••			orting organization oper				ů.	
			-		zation generally must sat	•		-	d an attent	liveness
_		- ·		,	nplete Part IV, Sections				U. T	
е			•		written determination fro			а туре ї, турє	еп, туре п	
÷	Ent			• ·	nally integrated support		zation.			
י מ				n about the supporte						
9		(i) Name of supp	<u> </u>	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount o	f monetary	(vi) Amount of other
		organization	า		(described on lines 1-10 above (see instructions))	Yes	No	support (see ii	nstructions)	support (see instructions)
Tota	ıl									

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18 Schedule A (Form 990 or 990-EZ) 2018 13

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2995243.	3969255.	6720088.	3346825.	3038492.	20069903.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	2995243.	3969255.	6720088.	3346825.	3038492.	20069903.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						4789372.
6	Public support. Subtract line 5 from line 4.						15280531.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4	(a) 2014 2995243.	(b) 2015 3969255.	6720088.	3346825.	3038492.	20069903.
8	Gross income from interest,						
-	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	588,168.	978,020.	838,852.	777,129.	1010757.	4192926.
9	Net income from unrelated business						
·	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	152,494.	140,042.	152,323.	174,151.	178.091.	797,101.
11	Total support. Add lines 7 through 10						25059930.
	Gross receipts from related activities,	etc. (see instruction	ons)			12	
	First five years. If the Form 990 is for	•	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	organization, check this box and stor				•		
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2018 (column (f))		14	60.98 %
	Public support percentage from 2017					15	59.05 %
	33 1/3% support test - 2018. If the c						, -
	stop here. The organization qualifies	-					N V
b	33 1/3% support test - 2017. If the c	. ,	•				
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			•	•	•	
h	10% -facts-and-circumstances tes						
	more, and if the organization meets the	-					
	organization meets the "facts-and-cire				• •		
18	Private foundation. If the organization						
				a, 100, 17a, 01 17k		dule A (Form 990	

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Schedule A (Form 990 or 990-EZ) 2018 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 10 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	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is fo	r the organization'	s first, second, thi	rd, fourth, or fifth	tax year as a section	on 501(c)(3) orga	nization,
	check this box and stop here	-			-		
Se	ction C. Computation of Publ	lic Support Pe	ercentage				
15	Public support percentage for 2018 (line 8, column (f), (divided by line 13,	column (f))		15	%
16	Public support percentage from 2017	7 Schedule A, Part	III, line 15			16	%
Se	ction D. Computation of Inve	stment Incom	e Percentage	•			
17	Investment income percentage for 20)18 (line 10c, colur	mn (f), divided by	line 13, column (f)))	17	%
18	Investment income percentage from	2017 Schedule A,	Part III, line 17			18	%
19 a	33 1/3% support tests - 2018. If the	organization did r				33 1/3%, and line	e 17 is not
	more than 33 1/3%, check this box a	Ind stop here. The	organization qua	ifies as a publicly	supported organization	ation	
k	33 1/3% support tests - 2017. If the						, and
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
	23 10-11-18						90 or 990-EZ) 2018
				15			

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Schedule A (Form 990 or 990-EZ) 2018 UNIVERSITY OF BALTIMORE FOUNDATION, INC.23-7036780 Page 4

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disgualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Schedule A (Form 990 or 990-EZ) 2018

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Yes

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

No

Schedule A (Form 990 or 990-EZ) 2018 UNIVERSITY OF BALTIMORE FOUNDATION, INC.23-7036780 Page 5

Fai	Supporting Organizations (continued)		
		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		
	below, the governing body of a supported organization?	_	
	A family member of a person described in (a) above?	_	
-	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. 11c		
Sec	tion B. Type I Supporting Organizations		
-	Did the divertage two teases as membership of any as many supported exceptions have the neuron to	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1		
2	Did the organization operate for the benefit of any supported organization other than the supported	+	
2	organization (s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		
	supervised, or controlled the supporting organization.	-	
Sec	tion C. Type II Supporting Organizations		<u> </u>
		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		
	or management of the supporting organization was vested in the same persons that controlled or managed		
	the supported organization(s).	-	
Sec	tion D. All Type III Supporting Organizations		<u> </u>
		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		
	the organization maintained a close and continuous working relationship with the supported organization(s).		
3	By reason of the relationship described in (2), did the organization's supported organizations have a		
	significant voice in the organization's investment policies and in directing the use of the organization's		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		
	supported organizations played in this regard. 3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).		
а	The organization satisfied the Activities Test. <i>Complete</i> line 2 <i>below.</i>		
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below</i> .		
С	L The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction		
2	Activities Test. Answer (a) and (b) below.	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		
	those supported organizations and explain how these activities directly furthered their exempt purposes,		
	how the organization was responsive to those supported organizations, and how the organization determined		
	that these activities constituted substantially all of its activities.	+	_
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		
	reasons for the organization's position that its supported organization(s) would have engaged in these		
~	activities but for the organization's involvement.		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		
	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	+	-
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		
00000	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. 3b 5 10-11-18 Schedule A (Form 990 or		1 2010
032025	5 10-11-18 Schedule A (Form 990 or 1 7	330-EZ	., 2010

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Schedule A (Form 990 or 990-EZ) 2018 UNIVERSITY OF BALTIMORE FOUNDATION, INC.23-7036780 Page 6 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

(A) Prior Year	
(A) Prior Year	
	(B) Current Year (optional)
	Current Year

instructions).

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Schedule A (Form 990 or 990-EZ) 2018

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Schedule A (Form 990 or 990-EZ) 2018 UNIVERSITY OF BALTIMORE FOUNDATION, INC.23-7036780 Page 7

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations <u>(continued)</u>	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsiv	е	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2018	Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
с	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
-	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
-	and 4c.			
8	Breakdown of line 7:			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

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chedule A Part VI	Supplemental Part IV, Section A, line 1; Part IV, Sec	Z) 2018 UNIVER; I Information. Pro , lines 1, 2, 3b, 3c, 4b, ;tion D, lines 2 and 3; , 6, and 8; and Part V,	vide the expla 4c, 5a, 6, 9a, Part IV, Sectio	anations rec 9b, 9c, 11 on E, lines 1	quired by P a, 11b, and lc, 2a, 2b, 3	art II, line 10 11c; Part I\ 3a, and 3b; F	; Part II, lin /, Section E Part V, line	e 17a or 17b; 3, lines 1 and 2 1; Part V, Sec	Part III, lin 2; Part IV, tion B, line	e 12; Section C.
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SCHEDULE D

(Form 990)

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.



Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

	e of the organization UNIVERSITY OF BALTIMORE FOUNDATION, INC.	Employer identification number $23 - 7036780$
Pa	t I Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	ccounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fun	nds
	are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used of	only
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confer	rring
	impermissible private benefit?	
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" on 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)	important land area
	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 co	pnservation easement on the last
	day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
с	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure	
	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	nization during the tax
	year 🕨	
4	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	
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation	on easements during the year
	▶	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation ea	asements during the year
	►\$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(E	
-	and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense state	
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization.	ganization's accounting for
Do	conservation easements. t III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Acceta
Fa	t III Organizations Maintaining Collections of Art, Historical Treasures, or Other Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	Similar Assets.
-	· · · · · · · · · · · · · · · · · · ·	
Та	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement at historical traces are the activity and the statement as the statem	
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	public service, provide, in Part XIII,
b	the text of the footnote to its financial statements that describes these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and b	
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public se	rvice, provide the following amounts
	relating to these items:	► ¢
	(i) Revenue included on Form 990, Part VIII, line 1	. ▶ \$ ▶ \$454,284.
•	(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 SEAS 116 (ASC 959) relating to these items:	provide
~	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	¢
a b	Revenue included on Form 990, Part VIII, line 1	. ▶ \$. ▶ \$
-	Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990.	

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Sche	dule D (Form 990) 2018 UNIVERS	ITY OF BAL	FIMORE FOU	NDATION, I	NC. 2	23-703	3678) Pa	age 2	
Par	t III Organizations Maintaining C	Collections of Ar	t, Historical Tr	easures, or Oth	er Simila	ır Asset	: S (contin	ued)		
3	Using the organization's acquisition, access	ion, and other record	s, check any of the	following that are a	significant u	ise of its o	ollection	n item	s	
	(check all that apply):									
а	X Public exhibition	d		hange programs						
b	X Scholarly research	е	Other							
с	X Preservation for future generations									
4	Provide a description of the organization's c	ollections and explair	n how they further t	he organization's exe	empt purpo	se in Part	XIII.			
5	During the year, did the organization solicit of	or receive donations of	of art, historical trea	sures, or other simila	ar assets				-	
	to be sold to raise funds rather than to be m						Yes		No	
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		te if the organizatio	n answered "Yes" o	n Form 990	, Part IV, I	ine 9, or			
1a	Is the organization an agent, trustee, custod	ian or other intermed	iary for contributior	is or other assets no	t included					
	on Form 990, Part X?		-				Yes		No	
b	If "Yes," explain the arrangement in Part XIII									
							Amount			
с	Beginning balance				1c					
	Additions during the year									
	Distributions during the year									
f	Ending balance				1f					
2a	Did the organization include an amount on F				ility?		Yes		No	
b	If "Yes," explain the arrangement in Part XIII									
Par	rt V Endowment Funds. Complete	f the organization an	swered "Yes" on Fo	orm 990, Part IV, line	10.					
		(a) Current year	(b) Prior year		(d) Three ye		(e) Four			
1a	Beginning of year balance	49,001,471.	46,082,443.	41,950,031.	44,23	15,205.		731, 127,		
b	b Contributions 983,278. 1,689,235. 1,307,598. 1,099,610.									
с	Net investment earnings, gains, and losses	2,375,812.	3,644,508.	4,871,705.	-1,33	36,876.	1	331,	885.	
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	2,483,004.	2,414,715.	2,046,891.	2,02	27,908.	1	975,	508.	
f	Administrative expenses									
g	End of year balance	49,877,557.	49,001,471.	46,082,443.	41,95	50,031.	44	,215,	205.	
2	Provide the estimated percentage of the cur		e (line 1g, column (a	a)) held as:						
а	Board designated or quasi-endowment	19.36	%							
	Permanent endowment 80.64	%								
С	Temporarily restricted endowment	.00 %								
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.								
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administered for	the organiza	ation	-			
	by:							Yes	No	
	(i) unrelated organizations						3a(i)		<u> </u>	
	(ii) related organizations						3a(ii)		Х	
b	If "Yes" on line 3a(ii), are the related organiza						3b			
4	Describe in Part XIII the intended uses of the	<u>v</u>	wment funds.							
Par	t VI Land, Buildings, and Equipn									
	Complete if the organization answere									
	Description of property	(a) Cost or ot basis (investm			Accumulated	d	(d) Bool	< value	Э	
1a	Land									
	Buildings									
	Leasehold improvements									
	Equipment									
	Other									
	Add lines 1a through 1e. (Column (d) must e		X, column (B), line 1	0c.)					0.	
						Schedule	D (Form	n 990)	2018	

Schedule D) (Form 990) 2018	UNIVERSITY	OF	BALTIMORE	FOUNDATION,	INC. 23	-7036780	Page 3
Part VII								
		nization answered "Yes"	on F	orm 990. Part IV. lin	e 11b. See Form 990. F	Part X. line 12.		
(a) Descrip		ry (including name of security)		(b) Book value	-		d-of-year market val	lue
				(-)	(-,			
.,								
	-neia equity interests							
(3) Other		13.7						
	RIVATE EQUIT	Υ		1 4 0 0 5 0 0 0				
	IVESTMENTS		-	14,825,089		EAR MARKET		
(C) IN	IVESTMENT IN	USMF		4,086,706	• END-OF-YE	EAR MARKEI	VALUE	
(D)								
(E)								
(F)								
(G)								
(H)								
	h) must equal Form 990	Part X, col. (B) line 12.) 🕨		18,911,795	•			
	Investments - P				•			
i are viii	-	-			. 11 - O E 000 E	and M. Kara 10		
	(a) Description of in	nization answered "Yes"	on F				d-of-year market val	
	(a) Description of in	ivestment		(b) Book value	(c) wethod of va	iuation. Cost of en	u-oi-year market vai	lue
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
,	h) must aqual Form 000	Dart V. col. (P) line 12)						
Part IX	Other Assets.	Part X, col. (B) line 13.) 🕨						
Fartix					11 d 0 a a E a ma 000 E			
	Complete if the organ	nization answered "Yes"			e 11d. See Form 990, F	art X, line 15.	(h) De els velu	
		(a)	Desc	ription			(b) Book valu	le
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
	ump (b) must actual Fam	m 000 Dart V and (D) lin	o 15	۱				
	Other Liabilities	m 990, Part X, col. (B) lin	e 15.)				
Part X			_				_	
	-	nization answered "Yes"	on F	orm 990, Part IV, lin		990, Part X, line 2	5.	
1.	(a) Des	cription of liability			(b) Book value			
(1) Fec	deral income taxes							
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)			_	<u> </u>				
		m 990, Part X, col. (B) lin						
		tions. In Part XIII, provide						
organiz	ation's liability for unce	ertain tax positions under	r FIN	48 (ASC 740). Chec	k here if the text of the	footnote has beer	provided in Part XI	III X
								~ ~ ~

Schedule D (Form 990) 2018

832053 10-29-18

Sche	dule D (Form 990) 2018 UNIVERSITY OF BALTIMORE FOUNDATION, INC.	23-	7036780 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturi	າ.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	6,019,667.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments 2a 454,097.		
b	Donated services and use of facilities 2b		
с	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.) 2d 19,192.		
е	Add lines 2a through 2d	2e	473,289.
3	Subtract line 2e from line 1	3	5,546,378.
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 152,958.		
b	Other (Describe in Part XIII.) 4b		
с	Add lines 4a and 4b	4c	152,958.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	5,699,336.
Pa	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu	irn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	4,409,061.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
с	Other losses 2c		
d	Other (Describe in Part XIII.) 2d 43,262.		
е	Add lines 2a through 2d	2e	43,262.
3	Subtract line 2e from line 1	3	4,365,799.
4	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 152, 958.		
b	Other (Describe in Part XIII.) 4b 3,231.		
С	Add lines 4a and 4b	4c	156,189.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	4,521,988.
Do	t XIII Supplemental Information.		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 4:

ART AND HISTORICAL COLLECTIONS INCLUDE LIBRARY COLLECTIONS, POSTERS,

PRINTS AND OTHER ARTIFACTS.

PART V, LINE 4:

THE FOUNDATION'S PERMANENT ENDOWMENT CONSISTS OF VARIOUS DONOR RESTRICTED

FUNDS ESTABLISHED TO PROVIDE A SOURCE OF INCOME FOR ONGOING PROGRAMS, AS

WELL AS SCHOLARSHIPS AND PROFESSORSHIPS.

PART X, LINE 2:

832054 10-29-18

THE ORGANIZATION FOLLOWS THE PROVISIONS OF ACCOUNTING FOR UNCERTAINTY IN

29

INCOME TAXES UNDER THE INCOME TAXES TOPIC OF THE CODIFICATION. THE

Schedule D (Form 990) 2018

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 Schedule D (Form 990) 2018
 UNIVERSITY OF BALTIMORE FOUNDATION, INC.23-7036780 Page 5

 Part XIII
 Supplemental Information (continued)

 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.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

REVENUE FROM UNIVERSITY PROPERTIES, INC. 22,423.

BAD DEBT EXPENSE

TOTAL TO SCHEDULE D, PART XI, LINE 2D

PART XII, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES FROM UNIVERSITY PROPERTIES, INC.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

BAD DEBT EXPENSE

PART XI, LINE 2D

REVENUE OF \$22,423 FROM UNIVERSITY PROPERTIES, INC., AN AFFILIATE, IS

INCLUDED IN THE AUDITED FINANCIAL STATEMENTS, BUT NOT INCLUDED IN THE FORM

990.

PART XII, LINE 2D

EXPENSES OF \$43,262 FROM UNIVERSITY PROPERTIES, INC., AN AFFILIATE, ARE

INCLUDED IN THE AUDITED FINANCIAL STATEMENTS, BUT NOT INCLUDED IN THE FORM

990.

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-3,231.

19,192.

43,262.

3,231.

 Schedule D (Form 990) 2018
 UNIVERSITY OF BALTIMORE FOUNDATION, INC.23-7036780 Page 5

 Part XIII
 Supplemental Information (continued)

 FORM 990, PART XI, LINE 10

 THE AUDITED FINANCIAL STATEMENTS WERE PREPARED ON A CONSOLIDATED BASIS.

 THE CONSOLIDATED NET INCOME(LOSS) EQUALS \$1,610,606. THE NET INCOME FOR

 THIS ENTITY ON AN UNCONSOLIDATED BASIS IS \$1,631,445. THE DIFFERENCE IS

 (\$20,839), OR THE EXCESS FOR UNIVERSITY PROPERTIES, INC., THE CONSOLIDATED

 ENTITY.

Schedule D (Form 990) 2018

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SCHEDULE F	Statomo	nt of Act	ivities Outside the Un	itad Sta	atae L	OMB No. 1545-0047
			on answered "Yes" on Form 990, Part			2018
	P C C C C C C C C C C		Attach to Form 990.	,, .	-	Open to Public
Department of the Treasury Internal Revenue Service	► Go to	www.irs.gov/Fo	orm990 for instructions and the latest	information.		Inspection
Name of the organization					Employer ide	entification number
UNIVERSITY OF B					23-7036	
Part I General Info	rmation on A	Activities Ou	tside the United States. Comple	te if the orgar	ization answere	ed "Yes" on
Form 990, Part IV						
-	-		ds to substantiate the amount of its gra the selection criteria used to award the		1	Yes No
2 For grantmakers. Desc United States.	ribe in Part V the	e organization's	procedures for monitoring the use of its	grants and o	ther assistance	outside the
3 Activities per Region. (T	he following Par	t I, line 3 table c	an be duplicated if additional space is r	eeded.)		
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a pro describe	vity listed in (d) gram service, e specific type (s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND						
THE CARIBBEAN -						
ANTIGUA & BARBUDA,						
ARUBA, BAHAMAS	0	0	INVESTMENTS ONLY			6,606,940.
3 a Subtotal	0	0				6,606,940.
b Total from continuation						
sheets to Part I	0	0				0.
c Totals (add lines 3a and 3b)	o	0				6,606,940.

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

Schedule F (Form 990) 2018

OMB No. 1545-0047

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18301125 132974 08009.000

Page 2

Part II 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.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	ch the grantee or cou	insel has provided a sec	recognized as charities by the tion 501(c)(3) equivalency lett					

(a) Type of grant or assistance

			Schedu	ıle F (Form 990) 2018

23-7036780

(f) Amount of

noncash

assistance

(g) Description of

noncash assistance

(e) Manner of

cash disbursement

UNIVERSITY OF BALTIMORE FOUNDATION, INC. Schedule F (Form 990) 2018

(c) Number of

recipients

Part III can be duplicated if additional space is needed.

(b) Region

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.

(d) Amount of

cash grant

Page 3

(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2018 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Page 4 Part IV Foreign Forms

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? <i>If</i> "Yes," <i>the organization may be required to separately 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; don't file with Form 990)</i>	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "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? <i>If</i> "Yes," <i>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)</i>	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)	X Yes	🔲 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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2018

chedule F (Form 990) 2018	I UF	BALTIMORE	FOUNDATION,	INC.	23-7036780	Pag
	Supplementa	Part L lina	2 (monitoring of fun	ds): Part I, line 3, colum	n (f) (accounti	ing method; amounts of	
						d); and Part III, column (c	:)
						nation. See instructions.	-)
		 	I				
2075 10-31-1	3					Schedule F (Form	990)
	<i>,</i>			36			5557

(Form 990 or 990-EZ) Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ, line 6a. Open to Public Inspection Name of the organization Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification numl 23 – 70 36 78 0 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations e X Solicitation of non-government grants b X Internet and email solicitations f X Solicitation of government grants g Special fundraising events	SCHEDULE G	Suppleme	ental Information R	Regarding	Fun	drais	ing or Gaming	Activities	OMB No. 1	545-0047
Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ. Open to Public Inspection Name of the organization Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification number 23-7036780 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations e X Solicitation of non-government grants b X Internet and email solicitations f	(Form 990 or 990-EZ) Co								20	18
Name of the organization Employer identification number UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations e X Solicitation of non-government grants b X Internet and email solicitations f X Solicitation of government grants			Attach t	to Form 990	or Fo	rm 99	0-EZ.			
UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations e X Internet and email solicitations f X Solicitation of government grants		► Go	o to www.irs.gov/Form9	90 for instru	uction	s and	the latest informat		•	
required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations e X Solicitation of non-government grants b X Internet and email solicitations f X Solicitation of government grants	•	NIVERS	ITY OF BALTI	MORE F	'OUN	DAT	ION, INC.			on number
a X Mail solicitations e X Solicitation of non-government grants b X Internet and email solicitations f X Solicitation of government grants				zation answe	red "Y	'es" oi	n Form 990, Part IV,	line 17. Form 9	90-EZ filers ar	e not
 c A Phone solicitations g Special fundraising events d X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? X Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. 	 a X Mail solicitations b X Internet and email c X Phone solicitation d X In-person solicitation 2 a Did the organization have key employees listed in b If "Yes," list the 10 higher 	solicitations s ons e a written c Form 990, P est paid indiv	e e f g or oral agreement with ar Part VII) or entity in conne viduals or entities (fundra	X Solicitat X Solicitat Special ny individual ection with p	tion of tion of fundra l (inclue profess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, tru undraising services?	stees, or		No
(i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Activity (iii) Did fundraiser or control of contributions? (iv) Gross receipts from activity (v) Amount paid to (or retained by) fundraiser listed in col. (i)	(i) Name and address of ir	dividual	(ii) Activity			aiser ustody trol of		to (or retained fundraise	to (or re	tained by)
WILSON-BENNETT TECHNOLOGY, Yes No	WILSON-BENNETT TECHNOL	DGY,			Yes	No				
INC - 2239 BILL FOSTER TELEMARKETING X 96,838. 65,440. 31,3	INC - 2239 BILL FOSTER		TELEMARKETING			Х	96,838.	65,	440.	31,398.
								,		31,398.
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.	or licensing.									'n
MD, CA, CO, CT, FL, GA, IL, KY, MA, MI, MO, NJ, NY, OH, PA, TN, VA, WA, WV, AL, HI, MS, DC	MD,CA,CO,CT,FL,	GA,IL,	KY,MA,MI,MO,	NJ,NY,	ОΗ,	ΡA,	TN, VA, WA, W	V,AL,HI	,MS,DC	

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) 2018

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Schedule G (Form 990	or 990-EZ) 2018	UNIVERSITY	OF	BALTIMORE	FOUND	ATION,	INC.	23-70	36780	Page 2
	aina Franta	<u> </u>					10			

Part II Fundraising Events. Complete if the organization answered "Yes" on 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.

		3		,	<u> </u>	<u> </u>
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
ani			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
s	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Direct E	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4 through			►	
D		Net income summary. Subtract line 10 from li				
Pa	rt I	II Gaming. Complete if the organization a \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Forn	n 990, Part IV, line 19, or	reported more than	
			() 5	(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Reve						
<u> </u>	1	Gross revenue				
	•	Orah mina				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			Yes%	Yes%	Yes %	
	6	Volunteer labor	No No	└── No	No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1 column (d)			
	•	Not gaming moorne cammary: Cabiract me t				
		er the state(s) in which the organization condu				
		he organization licensed to conduct gaming a	ctivities in each of these	states?		Yes No
b	lf "I	No," explain:				
10a	We	re any of the organization's gaming licenses re	evoked, suspended, or t	erminated during the tax	year?	Yes No
		Yes," explain:				-
8320	32 10	-03-18			Schedule G (Fo	rm 990 or 990-EZ) 2018

18301125 132974 08009.000 2018.05000 UNIVERSITY OF BALTIMORE FOU 08009_01

Sch	edule G (Form 990 or 990-EZ) 2018 UNIVERSITY OF BALTIMORE FOUNDATION, INC.23-7	036	780	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
	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 No
13	Indicate the percentage of gaming activity conducted in:		1	
а	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 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 ▶\$			
с	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			
47				
	Mandatory distributions:			
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to		Vac	
h	retain the state gaming license? Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	. —	103	
, N	organization's own exempt activities during the tax year > \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	rt III, lii	nes 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			· · ·
SC	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISER	.S :		
(I) NAME OF FUNDRAISER: WILSON-BENNETT TECHNOLOGY, INC			
(I) ADDRESS OF FUNDRAISER:			
22	39 BILL FOSTER MEMORIAL HWY W, CABOT, AR 72023			
83208	83 10-03-18 Schedule G (Form	n 990 c	or 990	-EZ) 2018

Schedule G (Form 990 or 990 EZ UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Page 4 Pag	Schedule G	(Form 990 or 990-EZ)	UNIVERSITY	OF	BALTIMORE	FOUNDATION,	INC.23-7036780	Page 4
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SCHEDULE O Supplemental Information to Form 990 or 990-EZ (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 Department of the Treasury Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service Name of the organization Employer identification number UNIVERSITY OF BALTIMORE FOUNDATION, 23-7036780 INC. FORM 990, PART VI, SECTION B, LINE 11B:

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:

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:

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 THE UNIVERSITY'S COMPENSATION STRUCTURE.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

MD, CO, MA, MI, NJ, NY, OH, WA, CA, AL, CT, FL, GA, HI, IL, KY, MS, MO, TN, VA, WV, PA, DC

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

THESE DOCUMENTS ARE AVAILABLE UPON REQUEST.

PART XI, LINE 2C

THE AUDIT PROCESS WAS UNCHANGED FROM THE CURRENT YEAR, AND IS OVERSEEN

BY THE AUDIT COMMITTEE.

LHA For Paperwork Reduction Act Notice. see the Instructions for Form 990 or 990-EZ. 832211 10-10-18

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

OMB No 1545-0047

Open to Public

Inspection

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Name of the organizat	ion UNIV	ERSITY	OF BAI	TIMOR	E FOUN	DATIO	N, IN	ıС.	Employer identification n 23-7036780
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(Form 990)

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0047

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

Name of the organization

UNIVERSITY OF BALTIMORE FOUNDATION, INC.

Employer identification number 23 - 7036780

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

(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

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(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	cont	g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
UNIVERSITY PROPERTIES, INC 52-1040290							
1130 N. CHARLES STREET							
BALTIMORE, MD 21201	SEE SCHEDULE O	MARYLAND	501(C)(2)		N/A		X
	-						

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

Schedule R (Form 990) 2018

Schedule R (Form 990) 2018 UNIVERSITY OF BALTIMORE FOUNDATION, INC.

23-7036780 Page 2

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

(a)	(b)	(c)	(d)		(e)		(f)		(g)	(ł	ר)	(i)		(j)		k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predomir (related, excluded fr	ant income unrelated, om tax under 512-514)	Share inc	e of total come	end-	are of of-year sets	Dispropo allocat	tions?	Code V-L amount in 20 of Sche K-1 (Form 1	JBI box dule	General managii partner	Perce owne	enta ersh
		country)		sections	512-514)					Yes	No	K-1 (Form 1	065)	Yes N	D	
	-															
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t IV Identification of Related Or organizations treated as a co	ganizations Taxable	as a Corpo	pration or Trust. C year.	omplete if t	ne organizati	ion ansv	wered "Yes	s" on Fo	rm 990, P	art IV,	line 34	4, because it	had or	ne or	nore rel	late
organizations treated as a co	prporation or trust duri	as a Corpo	pration or Trust. C year. (b)	omplete if ti	ne organizati (d)		wered "Yes		rm 990, P		line 34	4, because it (g)		ne or (h)	-	
organizations treated as a co (a) Name, address, and E	prporation or trust durin	ng the tax y	year. (b)	(c) Legal domicile (state or	(d) Direct cont	trollina	(e) Type of) entitv		f total		(g) Share of	Perc		e 512(k	i) ction b)(1: rolle
organizations treated as a co	prporation or trust durin	ng the tax y	year. (b)	(c) Legal domicile	(d)	trollina	(e)) entity S corp,	(f) Share c	f total		(g)	Perc	(h) centag	e 512(b contr enti	i) tior b)(1 rolle tity?
organizations treated as a co (a) Name, address, and E	prporation or trust durin	ng the tax y	year. (b)	(C) Legal domicile (state or foreign	(d) Direct cont	trollina	(e) Type of (C corp, S) entity S corp,	(f) Share c	f total		(g) Share of end-of-year	Perc	(h) centag	e 512(k	i) ctior b)(1 rolle tity?
organizations treated as a co (a) Name, address, and E	prporation or trust durin	ng the tax y	year. (b)	(C) Legal domicile (state or foreign	(d) Direct cont	trollina	(e) Type of (C corp, S) entity S corp,	(f) Share c	f total		(g) Share of end-of-year	Perc	(h) centag	e 512(b contr enti	i) tior b)(1 rolle tity?
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organizations treated as a co (a) Name, address, and E	prporation or trust durin	ng the tax y	year. (b)	(C) Legal domicile (state or foreign	(d) Direct cont	trollina	(e) Type of (C corp, S) entity S corp,	(f) Share c	f total		(g) Share of end-of-year	Perc	(h) centag	e 512(b contr enti	i) tior b)(1 rolle tity?
organizations treated as a co (a) Name, address, and E	prporation or trust durin	ng the tax y	year. (b)	(C) Legal domicile (state or foreign	(d) Direct cont	trollina	(e) Type of (C corp, S) entity S corp,	(f) Share c	f total		(g) Share of end-of-year	Perc	(h) centag	e 512(b contr enti	i) tior b)(1 rolle tity?
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organizations treated as a co (a) Name, address, and E	prporation or trust durin	ng the tax y	year. (b)	(C) Legal domicile (state or foreign	(d) Direct cont	trollina	(e) Type of (C corp, S) entity S corp,	(f) Share c	f total		(g) Share of end-of-year	Perc	(h) centag	e 512(b contr enti	i) ction b)(13 rolle tity?
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organizations treated as a co (a) Name, address, and E	prporation or trust durin	ng the tax y	year. (b)	(C) Legal domicile (state or foreign	(d) Direct cont	trollina	(e) Type of (C corp, S) entity S corp,	(f) Share c	f total		(g) Share of end-of-year	Perc	(h) centag	e 512(b contr enti	i) ction b)(13 rolle tity?

Schedule R (Form 990) 2018 UNIVERSITY OF BALTIMORE FOUNDATION, INC.

Part V	Transactions With Related Organizations. Complete if the organization answered	"Yes" on Form 990, Part IV, line 34, 35b, or 36.
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Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Ye	s No
 During the tax year, did the organization engage in any of the following transactions with one or more related organ 	nizations listed in Parts II-IV/2		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			X
 b Gift, grant, or capital contribution to related organization(s) 		_	X
c Gift, grant, or capital contribution from related organization(s)	10	-	X
d Loans or loan guarantees to or for related organization(s)			X
		-	X
e Loans or loan guarantees by related organization(s)		_	
f Dividends from related organization(s)	1f		x
g Sale of assets to related organization(s)			X
h Purchase of assets from related organization(s)			X
i Exchange of assets with related organization(s)			X
j Lease of facilities, equipment, or other assets to related organization(s)			X
k Lease of facilities, equipment, or other assets from related organization(s)	1k		X
I Performance of services or membership or fundraising solicitations for related organization(s)			X
m Performance of services or membership or fundraising solicitations by related organization(s)			X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X	.
o Sharing of paid employees with related organization(s)		X	.
p Reimbursement paid to related organization(s) for expenses	1p		X
q Reimbursement paid by related organization(s) for expenses			X
r Other transfer of cash or property to related organization(s)	1r		X
s Other transfer of cash or property from related organization(s)			X
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, inclu			

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) UNIVERSITY PROPERTIES, INC.	N	0.	
(2)			
(3)			
_(4)			
<u>(5)</u>			
(6)			
	15		

Schedule R (Form 990) 2018 UNIVERSITY OF BALTIMORE FOUNDATION, INC.

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are a partners 501(c) orgs. Yes I	 sec. (3) ? No	(f) Share of total income	(g) Share of end-of-year assets	(H Dispr tior alloca Yes	n) opor- iate tions? No	(j) General o managing partner? Yes NO	(k) Percentage ownership

Schedule R (Form 990) 2018

Schedule R	(Form 990)) 2018
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Schedule R (Form 990) 2018 Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

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