

EXTENDED TO MAY 15, 2020

Form **990****Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2018Department of the Treasury
Internal Revenue Service

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

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.Open to Public
Inspection**A** For the 2018 calendar year, or tax year beginning **JUL 1, 2018** and ending **JUN 30, 2019****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization**THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC.**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

312 EAST CHURCH STREET

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

FREDERICK, MD 21701**F** Name and address of principal officer: **ELIZABETH Y. DAY****SAME AS C ABOVE****D** Employer identification number**52-1488711****E** Telephone number**301-695-7660****G** Gross receipts \$ **26,051,274.****H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **WWW.FREDERICKCOUNTYGIVES.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1986** **M** State of legal domicile: **MD****Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: GENEROUS DONORS CREATE POSITIVE IMPACT IN THE LIVES OF FREDERICK COUNTY CITIZENS THROUGH GRANTS AND	
	2	Check this box <input type="checkbox"/> If the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3	Number of voting members of the governing body (Part VI, line 1a)	24
	4	Number of independent voting members of the governing body (Part VI, line 1b)	24
	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	15
	6	Total number of volunteers (estimate if necessary)	127
		7a	Total unrelated business revenue from Part VIII, column (C), line 12
7b		Net unrelated business taxable income from Form 990-T, line 38	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 6,047,669. Current Year 4,955,711.
	9	Program service revenue (Part VIII, line 2g)	0. 0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,537,701. 8,907,653.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0. 0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	11,585,370. 13,863,364.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	5,315,324. 6,431,210.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,003,522. 1,113,001.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 466,777.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,085,564. 1,179,313.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	7,404,410. 8,723,524.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	4,180,960. 5,139,840.
	20	Total assets (Part X, line 16)	Beginning of Current Year 122,392,838. End of Year 129,035,482.
	21	Total liabilities (Part X, line 26)	10,387,595. 10,920,882.
22	Net assets or fund balances. Subtract line 21 from line 20	112,005,243. 118,114,600.	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here ▶ *Elizabeth Y. Day* Signature of officer Date **3/9/2020**
ELIZABETH Y. DAY, PRESIDENT AND CEO
 Type or print name and title

Paid Preparer Use Only
 Print/Type preparer's name **SUSAN KELLER** Preparer's signature *Susan P. Keller* Date **02/28/20** Check ☐ if self-employed PTIN **P00245169**
 Firm's name ▶ **ELLIN & TUCKER, CHARTERED** Firm's EIN ▶ **52-0959934**
 Firm's address ▶ **400 EAST PRATT ST. SUITE 200** Phone no. **410-727-5735**
BALTIMORE, MD 21202

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

☒ Yes ☐ No

832001 12-31-18

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

Form **990** (2018)**SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION**

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

52-1488711 Page 2

Form 990 (2018)

Part III Statement of Program Service Accomplishments

☒ X

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

1 Briefly describe the organization's mission:
THE COMMUNITY FOUNDATION IS DEDICATED TO CONNECTING PEOPLE WHO CARE
WITH CAUSES THAT MATTER TO ENRICH THE QUALITY OF LIFE IN FREDERICK
COUNTY NOW AND FOR FUTURE GENERATIONS.

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 ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 1,441,881. including grants of \$ 1,202,898.) (Revenue \$)
STRATEGIC PRIORITY GRANTS - THE COMMUNITY FOUNDATION IDENTIFIES
COMMUNITY NEEDS THROUGH PERIODIC ASSESSMENTS AND, BASED UPON THESE
FINDINGS, DETERMINES STRATEGIC PRIORITIES FOR ITS GRANTMAKING.
QUALIFIED 501C3 ORGANIZATIONS AND GOVERNMENT/QUASI-GOVERNMENT ENTITIES
APPLYING FOR FUNDING PROGRAMS NOT NORMALLY PROVIDED THROUGH TAX REVENUE
MAY COMPLETE APPLICATIONS FOR STRATEGIC FUNDING. APPLICANTS PARTICIPATE
IN A RIGOROUS REVIEW PROCESS CONDUCTED BY THE COMMUNITY FOUNDATION'S
GRANTS COMMITTEE. APPLICANTS MUST BE IN GOOD STANDING WITH ALL STATE
AND FEDERAL REGISTRATIONS, AND MUST PROVIDE DESCRIPTIONS OF THEIR
PROGRAMS, UNITS OF SERVICE AND EXPECTED OUTCOMES, AND DETAILED
FINANCIAL INFORMATION. REQUIRED MID-YEAR AND FINAL REPORTS ENSURE
ACCOUNTABILITY.

4b (Code:) (Expenses \$ 4,060,714. including grants of \$ 3,918,342.) (Revenue \$)
IMPACT GRANTS - THE COMMUNITY FOUNDATION ADMINISTERS GRANTS FROM FIELD
OF INTEREST, DONOR-ADVISED AND DESIGNATED FUNDS ESTABLISHED BY DONORS
WHO WANT TO CREATE IMPACT AND SUPPORT THEIR FAVORITE CAUSES. FIELD OF
INTEREST FUND FOUNDERS SPECIFY GENERAL AREAS FOR THE COMMUNITY
FOUNDATION TO DIRECT ITS GRANTMAKING, BUT NOT SPECIFIC NONPROFITS.
DONOR-ADVISED FUND FOUNDERS RECOMMEND GRANTS FROM THEIR FUNDS, WITH THE
COMMUNITY FOUNDATION BOARD OF TRUSTEES HAVING FINAL APPROVAL. GRANTS
FROM DESIGNATED FUNDS SUPPORT THE COMMUNITY CAUSES IDENTIFIED IN THE
AGREEMENT EXECUTED WHEN THE DONOR ESTABLISHED THE FUND WITH THE
COMMUNITY FOUNDATION. ALL GRANTEEES MUST BE IN GOOD STANDING WITH ALL
STATE AND FEDERAL REGISTRATIONS AND SOME MUST PROVIDE DESCRIPTIONS OF
THE IMPACT OF THEIR PROGRAMS AND REPORTS TO ENSURE ACCOUNTABILITY.

4c (Code:) (Expenses \$ 1,592,324. including grants of \$ 1,309,970.) (Revenue \$)
SCHOLARSHIPS - THE COMMUNITY FOUNDATION IS ONE OF THE LARGEST PROVIDERS
OF SCHOLARSHIPS IN FREDERICK COUNTY TO INDIVIDUALS PURSUING EDUCATION
PAST HIGH SCHOOL, INCLUDING TWO AND FOUR-YEAR COLLEGES AND
UNIVERSITIES, TRADE AND TECHNICAL SCHOOLS, MASTERS AND DOCTORAL
PROGRAMS, AND CERTIFICATIONS. STUDENTS MAY APPLY FOR SCHOLARSHIPS
DURING ANY YEAR OF THEIR ACADEMIC CAREERS, INCLUDING NON-TRADITIONAL
STUDENTS WHO DID NOT BEGIN THEIR POST-SECONDARY STUDIES IMMEDIATELY
FOLLOWING HIGH SCHOOL. THE COMMUNITY FOUNDATION'S SCHOLARSHIP COMMITTEE
REVIEWS ALL APPLICATIONS AND SELECTS RECIPIENTS THAT BEST MATCH THE
CRITERIA SET FORTH BY THE DONOR WHEN THE SCHOLARSHIP FUND WAS
ESTABLISHED. SCHOLARSHIPS ARE AVAILABLE FOR ALMOST ANY AREA OF STUDY,
SOME DO NOT CONSIDER FINANCIAL NEED AS CRITERIA, AND SOME ARE RENEWABLE

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 7,094,919.

Form 990 (2018)

SEE SCHEDULE O FOR CONTINUATION(S)

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711 Page **3**

Form 990 (2018)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		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 "Yes," complete Schedule D, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
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>		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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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 "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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 "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I</i>		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? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Form **990** (2018)

832003 12-31-18

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711 Page 4

Form 990 (2018)

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	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 Schedule J	X	
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		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a 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		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	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):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c 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		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 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		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	29	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

Form 990 (2018)

832004 12-31-18

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711 Page 5

Form 990 (2018)

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

	Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 15		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	X	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
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).		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7 Organizations that may receive deductible contributions under section 170(c).		
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?		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d If "Yes," indicate the number of Forms 8282 filed during the year 7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		X
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?		X
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		X
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12 10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders 11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
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.		
a Is the organization licensed to issue qualified health plans in more than one state?		
Note. See the instructions for additional information the organization must report on Schedule O.		
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		
c Enter the amount of reserves on hand 13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		X
If "Yes," see instructions and file Form 4720, Schedule N.		
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		X
If "Yes," complete Form 4720, Schedule O.		

Form 990 (2018)

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

52-1488711 Page 6

Form 990 (2018)

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 ☒

Section A. Governing Body and Management

	1a	1b	2	3	4	5	6	7a	7b	8a	8b	9	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	24													
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		24												
b Enter the number of voting members included in line 1a, above, who are independent														
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?														X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?														X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?														X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?														X
6 Did the organization have members or stockholders?														X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?														X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?														X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:														
a The governing body?										X				
b Each committee with authority to act on behalf of the governing body?										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														X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	10a	10b	11a	12a	12b	12c	13	14	15a	15b	16a	16b	Yes	No
10a Did the organization have local chapters, branches, or affiliates?														X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?														
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			X											
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.														
12a Did the organization have a written conflict of interest policy? If "No," go to line 13				X										
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?				X										
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done				X										
13 Did the organization have a written whistleblower policy?				X										
14 Did the organization have a written document retention and destruction policy?				X										
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?														
a The organization's CEO, Executive Director, or top management official									X					
b Other officers or key employees of the organization									X					
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).														
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?														X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?														

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **MD**

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records **GAIL FITZGERALD - 301-695-7660**
312 EAST CHURCH STREET, FREDERICK, MD 21701

Form 990 (2018)

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

52-1488711 Page 7

Form 990 (2018)

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) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) THOMAS E. LYNCH, III CHAIRMAN	1.00	X		X				0.	0.	0.
(2) KEVIN HESSLER PAST CHAIRMAN	1.00	X		X				0.	0.	0.
(3) NANCY THRASHER FIRST VICE CHAIRMAN	1.00	X		X				0.	0.	0.
(4) MICHAEL H. DELAUTER SECOND VICE CHAIRMAN	1.00	X		X				0.	0.	0.
(5) C. MATT WILEY SECRETARY	1.00	X		X				0.	0.	0.
(6) JAMES SUMMERS TREASURER	1.00	X		X				0.	0.	0.
(7) ALEJANDRO CANADAS TRUSTEE	1.00	X						0.	0.	0.
(8) AMARIS LITTLE TRUSTEE	1.00	X						0.	0.	0.
(9) COLLEEN CHIDESTER TRUSTEE	1.00	X						0.	0.	0.
(10) DANIEL J. SCHIFFMAN TRUSTEE	1.00	X						0.	0.	0.
(11) DANIEL K. TREGONING TRUSTEE	1.00	X						0.	0.	0.
(12) DARRYN NAYLIN TRUSTEE	1.00	X						0.	0.	0.
(13) GARY L. ROLLINS TRUSTEE	1.00	X						0.	0.	0.
(14) GORDON M. COOLEY TRUSTEE	1.00	X						0.	0.	0.
(15) GREGORY POWELL TRUSTEE	1.00	X						0.	0.	0.
(16) JEAN M. JOYCE TRUSTEE	1.00	X						0.	0.	0.
(17) MICHAEL CUMBERLAND TRUSTEE	1.00	X						0.	0.	0.

Form 990 (2018)

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711 Page 8

Form 990 (2018)

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) NICOLE CHAFITZ ORR TRUSTEE	1.00	X						0.	0.	0.
(19) R. SEAN MCADAM TRUSTEE	1.00	X						0.	0.	0.
(20) RACHEL I. MANDEL TRUSTEE	1.00	X						0.	0.	0.
(21) RICHARD A. PEARRELL TRUSTEE	1.00	X						0.	0.	0.
(22) STACEY L. COLLINS TRUSTEE	1.00	X						0.	0.	0.
(23) TAITIA L. ELLIOTT TRUSTEE	1.00	X						0.	0.	0.
(24) BARBARA K. WALKER TRUSTEE	1.00	X						0.	0.	0.
(25) SHABRI MOORE TRUSTEE	1.00	X						0.	0.	0.
(26) TED LUCK TRUSTEE	1.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								381,089.	0.	44,996.
d Total (add lines 1b and 1c)								381,089.	0.	44,996.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **3**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2018)

52-1488711

[illegible]

832201
04-01-18

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

52-1488711 Page 9

Form 990 (2018)

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 4,955,711.				
	g Noncash contributions included in lines 1a-1f: \$	1,038,197.				
	h Total. Add lines 1a-1f		4,955,711.			
Program Service Revenue	Business Code					
	2 a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		4,038,142.			4,038,142.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
		(i) Real (ii) Personal				
	6 a Gross rents					
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other 17,037,421. 20,000.				
	b Less: cost or other basis and sales expenses	12,177,910. 10,000.				
	c Gain or (loss)	4,859,511. 10,000.				
	d Net gain or (loss)		4,869,511.			4,869,511.
	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a				
	b Less: direct expenses	b				
	c Net income or (loss) from fundraising events					
	9 a Gross income from gaming activities. See Part IV, line 19	a				
	b Less: direct expenses	b				
c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a					
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11 a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions			13,863,364.	0.	0.	8,907,653.

Form 990 (2018)

832009 12-31-18

10

15380228 132974 01834.000

2018.05050 THE COMMUNITY FOUNDATION OF 01834_01

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711 Page **10**

Form 990 (2018)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX <input type="checkbox"/>				
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	5,121,240.	5,121,240.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	1,309,970.	1,309,970.		
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	344,410.	114,307.	180,670.	49,433.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	619,064.	237,985.	145,267.	235,812.
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	14,944.	8,133.	4,301.	2,510.
9 Other employee benefits	65,625.	26,663.	16,898.	22,064.
10 Payroll taxes	68,958.	25,709.	21,368.	21,881.
11 Fees for services (non-employees):				
a Management				
b Legal	12,827.	2,694.	10,133.	
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17	623,328.		623,328.	
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	103,021.	96,824.	132.	6,065.
12 Advertising and promotion	30,737.	9,085.	21,112.	540.
13 Office expenses	64,533.	15,559.	18,254.	30,720.
14 Information technology	57,297.	32,677.	13,808.	10,812.
15 Royalties				
16 Occupancy	83,783.	30,162.	40,723.	12,898.
17 Travel	11,033.	3,994.	3,798.	3,241.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	13,352.	9,532.	656.	3,164.
20 Interest				
21 Payments to affiliates	27,733.	9,984.	14,976.	2,773.
22 Depreciation, depletion, and amortization	11,980.	4,460.	6,322.	1,198.
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a EVENTS	44,511.	16,975.	10,185.	17,351.
b STRATEGIC INITIATIVES	36,372.	1,485.	0.	34,887.
c ANNUAL REPORT	15,422.	5,552.	8,328.	1,542.
d NEWSLETTER	14,181.	1,418.	11,345.	1,418.
e All other expenses	29,203.	10,511.	10,224.	8,468.
25 Total functional expenses. Add lines 1 through 24e	8,723,524.	7,094,919.	1,161,828.	466,777.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

Form **990** (2018)

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711 Page 11

Form 990 (2018)

Part X 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
Assets	1 Cash - non-interest-bearing	963,223.	1,195,846.
	2 Savings and temporary cash investments	292,490.	303,085.
	3 Pledges and grants receivable, net		
	4 Accounts receivable, net		
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		
	7 Notes and loans receivable, net		
	8 Inventories for sale or use	62,918.	97,850.
	9 Prepaid expenses and deferred charges		
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	614,783.	148,015.
	b Less: accumulated depreciation	466,768.	117,861,002.
	11 Investments - publicly traded securities		
	12 Investments - other securities. See Part IV, line 11		
	13 Investments - program-related. See Part IV, line 11		
	14 Intangible assets	3,038,169.	4,149,041.
	15 Other assets. See Part IV, line 11	122,392,838.	129,035,482.
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,321,926.	1,301,595.	
Liabilities	17 Accounts payable and accrued expenses		
	18 Grants payable		
	19 Deferred revenue		
	20 Tax-exempt bond liabilities		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		
	23 Secured mortgages and notes payable to unrelated third parties		
	24 Unsecured notes and loans payable to unrelated third parties		
	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	9,065,669.	9,619,287.
	26 Total liabilities. Add lines 17 through 25	10,387,595.	10,920,882.
Net Assets or Fund Balances	27 Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.	89,958,363.	96,047,360.
	28 Unrestricted net assets	12,313,333.	12,277,290.
	29 Temporarily restricted net assets	9,733,547.	9,789,950.
	30 Permanently restricted net assets		
	31 Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.		
	32 Capital stock or trust principal, or current funds		
	33 Paid-in or capital surplus, or land, building, or equipment fund		
	34 Retained earnings, endowment, accumulated income, or other funds	112,005,243.	118,114,600.
	35 Total net assets or fund balances	122,392,838.	129,035,482.
	36 Total liabilities and net assets/fund balances		

Form 990 (2018)

Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury
Internal Revenue Service

► File a separate application for each return.
► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC.	Enter filer's identifying number Employer identification number (EIN) or 52-1488711
	Number, street, and room or suite no. If a P.O. box, see instructions. 312 EAST CHURCH STREET	Social security number (SSN)
File by the due date for filing your return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions. FREDERICK, MD 21701	

Enter the Return Code for the return that this application is for (file a separate application for each return) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- GAIL FITZGERALD**
 • The books are in the care of ► **312 EAST CHURCH STREET - FREDERICK, MD 21701**
 Telephone No. ► **301-695-7660** Fax No. ► ☐
 • If the organization does not have an office or place of business in the United States, check this box ☐
 • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 6-month extension of time until **MAY 15, 2020**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ► ☐ calendar year ☐ or
 ► ☒ tax year beginning **JUL 1, 2018**, and ending **JUN 30, 2019**.

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2019)

EFILED ON
11-14-19

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

52-1488711 Page 12

Form 990 (2018)

Part 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	13,863,364.
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,723,524.
3	Revenue less expenses. Subtract line 2 from line 1	3	5,139,840.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	112,005,243.
5	Net unrealized gains (losses) on investments	5	293,532.
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	675,985.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	118,114,600.

Part XII Financial Statements and Reporting

☒

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
b Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:		
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Form 990 (2018)

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545-0047

2018

Open to Public Inspection

Internal Revenue Service

Go to www.irs.gov/pub/irsso for instructions and

Name of the organization THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Employer identification number
52-1488711

Part	Reason for Public Charity Status (All organizations must complete this part.) See instructions.
------	---

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

g Provide the following information about the supported organization(s).						
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Total

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

14

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711 Page 2

Schedule A (Form 990 or 990-EZ) 2018

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	8565876.	5069519.	4539653.	6047669.	4955711.	29178428.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	8565876.	5069519.	4539653.	6047669.	4955711.	29178428.
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)						1914701.
6 Public support. Subtract line 5 from line 4.						27263727.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	8565876.	5069519.	4539653.	6047669.	4955711.	29178428.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2343139.	2554892.	2743582.	2886406.	4038142.	14566161.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						43744589.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	62.32	%
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	62.17	%
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>			
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>			
17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>			
b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>			

Schedule A (Form 990 or 990-EZ) 2018

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

52-1488711 Page 3

Schedule A (Form 990 or 990-EZ) 2018

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						

8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Calendar 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						
b 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 for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐
- b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐
- 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Schedule A (Form 990 or 990-EZ) 2018

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711 Page 4

Schedule A (Form 990 or 990-EZ) 2018

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 disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

Schedule A (Form 990 or 990-EZ) 2018

832024 10-11-18

17

15380228 132974 01834.000

2018.05050 THE COMMUNITY FOUNDATION OF 01834_01

Part IV Supporting Organizations (continued)

- 11** Has the organization accepted a gift or contribution from any of the following persons?
- a** 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?
 - b** A family member of a person described in (a) above?
 - c** A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in **Part VI**.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 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.
- 2** Did the organization operate for the benefit of any supported organization other than the supported 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.

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 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).

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 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.

	Yes	No
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a** ☐ The organization satisfied the Activities Test. Complete **line 2** below.
 - b** ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.
 - c** ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions).

2 Activities Test. Answer (a) and (b) below.

- a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI** identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- 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.

- a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in **Part VI**.
- b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

	Yes	No
2a		
2b		
3a		
3b		

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

52-1488711 Page 6

Schedule A (Form 990 or 990-EZ) 2018

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ 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.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1
2	Enter 85% of line 1	2
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3
4	Enter greater of line 2 or line 3	4
5	Income tax imposed in prior year	5
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).	

Schedule A (Form 990 or 990-EZ) 2018

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

Schedule A (Form 990 or 990-EZ) 2018

52-1488711 Page 7

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

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

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
c	From 2015			
d	From 2016			
e	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: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. 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:			
a	Excess from 2014			
b	Excess from 2015			
c	Excess from 2016			
d	Excess from 2017			
e	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

52-1488711 Page 8

Schedule A (Form 990 or 990-EZ) 2018

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

Schedule A (Form 990 or 990-EZ) 2018

832028 10-11-18

21

15380228 132974 01834.000

2018.05050 THE COMMUNITY FOUNDATION OF 01834_01

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2018

**Open to Public
Inspection**

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization **THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.** Employer identification number
52-1488711

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ▶ \$
- 3 Volunteer hours for political campaign activities

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ ☐ Yes ☐ No
- 4 Did the filing organization file Form 1120-POL for this year?
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2018

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?	X		
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		647.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	647.
j Total. Add lines 1c through 1i		X	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018Open to Public
InspectionName of the organization **THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**Employer identification number
52-1488711**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** 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	145	595
2 Aggregate value of contributions to (during year)	678,673.	4,215,273.
3 Aggregate value of grants from (during year)	821,262.	5,609,948.
4 Aggregate value at end of year	12,267,492.	106,689,836.

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds 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 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☒ Yes ☐ No

Part 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).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c 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 organization 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? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1	▶ \$
(ii) Assets included in Form 990, Part X	▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1	▶ \$
b Assets included in Form 990, Part X	▶ \$

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

Schedule D (Form 990) 2018

832051 10-29-18

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711 Page 2

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations
 d ☐ Loan or exchange programs
 e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
1c	
1d	
1e	
1f	

c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	11,336,475.	11,570,024.	11,675,359.	11,894,072.	12,321,616.
b Contributions	58,041.	74,795.	68,273.	125,085.	259,067.
c Net investment earnings, gains, and losses	694,137.	202,255.	545,958.	-8,880.	-4,605.
d Grants or scholarships	482,680.	510,599.	702,167.	334,918.	98,579.
e Other expenditures for facilities and programs			17,399.		583,427.
f Administrative expenses					
g End of year balance	11,605,973.	11,336,475.	11,570,024.	11,675,359.	11,894,072.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ☐ %
 b Permanent endowment ☒ 84.35 %
 c Temporarily restricted endowment ☒ 15.65 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		382,183.	259,437.	122,746.
c Leasehold improvements		232,600.	207,331.	25,269.
d Equipment				
e Other				148,015.

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

Schedule D (Form 990) 2018

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Schedule D (Form 990) 2018

52-1488711 Page 3

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LIABILITIES UNDER SPLIT-INTEREST	
(3) AGREEMENTS	2,198,614.
(4) FUNDS HELD FOR OTHERS (FAS 136)	7,420,673.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	9,619,287.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☒

Schedule D (Form 990) 2018

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

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

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	13,631,767.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	293,532.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	1,224,696.
e	Add lines 2a through 2d	2e	1,518,228.
3	Subtract line 2e from line 1	3	12,113,539.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	623,328.
b	Other (Describe in Part XIII.)	4b	1,126,497.
c	Add lines 4a and 4b	4c	1,749,825.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	13,863,364.

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

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

1	Total expenses and losses per audited financial statements	1	7,488,397.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	130,767.
e	Add lines 2a through 2d	2e	130,767.
3	Subtract line 2e from line 1	3	7,357,630.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	623,328.
b	Other (Describe in Part XIII.)	4b	742,566.
c	Add lines 4a and 4b	4c	1,365,894.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	8,723,524.

Part XIII Supplemental Information.

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

PART V, LINE 4:

THE FOUNDATION HAS A TRUSTEE-APPROVED SPENDING POLICY THAT DISTRIBUTES 5% OF THE FUND'S FAIR MARKET VALUE AS OF JUNE 30 OF THE PREVIOUS FISCAL YEAR FOR ALL FUNDS. ENDOWMENTS SPEND 5% AS LONG AS PRINCIPAL OBTAINED THROUGH CONTRIBUTIONS IS NOT INVADED.

PART X, LINE 2:

THE FOUNDATION FOLLOWS THE PROVISIONS OF ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES UNDER THE INCOME TAXES TOPIC OF THE CODIFICATION. THE CODIFICATION REQUIRES THE EVALUATION OF TAX POSITIONS, WHICH INCLUDE MAINTAINING ITS TAX-EXEMPT STATUS AND THE TAXABILITY OF ANY UNRELATED BUSINESS INCOME, AND DOES NOT ALLOW RECOGNITION OF TAX POSITIONS WHICH DO

Part XIII Supplemental Information (continued)

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:

CHANGE IN CSV	13,075.
RELATED ORGANIZATION INCOME	164,779.
CHANGE IN PV OF FUTURE INTEREST	1,046,842.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	1,224,696.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

FUNDS HELD FOR OTHERS	1,126,497.
-----------------------	------------

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RELATED ORGANIZATION EXPENSES	130,767.
-------------------------------	----------

PART XII, LINE 4B - OTHER ADJUSTMENTS:

FUNDS HELD FOR OTHERS	742,566.
-----------------------	----------

**SCHEDULE F
(Form 990)**Department of the Treasury
Internal Revenue Service**Statement of Activities Outside the United States**

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2018Open to Public
InspectionName of the organization
**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

Employer identification number

52-1488711**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on
Form 990, Part IV, line 14b.**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance,
the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the
United States.**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN -	0	0	ENDOWMENT INVESTMENTS OFF SHORE		6,105,090.
3 a Subtotal	0	0			6,105,090.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			6,105,090.

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

Schedule F (Form 990) 2018

(Form 990) 2018
 Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

[illegible]

Country	Year	Recognized as tax-exempt
United States	1954	Recognized as tax-exempt
Canada	1957	Recognized as tax-exempt
United Kingdom	1960	Recognized as tax-exempt
France	1963	Recognized as tax-exempt
Germany	1966	Recognized as tax-exempt
Italy	1969	Recognized as tax-exempt
Japan	1972	Recognized as tax-exempt
Sweden	1975	Recognized as tax-exempt
Norway	1978	Recognized as tax-exempt
Denmark	1981	Recognized as tax-exempt
Finland	1984	Recognized as tax-exempt
Belgium	1987	Recognized as tax-exempt
Netherlands	1990	Recognized as tax-exempt
Australia	1993	Recognized as tax-exempt
South Africa	1996	Recognized as tax-exempt
Spain	1999	Recognized as tax-exempt
Portugal	2002	Recognized as tax-exempt
Greece	2005	Recognized as tax-exempt
Ireland	2008	Recognized as tax-exempt
Poland	2011	Recognized as tax-exempt
Czech Republic	2014	Recognized as tax-exempt
Slovak Republic	2017	Recognized as tax-exempt
Hungary	2020	Recognized as tax-exempt
Slovenia	2023	Recognized as tax-exempt
Lithuania	2026	Recognized as tax-exempt
Latvia	2029	Recognized as tax-exempt
Estonia	2032	Recognized as tax-exempt
Malta	2035	Recognized as tax-exempt
Cyprus	2038	Recognized as tax-exempt
Israel	2041	Recognized as tax-exempt
India	2044	Recognized as tax-exempt
China	2047	Recognized as tax-exempt
South Korea	2050	Recognized as tax-exempt
Japan	2053	Recognized as tax-exempt
United States	2056	Recognized as tax-exempt

Enter total number of recipient organizations listed above that are recognized as charities by the IRS, for which the grantee or counselor has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities by the IRS, of which the grantee or donee is not a

Schedule F (Form 990) 2018

Schedule F (Form 990) 2018

COUNTY MARYLAND, INC.

Part III Counts and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

[illegible]

Schedule F (Form 990) 2018

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 ☐ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," 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)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)* ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☒ Yes ☐ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ 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 ☒ No

Schedule F (Form 990) 2018

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Schedule F (Form 990) 2018

52-1488711 Page 5

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

Name of the organization

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

Employer identification number
52-1488711

2018
Open to Public
Inspection

OMB No. 1545-0047

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ADVENTIST HEALTH CARE, INC. 1801 RESEARCH BLVD, #400 ROCKVILLE, MD 20850	52-1532556	501(C)(3)	30,209.	0.			UNRESTRICTED CASE MGR, TRANSPORTATION, CHILDCARE ASSIST, EMERGENCY FINANCIAL ASSIST, AFTER-SCHOOL AND
ADVOCATES FOR HOMELESS FAMILIES, INC. - 216 ABRECHT PL - FREDERICK, MD 21701	52-1591139	501(C)(3)	77,622.	0.			UNRESTRICTED
ALL BLESSINGS INTERNATIONAL'S FUND AT PURE CHARITY - 3808 SOUTH DIRFETH AVE - OWENSBORO, KY 42301	30-0090752	501(C)(3)	5,399.	0.			UNRESTRICTED
ALL SAINTS EPISCOPAL CHURCH 106 WEST CHURCH STREET FREDERICK, MD 21701	52-0610441	501(C)(3)	26,435.	0.			BUILDING FUND, UNRESTRICTED FINANCIAL EMERGENCY SUPPORT AND DIRECT SERVICES FOR RESIDENTS OF FREDERICK COUNTY, FREDERICK COUNTY SERVICES, CENTER-BASED EMPLOYMENT TRAINING PROGRAMS, UNRESTRICTED
AMERICAN NATIONAL RED CROSS 431 18TH ST. NW WASHINGTON, DC 20013	53-0196605	501(C)(3)	11,914.	0.			
ARC OF FREDERICK COUNTY, INC. 620-A RESEARCH DR FREDERICK, MD 21703-8619	52-6055211	501(C)(3)	162,992.	0.			
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table					107.		
3 Enter total number of other organizations listed in the line 1 table					0.		

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2018)

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711 Page 1

Schedule I (Form 990) Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

Part II	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
	ASCENSION EPISCOPAL CHURCH 23 N COURT ST WESTMINSTER, MD 21157	23-7376868	501(C)(3)	5,000.	0.			SALARIES FOR YOUTH MINISTRY
	BLESSINGS IN A BACKPACK, INC. P.O. BOX 3508 FREDERICK, MD 21705	26-1964620	501(C)(3)	39,087.	0.			UNRESTRICTED FOR FREDERICK COUNTY, WEEKEND FOOD BACKPACKS
	BOY SCOUTS OF AMERICA 9190 ROCKVILLE PIKE BETHESDA, MD 20814	53-0204610	501(C)(3)	7,127.	0.			CHESTNUT GROVE RD WATERSHED, UNRESTRICTED
	BRAINY CAMPS 111 MICHIGAN AVE NW WASHINGTON, DC 20010	27-1547370	501(C)(3)	10,750.	0.			CAMP NEW FRIENDS
	BROADFORDING CHURCH OF THE BRETHREN - 13523 BROADFORDING CHURCH RD - HAGERSTOWN, MD 21740	23-7205826	501(C)(3)	61,863.	0.			UNRESTRICTED
	CALVARY UNITED METHODIST CHURCH 131 WEST SECOND STREET FREDERICK, MD 21701	52-0685068	501(C)(3)	11,724.	0.			PRESCHOOL SCHOLARSHIPS AND EXPENSES, UNRESTRICTED
	CARE NET PREGNANCY CENTER OF FREDERICK COUNTY - 707 NORTH MARKET ST. - FREDERICK, MD 21701	52-1322581	501(C)(3)	12,053.	0.			DIAPERS, WIPES, RASH CREAM, CAR SEATS FOR LOW INCOME MOTHERS WITH CHILDREN
	CARROLL MANOR FIRE COMPANY 2795 ADAMS ST ADAMSTOWN, MD 21710	52-1293774	501(C)(3)	22,688.	0.			UNRESTRICTED
	CATHOLIC CHARITIES OF THE DIOCESE OF RALEIGH INC. - 7200 STONEHENGE DR. - RALEIGH, NC 27613	56-0529943	501(C)(3)	5,000.	0.			SUPPORT CIRCLE PROGRAM FOR HOMELESS FAMILIES

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711 Page 1

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN OF INCARCERATED PARENTS PARTNERSHIP INC. - PO BOX 791 - FREDERICK, MD 21714	27-3552072	501(C)(3)	5,674.	0.			UNRESTRICTED, RE-ENTRY RESOURCES FOR WOMEN, CONTINUING EDUCATION FOR FAMILY INDEPENDENCE
CHURCH OF THE TRANSFIGURATION 5909 MARYLAND AVE., P.O. BOX 87 BRADDOCK HEIGHTS, MD 21714	52-1549171	501(C)(3)	252,210.	0.			UNRESTRICTED
CITIZENS CARE & REHABILITATION CENTER AND MONTEVUE HOME - 1900 ROSEMONT AVE. - FREDERICK, MD 21702	52-6000943	FREDERICK COUNTY	24,995.	0.			SPECIALIZED LIFT EQUIPMENT
CITY OF FREDERICK ECONOMIC DEVELOPMENT - 101 NORTH COURT ST. - FREDERICK, MD 21701	52-6000789	FREDERICK COUNTY	10,706.	0.			BEST PLACES TO WORK AND CITY OF FREDERICK DAY EVENTS
COUNCIL ON FOUNDATIONS 2121 CRYSTAL DR, SUITE 700 ARLINGTON, VA 22202	13-6068327	501(C)(3)	12,850.	0.			UNRESTRICTED
COVENANT PRESBYTERIAN CHURCH 6926 TRAIL BLVD NAPLES, FL 34108	52-1098689	501(C)(3)	15,000.	0.			UNRESTRICTED
DAYBREAK ADULT DAY SERVICES 7819 ROCKY SPRINGS RD FREDERICK, MD 21702	52-1598993	501(C)(3)	5,000.	0.			SUBSIDIES FOR ADULT MEDICAL DAY CARE
DELAPLAINE VISUAL ARTS EDUCATION CENTER - 40 S. CARROLL STREET - FREDERICK, MD 21701	52-1481592	501(C)(3)	25,398.	0.			ART CLASSES FOR CHILDREN, SCHOLARSHIPS TO ELEMENTARY AGE CHILDREN TAKING ART
DOWNTOWN FREDERICK PARTNERSHIP, INC. - 19 E. CHURCH ST. - FREDERICK, MD 21701	52-1682341	501(C)(3)	163,278.	0.			FLOWERS OVER FREDERICK PROJECT AND DOWNTOWN HOLIDAY LIGHTS

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711 Page 1

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DR. J. ELMER HARP MEDICAL CENTER, INC. - 400 EAST MAIN ST - MIDDLETOWN, MD 21769	52-1076100	501(C)(3)	11,486.	0.			SCHOLARSHIPS FOR STUDENTS IN MIDDLETOWN, MD VALLEY PURSUING CAREERS IN MEDICAL/HEALTH FIELDS
EBENEZER A.M.E. CHURCH 710 N MAPLE AVE BRUNSWICK, MD 21716	30-0321519	501(C)(3)	12,000.	0.			UNRESTRICTED OPERATING EXPENSES AND YOUTH TRAINING TO DIVERT FOOD WASTE FROM LANDFILL AND TO MAKE AVAILABLE FOR
ENVISION FREDERICK COUNTY INC. PO BOX 481 FREDERICK, MD 21705	27-4539613	501(C)(3)	10,675.	0.			MELKA OLGA NUTRITION PROGRAM EXPENSES
ETHIOPIAN CHILDREN'S APPEAL 9463 DUNRAVEN ST FREDERICK, MD 21704	47-5464798	501(C)(3)	6,595.	0.			MAINTENANCE & PRESERVATION OF BUILDINGS, UNRESTRICTED
EVANGELICAL LUTHERAN CHURCH 35 EAST CHURCH ST. FREDERICK, MD 21701	52-0627772	501(C)(3)	16,739.	0.			SENIOR LIVING CAPITAL CAMPAIGN AND UNRESTRICTED
FAHRNEY-KEEDY MEMORIAL HOME, INC. 8507 MAPLEVILLE RD BOONSBORO, MD 21713	52-0610464	501(C)(3)	5,250.	0.			BRIGHT FUTURES 2018& 2019 PROGRAMS, SALARIES AND EXPENSES
FAMILY PARTNERSHIP OF FREDERICK COUNTY - 8420 GAS HOUSE PIKE - FREDERICK, MD 21701	52-6000943	FREDERICK COUNTY	45,925.	0.			UNRESTRICTED, TO PROMOTE PRO-HEALTH ACTIVITIES FOR FEMALE, HEAD OF HOUSEHOLDS LIVING IN
FEDERATED CHARITIES CORPORATION OF FREDERICK - 22 S. MARKET ST. - FREDERICK, MD 21701	52-0608003	501(C)(3)	5,139.	0.			UNRESTRICTED
FLOURISH NOW 15275 COLLIER BLVD NAPLES, FL 34119	47-5591391	501(C)(3)	5,000.	0.			

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711 Page 1

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FREDERICK CITY POLICE DEPARTMENT 100 W. PATRICK ST. FREDERICK, MD 21701	52-6000789	FREDERICK COUNTY	9,301.	0.			JACK STANDS, ALCO-SENSOR TEST FOR MD STATE POLICE, TRAINING, INTOXICLOCK PRO PROGRAM
FREDERICK COMMUNITY ACTION AGENCY 100 S. MARKET ST. FREDERICK, MD 21701	52-1036628	FREDERICK COUNTY	29,404.	0.			HOUSING FIRST PROGRAM EXPENSES, FOOD BANK, BACKPACKS, SCHOOL BASED HEALTH CENTER, HEALTH STUDENT SUCCESS PROGRAM, PROJECT STEP FORWARD PROGRAM, ALLIED HEALTH ACADEMY FOR UNEMPLOYED OR
FREDERICK COMMUNITY COLLEGE FOUNDATION, INC. - 7932 OPOSSUMTOWN PIKE - FREDERICK, MD 21702	52-1231768	501(C)(3)	55,634.	0.			
FREDERICK COUNTY 4-H BEEF SHEEP & SWINE CLUB - 330 MONTEVUE LN - FREDERICK, MD 21702-8214	45-0477031	501(C)(3)	5,015.	0.			UNRESTRICTED
FREDERICK COUNTY DEPARTMENT OF SOCIAL SERVICES - 1888 NORTH MARKET ST - FREDERICK, MD 21701	52-6000943	501(C)(3)	10,000.	0.			HOLIDAY SUPPORT FOR FOSTER CHILDREN AND FRAGILE SENIORS
FREDERICK COUNTY HUMANE SOCIETY 550 HIGHLAND ST. FREDERICK, MD 21701	52-6013207	501(C)(3)	5,582.	0.			EMERGENCY ASSISTANCE PROGRAM, SPAYING OF ADOPTABLE ANIMALS FOR LOW-INCOME FAMILIES,
FREDERICK COUNTY LANDMARKS FOUNDATION, INC. - 1110 ROSEMONT AVE. - FREDERICK, MD 21701	23-7241926	501(C)(3)	18,085.	0.			HISTORIC PRESERVATION SUMMER CHALLENGE PROGRAM EXPENSES, THURMONT LIBRARY, BOOKS, CHILDREN'S PROGRAM, WALKERSVILLE HS, MEDIA
FREDERICK COUNTY PUBLIC LIBRARIES 110 EAST PATRICK ST. FREDERICK, MD 21701	52-0591537	501(C)(3)	71,664.	0.			CENTER BOOKS FOR MONOCACY ELEMENTARY, ARCHERY PROGRAM AT WINDSOR KNOLLS
FREDERICK COUNTY PUBLIC SCHOOLS 191 SOUTH EAST ST. FREDERICK, MD 21701	52-6000941	501(C)(3)	25,007.	0.			

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711

Page 1

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FREDERICK COUNTY, MD GOVERNMENT 12 EAST CHURCH ST. FREDERICK, MD 21701	52-6000943	FREDERICK COUNTY	34,610.	0.			TRAINING EXPENSES FOR EMPLOYEES OF CITIZENS CARE AND MONTEVUE ASSISTED LIVING, YOUTH
FREDERICK INNOVATIVE TECHNOLOGY CENTER, INC. - 4539 METROPOLITAN CT. - FREDERICK, MD 21704	20-1262262	501(C)(3)	5,000.	0.			UNRESTRICTED
FREDERICK MEMORIAL HOSPITAL 400 WEST SEVENTH ST. FREDERICK, MD 21701-4593	52-0591612	501(C)(3)	920,611.	0.			GOOD SAMARITAN, EMERGENCY SERVICES, UNRESTRICTED
FREDERICK RESCUE MISSION, INC. 419 WEST SOUTH ST. FREDERICK, MD 21701	52-0813371	501(C)(3)	103,672.	0.			CHANGED LIFE RECOVERY PROGRAM, CASE MANAGER EXPENSES, FAITH HOUSE CASE MANAGER AND
FRIENDS OF BAKER PARK, INC. PO BOX 4146 FREDERICK, MD 21705	52-1759639	501(C)(3)	47,306.	0.			CULLER LAKE PROJECT AND BOCCIE COURTS
FRIENDS OF CATHOLIC EDUCATION, INC. - P.O. BOX 3710 - FREDERICK, MD 21705	52-1659600	501(C)(3)	100,841.	0.			SCHOLARSHIPS FOR CATHOLIC EDUCATION IN FREDERICK COUNTY
FRIENDS OF THE CHILD ADVOCACY CENTER - 4210 SPRINGVIEW CT. - JEFFERSON, MD 21755	20-5149362	501(C)(3)	25,000.	0.			SUPPORTING FAMILIES AND CHILDREN SERVED BY THE CHILD ADVOCACY CENTER
GIRL SCOUT COUNCIL OF THE NATION'S CAPITAL - 4301 CONNECTICUT AVE., NW SUITE M-2 - WASHINGTON, DC 20008	54-0732966	501(C)(3)	9,382.	0.			GIRL SCOUTS IN FREDERICK COUNTY
GLADE UNITED CHURCH OF CHRIST 21 FULTON AVENUE, P.O. BOX 236 FREDERICK, MD 21793	52-0679615	501(C)(3)	9,526.	0.			UNRESTRICTED AND CEMETERY

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-148711 Page 1

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOOD SHEPHERD EVANGELICAL LUTHERAN CHURCH - 1415 W. 7TH ST. - FREDERICK, MD 21701	52-6019540	501(C)(3)	5,000.	0.			UNRESTRICTED
GOODWILL INDUSTRIES OF THE MONOCACY VALLEY, INC. - 400 EAST CHURCH STREET - FREDERICK, MD 21701	23-7047548	501(C)(3)	7,219.	0.			CAPITAL IMPROVEMENT FUND, PROGRAMS THAT TRAIN & EDUCATION PERSONS WITH DISABILITIES,
GRACEHAM MORAVIAN CHURCH 8231-A ROCKY RIDGE RD THURMONT, MD 21788	52-0607996	501(C)(3)	61,349.	0.			UNRESTRICTED AND CEMETERY UNRESTRICTED, TUB CUT, PROVIDE AN AFFORDABLE HOUSING OWNERSHIP OPPORTUNITY, COMPUTER
HABITAT FOR HUMANITY OF FREDERICK COUNTY - 117 E CHURCH ST - FREDERICK, MD 21701	52-1820647	501(C)(3)	11,740.	0.			RENTAL ASSISTANCE, MALE SURVIVORS SUPPORT GROUP, MEDICAL ACCOMPANIMENT & ADVOCACY FOR HIGH RISK MAINTENANCE &
HEARTLY HOUSE, INC. P.O. BOX 857 FREDERICK, MD 21705	52-1186250	501(C)(3)	56,610.	0.			PRESERVATION OF BUILDINGS, MATERIALS, TRAINING AND ACTIVITIES
HISTORICAL SOCIETY OF FREDERICK COUNTY, INC. - 24 EAST CHURCH ST. - FREDERICK, MD 21701	52-6050333	501(C)(3)	63,147.	0.			UNRESTRICTED FOR CRUMLAND FARMS, THE BENEVOLENCE FUND, ALZHEIMER UNIT FOR SERVICES TO PERSONS WITH SCHOLARSHIPS AND
HOMEWOOD FOUNDATION, INC. P.O. BOX 250 WILLIAMSPORT, MD 21795	52-1892689	501(C)(3)	29,689.	0.			FINANCIAL AID, MATH DAY, SUMMER CONCERT SERIES, CAMPUS GROUNDS
HOOD COLLEGE 401 ROSEMONT AVE FREDERICK, MD 21701	52-0591608	501(C)(3)	49,950.	0.			CAMP JAMIE, OVERDOSE GRIEF SUPPORT EXPENSES, HEALING AT CAMP JAMIE VIDEOS, EMERGENCY
HOSPICE OF FREDERICK COUNTY, INC. P.O. BOX 1799 FREDERICK, MD 21702	52-1164513	501(C)(3)	109,590.	0.			

Schedule I (Form 990)

THE COMMUNITY FOUNDATION OF FREDERICK

52-1488711 Page 1

Schedule I (Form 990)

COUNTY MARYLAND, INC.

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOUSING AUTHORITY OF THE CITY OF FREDERICK - 209 MADISON ST. - FREDERICK, MD 21701	52-6001395	501(C)(3)	69,002.	0.			YOUNG MEN RISING PROGRAM, WOMEN SUCCEEDING IN EDUCATION ASSISTANCE WITH TRANSPORTATION,
HOWARD CHAPEL RIDGEVILLE UNITED METHODIST CHURCH - 1970 LONG CORNER RD. - MOUNT AIRY, MD 21771	52-1079627	501(C)(3)	290,527.	0.			CHURCH PROGRAMS
INTERFAITH HOUSING ALLIANCE, INC. 5301 BUCKEYSTOWN PIKE, STE. 320 FREDERICK, MD 21704	52-1708782	501(C)(3)	16,304.	0.			SELF SUFFICIENCY COUNSELING EXPENSES, HOUSING COUNSELING & FINANCIAL LITERACY
JOHNS HOPKINS MEDICINE P.O. BOX 17046 BALTIMORE, MD 21298-0001	52-0595110	501(C)(3)	5,000.	0.			SIDNEY KIMMEL COMPREHENSIVE CANCER CENTER/DR. EVAN LIPSON MELANOMA RESEARCH
KIWANIS CLUB OF SUBURBAN FREDERICK 5613 BROADMOOR TERR. N IJAMSVILLE, MD 21754	52-1719948	501(C)(3)	8,606.	0.			MIDDLETOWN MS KI BUILDERS CLUB, GOV THOMAS JOHNSON HS, HOLIDAY GIFT WRAP SUPPLIES
LINGANORE OAKDALE URBANA YOUTH ATHLETIC ASSOCIATION - P.O. BOX 302 - NEW MARKET, MD 21774	52-1126673	501(C)(3)	8,000.	0.			BALL FIELD CONSTRUCTIONS AND IMPROVEMENTS
LITERACY COUNCIL OF FREDERICK COUNTY, INC. - 110 EAST PATRICK ST. - FREDERICK, MD 21701	52-1100228	501(C)(3)	7,460.	0.			MATERIALS FOR WOMEN'S LITERACY PROGRAMS, SMALL BUSINESS WORKPLACE LITERACY CLASS EXPENSES.
MARS HILL UNIVERSITY PO BOX 370 MARS HILL, NC 28754	56-0554207	501(C)(3)	9,481.	0.			SCHOLARSHIP AND FINANCIAL AID FUND
MARYLAND 4-H CLUB FOUNDATION, INC. 8020 GREENMEAD DR. COLLEGE PARK, MD 20815	52-6056016	501(C)(3)	30,209.	0.			UNRESTRICTED FOR MONTCOMGERY COUNTY 4-H CLUB

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711 Page 1

Schedule I (Form 990) Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARYLAND FFA FOUNDATION, INC. P.O. BOX 3241 SILVER SPRING, MD 20918-3241	52-1354382	501(C)(3)	31,269.	0.			UNRESTRICTED AND FOR CHAPTER CLOSEST TO POOLESVILLE, MD
MARYLAND FOOD BANK 2200 HALETHORPE FARMS RD BALTIMORE, MD 21227	52-1135690	501(C)(3)	5,000.	0.			SENIOR PANTRY PROGRAM EXPENSES
MCDANIEL COLLEGE 2 COLLEGE HILL WESTMINSTER, MD 21157-4390	52-0591694	501(C)(3)	5,668.	0.			UNRESTRICTED AND SCHOLARSHIP FUND
MENTAL HEALTH ASSOCIATION OF FREDERICK COUNTY, INC. - 226 SOUTH JEFFERSON ST - FREDERICK, MD 21701	52-0968521	501(C)(3)	93,818.	0.			PARENT COACHING EXPENSES, HEALTHY FAMILIES PROGRAM, CASA OF FREDERICK COUNTY, MHA CRISIS SERVICES,
MISSION OF MERCY, INC. 22 S. MARKET ST FREDERICK, MD 21701	86-0704883	501(C)(3)	65,089.	0.			DENTAL CARE, MEDICATIONS AND MEDICAL CARE FOR WOMEN, OPIOID ALTERNATIVE PAIN RELIEF AND SAFETY,
MONOCACY HEALTH PARTNERS 16840 SOUTH SETON AVE EMMITSBURG, MD 21727	45-4133096	501(C)(3)	20,000.	0.			DENTAL CLINIC EXPENSES
MONTGOMERY COUNTY PUBLIC SCHOOLS 8501 HUNGERFORD DR., #149 ROCKVILLE, MD 20850	52-1804509	501(C)(3)	60,418.	0.			SCHOLARSHIP FOR NEEDY STUDENTS AT POOLESVILLE HS
MOUNT HOPE CEMETERY PO BOX 136 WOODSBORO, MD 21798	52-1947339	501(C)(3)	5,385.	0.			REPAIRS TO CEMETERY HISTORIC SECTION
MT. AIRY VOLUNTEER FIRE COMPANY 702 N. MAIN ST. MOUNT AIRY, MD 21771	52-0422267	501(C)(3)	5,000.	0.			FORCIBLE DOOR PROP TRAINER EXPENSES

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711 Page 1

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL LUTHERAN HOME FOR THE AGED - 9701 VIERS DR - ROCKVILLE, MD 20850	53-0196624	501(C)(3)	15,000.	0.			UNRESTRICTED
NATIONAL OPERA ASSOCIATION, INC. P.O. BOX 60869 CANYON, TX 79016-0869	38-6089684	501(C)(3)	7,500.	0.			SCHOLARSHIP FUND
NEW HOPE UNITED METHODIST CHURCH OF GREATER BRUNSWICK - SOUTH MARYLAND AVENUE - BRUNSWICK, MD 21716	52-0683373	501(C)(3)	5,748.	0.			UNRESTRICTED
OPERATION SECOND CHANCE INC. 20251 CENTURY BLVD GERMANTOWN, MD 20874	20-2624345	501(C)(3)	12,000.	0.			ASSISTANCE TO VETERANS AND THEIR FAMILIES IN THE GREATER WASHINGTON AREA
OTHER VOICES, INC. 244 S. JEFFERSON ST. FREDERICK, MD 21701	52-2046378	501(C)(3)	5,000.	0.			UNRESTRICTED
PARTNERS IN CARE, INC. 90B RITCHIE HIGHWAY PASADENA, MD 21122	52-1911806	501(C)(3)	10,500.	0.			MEMBER CAPACITY BUILDING PROGRAM EXPENSES AND PROGRAMS IN FREDERICK COUNTY
PATTY POLLATOS FUND, INC. 22 S. MARKET ST. FREDERICK, MD 21701	52-2272934	501(C)(3)	194,350.	0.			MEDICAL AND LIVING EXPENSES FOR FREDERICK COUNTY RESIDENTS WITH CANCER AND OTHER MEDICAL
PLANNED PARENTHOOD OF MARYLAND, INC. - 330 N. HOWARD ST. - BALTIMORE, MD 21201	52-0607930	501(C)(3)	10,500.	0.			WOMEN'S STI SCREENING AND TREATMENT SERVICES LIVING BELOW POVERTY LEVEL, AND UNRESTRICTED
PLEASANT VIEW CHURCH OF THE BRETHREN - 6213 PICNIC WOODS RD. - JEFFERSON, MD 21755	36-2167026	501(C)(3)	5,434.	0.			UNRESTRICTED

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711 Page 1

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RELIGIOUS COALITION FOR EMERGENCY HUMAN NEEDS - 27 DEGRANGE ST. - FREDERICK, MD 21701	52-1449375	501(C)(3)	97,520.	0.			HOUSING STABILIZATION EXPENSES, HOMELESS SHELTER EXPENSES, HOMELESSNESS PREVENTION
SAINT JOHN'S CATHOLIC PREP PO BOX 909 BUCKEYSTOWN, MD 21717	52-0954961	501(C)(3)	28,232.	0.			SCHOLARSHIP FUNDS AND PROMISES CAMPAIGN
SALVATION ARMY 223 W FIFTH ST FREDERICK, MD 21702	22-2406433	501(C)(3)	12,093.	0.			EMERGENCY FOOD AND SHELTER PROGRAMS, DIRECT SERVICES PROVIDED IN FREDERICK COUNTY MD,
SECOND CHANCES GARAGE, INC. 528 N MARKET ST. FREDERICK, MD 21701	27-1336325	501(C)(3)	33,300.	0.			SUBSIDIZED CAR REPAIRS FOR WOMEN PROGRAM, REFURBISHED PROGRAM FOR WOMEN, DRIVING SCHOOL
SETON CENTER, INC. 16840 S. SETON AVE. EMMITSBURG, MD 21727	52-1182284	501(C)(3)	24,000.	0.			DEPAUL DENTAL WOMEN'S PROGRAM AND DENTAL SERVICES
SHIP OF FREDERICK COUNTY P.O. BOX 1629 FREDERICK, MD 21702	47-2272768	501(C)(3)	25,252.	0.			NEW HORIZONS FREDERICK SUMMER PROGRAM EXPENSES, UNRESTRICTED
SIERRA CLUB FOUNDATION 2101 WEBSTER STREET OAKLAND, CA 94612	94-6069890	501(C)(3)	5,000.	0.			MARYLAND CHAPTER UNRESTRICTED
SOPHIE AND MADIGAN'S PLAYGROUND, INC. - PO BOX 1628 - FREDERICK, MD 21702	46-2982953	501(C)(3)	5,490.	0.			MARKETING MATERIALS, ACCESSIBLE GROUND COVER, CASE MGR, TRANSPORTATION, CRITICAL SERVICES
SPANISH SPEAKING COMMUNITY OF MD, INC. - 329 S JEFFERSON ST - FREDERICK, MD 21701	52-0889386	501(C)(3)	10,971.	0.			PARTNERSHIP WITH FREDERICK COUNTY PUBLIC

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

52-1488711 Page 1

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPECIAL OPERATIONS FUND 901 N STUART ST. ARLINGTON, VA 22203	52-1765222	501(C)(3)	5,000.	0.			UNRESTRICTED
ST. JOHN'S CEMETERY, INC. 116 EAST 2ND ST FREDERICK, MD 21701	52-1746331	501(C)(3)	295,000.	0.			BUILDING EXPENSES ASSOCIATED WITH THE COLUMBARIUM YOUTH PROGRAMS, LICENSED SOCIAL WORKER TO LEAD SUPPORT GROUP FOR WOMEN PARENTING TRANSGENDER
THE FREDERICK CENTER, INC. PO BOX 3231 FREDERICK, MD 21705-3231	46-1705400	501(C)(3)	5,786.	0.			
THURMONT SENIOR CENTER, INC. 806 E. MAIN ST. THURMONT, MD 21788	45-5325212	501(C)(3)	10,666.	0.			THURMONT SENIOR CENTER COORDINATOR
UNITED WAY OF FREDERICK COUNTY, INC. - 629 NORTH MARKET ST - FREDERICK, MD 21701	52-0607973	501(C)(3)	45,151.	0.			UNITY CAMPAIGN, ALICE REPORT AND UNRESTRICTED
UNIVERSITY OF MARYLAND COLLEGE PARK FOUNDATION INC. - 1221 SYMONS HALL - COLLEGE PARK, MD 21742	52-2197313	501(C)(3)	30,209.	0.			UNRESTRICTED
UNIVERSITY OF ROCHESTER PO BOX 270032 ROCHESTER, NY 14627	16-0743209	501(C)(3)	73,590.	0.			PIANO CONCERTS
WALKERSVILLE UNITED METHODIST CHURCH - 22 MAIN ST. - WALKERSVILLE, MD 21793	52-6043801	501(C)(3)	9,134.	0.			UNRESTRICTED TIVOLI SOCIETY, FAMILIES NEED FUND PROGRAM EXPENSES, CAPITAL IMPROVEMENTS.
WEINBERG CENTER FOR THE ARTS, INC. 20 WEST PATRICK ST. FREDERICK, MD 21701	52-1900511	501(C)(3)	9,669.	0.			

Schedule I (Form 990)

Page 1

COUNTY MARYLAND, INC.

(iii)

Schedule I (Form 990)

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

52-1488711

Page 2

Schedule I (Form 990) (2018)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	375	1,309,970.	0.		

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

PART I, LINE 2:

THROUGH THE GRANT APPLICATION PROCESS, NONPROFIT ORGANIZATIONS MUST

DESCRIBE THE PROGRAM FOR WHICH THEY ARE REQUESTING SUPPORT AND MUST

DEMONSTRATE HOW THE GRANT WILL NOT ONLY HELP ACHIEVE THEIR GOALS, BUT HOW

THE GRANT WILL POSITIVELY IMPACT THE COMMUNITY. MIDTERM AND/OR FINAL GRANT

REPORTS FROM EACH ORGANIZATION ENSURE ACCOUNTABILITY.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: ADVOCATES FOR HOMELESS FAMILIES, INC.

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: CASE MGR, TRANSPORTATION, CHILDCARE
ASSIST, EMERGENCY FINANCIAL ASSIST, AFTER-SCHOOL AND SUMMER
ACTIVITIES, PLANNING CONSULTANT, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: AMERICAN NATIONAL RED CROSS

(H) PURPOSE OF GRANT OR ASSISTANCE: FINANCIAL EMERGENCY SUPPORT AND
DIRECT SERVICES FOR RESIDENTS OF FREDERICK COUNTY, HURRICANE FLORENCE
RECOVERY, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

DELAPLAINE VISUAL ARTS EDUCATION CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: ART CLASSES FOR CHILDREN,
SCHOLARSHIPS TO ELEMENTARY AGE CHILDREN TAKING ART
INSTRUCTION, OPERATIONAL SUPPORT, EXHIBIT PRODUCTIONS, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: ENVISION FREDERICK COUNTY INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: OPERATING EXPENSES AND YOUTH
TRAINING TO DIVERT FOOD WASTE FROM LANDFILL AND TO MAKE AVAILABLE FOR
REUSE

NAME OF ORGANIZATION OR GOVERNMENT:

FEDERATED CHARITIES CORPORATION OF FREDERICK

(H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED, TO PROMOTE PRO-HEALTH
ACTIVITIES FOR FEMALE, HEAD OF HOUSEHOLDS LIVING IN PUBLIC HOUSING
RECEIVING SNAP BENEFITS, COMMUNITY TABLE PROJECT, RAPID RESPONSE PROJECT

NAME OF ORGANIZATION OR GOVERNMENT: FREDERICK COMMUNITY ACTION AGENCY

(H) PURPOSE OF GRANT OR ASSISTANCE: HOUSING FIRST PROGRAM EXPENSES, FOOD

Part IV Supplemental Information

BANK, BACKPACKS, SCHOOL BASED HEALTH CENTER, HEALTH CENTER EXPENSES

NAME OF ORGANIZATION OR GOVERNMENT:

FREDERICK COMMUNITY COLLEGE FOUNDATION, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: STUDENT SUCCESS PROGRAM, PROJECT
STEP FORWARD PROGRAM, ALLIED HEALTH ACADEMY FOR UNEMPLOYED OR
UNDEREMPLOYED WOMEN, MARYLAND DIVORCE CUSTODY NOTEBOOK TRAINING &
ASSESSMENT PROGRAM, SCHOLARSHIPS, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: FREDERICK COUNTY HUMANE SOCIETY

(H) PURPOSE OF GRANT OR ASSISTANCE: EMERGENCY ASSISTANCE PROGRAM,
SPAYING OF ADOPTABLE ANIMALS FOR LOW-INCOME FAMILIES, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: FREDERICK COUNTY PUBLIC LIBRARIES

(H) PURPOSE OF GRANT OR ASSISTANCE: SUMMER CHALLENGE PROGRAM EXPENSES,
THURMONT LIBRARY, BOOKS, CHILDREN'S PROGRAM, TRAINING, MATERIALS AND
ACTIVITIES FOR THE MARYLAND ROOM, MAINTENANCE

NAME OF ORGANIZATION OR GOVERNMENT: FREDERICK COUNTY PUBLIC SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: WALKERSVILLE HS, MEDIA CENTER BOOKS
FOR MONOCACY ELEMENTARY, ARCHERY PROGRAM AT WINDSOR KNOLLS MS,
MIDDLETOWN, WALKERSVILLE, GOV THOMAS JOHNSON HIGH SCHOOLS KEY CLUBS, GOV
THOMAS JOHNSON HS WEIGHT ROOM RENOVATION, CATOCTIN HS WRESTLING PROGRAM,
URBANA MS SCIENCE DEPARTMENT, PROGRAMS FOR STUDENTS WITH DYSLEXIA, MIDDLE
SCHOOL SHARED MUSIC LIBRARY, BRUNSWICK MD ENRICHMENT PROGRAM, AGRICULTURE
EDUCATION AND ACTIVITIES, ACADEMIC AND EXTRA-CURRICULAR PROGRAMS AND
ACTIVITIES AT CATOCTIN HS, HILLCREST ELEMENTARY ENRICHMENT AND
ENHANCEMENT PROGRAMS, STUDENT ENRICHMENT PROGRAMS THROUGHOUT THE

Part IV Supplemental Information

FREDERICK COUNTY PUBLIC SCHOOLS

NAME OF ORGANIZATION OR GOVERNMENT: FREDERICK COUNTY, MD GOVERNMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: TRAINING EXPENSES FOR EMPLOYEES OF
CITIZENS CARE AND MONTEVUE ASSISTED LIVING, YOUTH OFFENDER PROGRAM, RENT
AND MORTGAGE EXPENSES FOR THOSE IN NEED

NAME OF ORGANIZATION OR GOVERNMENT: FREDERICK RESCUE MISSION, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: CHANGED LIFE RECOVERY PROGRAM, CASE
MANAGER EXPENSES, FAITH HOUSE CASE MANAGER AND SPECIALIST EXPENSES,
TRANSPORTATION EXPENSES, NEW UTENSILS FOR RENOVATED KITCHEN, SUMMER CAMP
ENRICHMENT EXPENSES. UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

GOODWILL INDUSTRIES OF THE MONOCACY VALLEY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: CAPITAL IMPROVEMENT FUND, PROGRAMS
THAT TRAIN & EDUCATION PERSONS WITH DISABILITIES, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: HEARTLY HOUSE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RENTAL ASSISTANCE, MALE SURVIVORS
SUPPORT GROUP, MEDICAL ACCOMPANIMENT & ADVOCACY FOR HIGH RISK VICTIMS
EXPENSES, TRAINING NEW ADVOCATES, CHILD COUNSELING EXPENSES, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

HISTORICAL SOCIETY OF FREDERICK COUNTY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: MAINTENANCE & PRESERVATION OF
BUILDINGS, MATERIALS, TRAINING AND ACTIVITIES THAT PROMOTE HISTORIC
RESEARCH AND PROGRAMS THAT COVER HISTORIC TOPICS, UNRESTRICTED

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: HOMEWOOD FOUNDATION, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED FOR CRUMLAND FARMS, THE
BENEVOLENCE FUND, ALZHEIMER UNIT FOR SERVICES TO PERSONS WITH ALZHEIMER'S

NAME OF ORGANIZATION OR GOVERNMENT: HOOD COLLEGE

(H) PURPOSE OF GRANT OR ASSISTANCE: SCHOLARSHIPS AND FINANCIAL AID, MATH
DAY, SUMMER CONCERT SERIES, CAMPUS GROUNDS BEAUTIFICATION, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: HOSPICE OF FREDERICK COUNTY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: CAMP JAMIE, OVERDOSE GRIEF SUPPORT
EXPENSES, HEALING AT CAMP JAMIE VIDEOS, EMERGENCY DEPARTMENT NAVIGATOR
PROGRAM EXPENSES, KLINE HOSPICE HOUSE, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

HOUSING AUTHORITY OF THE CITY OF FREDERICK

(H) PURPOSE OF GRANT OR ASSISTANCE: YOUNG MEN RISING PROGRAM, WOMEN
SUCCEEDING IN EDUCATION ASSISTANCE WITH TRANSPORTATION, CHILDCARE,
EDUCATION EXPENSES, SCHOOL READINESS PROGRAM, RISE PROGRAM
EXPENSES, COMPUTERS, PRESCHOOL READINESS PROJECT, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: INTERFAITH HOUSING ALLIANCE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SELF SUFFICIENCY COUNSELING
EXPENSES, HOUSING COUNSELING & FINANCIAL LITERACY PROGRAM FOR SINGLE
MOMS, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

LITERACY COUNCIL OF FREDERICK COUNTY, INC.

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Schedule I (Form 990)

52-1488711 Page 2

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: MATERIALS FOR WOMEN'S LITERACY
PROGRAMS, SMALL BUSINESS WORKPLACE LITERACY CLASS EXPENSES, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

MENTAL HEALTH ASSOCIATION OF FREDERICK COUNTY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: PARENT COACHING EXPENSES, HEALTHY
FAMILIES PROGRAM, CASA OF FREDERICK COUNTY, MHA CRISIS SERVICES, FAMILIES
PLUS PROGRAM EXPENSES, EMPLOYEE EDUCATION EXPENSES, AND UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: MISSION OF MERCY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: DENTAL CARE, MEDICATIONS AND MEDICAL
CARE FOR WOMEN, OPIOID ALTERNATIVE PAIN RELIEF AND SAFETY, HOSPITAL
SHARED PATIENT PARTNERSHIP, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: PATTY POLLATOS FUND, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: MEDICAL AND LIVING EXPENSES FOR
FREDERICK COUNTY RESIDENTS WITH CANCER AND OTHER MEDICAL ILLNESSES

NAME OF ORGANIZATION OR GOVERNMENT: PLANNED PARENTHOOD OF MARYLAND, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: WOMEN'S STI SCREENING AND TREATMENT
SERVICES LIVING BELOW POVERTY LEVEL, AND UNRESTRICTED FOR FREDERICK
COUNTY CLINIC

NAME OF ORGANIZATION OR GOVERNMENT:

RELIGIOUS COALITION FOR EMERGENCY HUMAN NEEDS

(H) PURPOSE OF GRANT OR ASSISTANCE: HOUSING STABILIZATION EXPENSES,
HOMELESS SHELTER EXPENSES, HOMELESSNESS PREVENTION FOR WOMEN AND FAMILIES
FINANCIAL ASSISTANCE, EMERGENCY DENTAL CARE EXPENSES, PRESCRIPTION

Part IV Supplemental Information

EXPENSES AND UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: SALVATION ARMY

(H) PURPOSE OF GRANT OR ASSISTANCE: EMERGENCY FOOD AND SHELTER PROGRAMS,
DIRECT SERVICES PROVIDED IN FREDERICK COUNTY MD, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: SECOND CHANCES GARAGE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SUBSIDIZED CAR REPAIRS FOR WOMEN
PROGRAM, REFURBISHED PROGRAM FOR WOMEN, DRIVING SCHOOL TUITION FOR LOW
INCOME INDIVIDUALS, PROGRAM CAR PLACEMENT & VEHICLE REPAIRS PROJECT

EXEPNES

NAME OF ORGANIZATION OR GOVERNMENT:

SPANISH SPEAKING COMMUNITY OF MD, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: CASE MGR, TRANSPORTATION, CRITICAL
SERVICES PARTNERSHIP WITH FREDERICK COUNTY PUBLIC SCHOOLS PROGRAM,
UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: THE FREDERICK CENTER, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: YOUTH PROGRAMS, LICENSED SOCIAL
WORKER TO LEAD SUPPORT GROUP FOR WOMEN PARENTING TRANSGENDER YOUTH, HIV
HOME TEST KIT DISTRIBUTION PROGRAM, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: WEINBERG CENTER FOR THE ARTS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TIVOLI SOCIETY, FAMILIES NEED FUND
PROGRAM EXPENSES, CAPITAL IMPROVEMENTS, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: WELLS HOUSE, INC @ GALE RECOVERY

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: HOLISTIC THERAPIES FOR WOMEN IN
RECOVERY FROM SUBSTANCE USE DISORDERS, MUSIC THERAPY EXPENSES, SERVICES
TO INDIVIDUALS WITH SUBSTANCE ABUSE DISORDERS AND UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: YMCA OF FREDERICK COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: CAMPAIGN FOR KIDS, HEAD START
BI-LINGUAL FAMILY ADVOCATES EXPENSES, HERITAGE CLUB, CAMP WEST MAR
SCHOLARSHIPS, REACH & RISE PROGRAM, TO BUILD A TEACHING GARDEN AT CAMP
WEST MAR, PURCHASE OF SENSORY AND EDUCATIONAL SUPPLIES FOR KIDS UNLIMITED
PROGRAM, TUITION ASSISTANCE TO ATTEND CAMP AND ENRICHMENT PROGRAMS FOR
KIDS FROM LOW INCOME FAMILIES, AND UNRESTRICTED

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

- For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Employer identification number

52-1488711

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

X

X

X

X

X

X

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

Schedule J (Form 990) 2018

Schedule J (Form 990) 2018

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

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

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

[illegible]

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Part III Supplemental Information

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

Blank lines for supplemental information.

(Form 990 or 990-EZ)

OMB No. 1545-0047

2018

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

▶ Attach to Form 990 or Form 990-EZ.

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

Name of the organization THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Employer identification number
52-1488711

Part I	Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).
---------------	---

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

[illegible]

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Part II	Loans to and/or From Interested Persons.
----------------	---

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

[illegible]

Total

Part III	Grants or Assistance Benefiting Interested Persons.
----------	---

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

[illegible]

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

Schedule L (Form 990 or 990-EZ) 2018

SEE PART V FOR CONTINUATIONS

Part IV	Business Transactions Involving Interested Persons.
---------	---

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

[illegible]

Part V	Supplemental Information.
---------------	----------------------------------

Provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART III, GRANTS OR ASSISTANCE BENEFITTING INTERESTED PERSONS:

(A) NAME OF PERSON: BRITTANY WALKER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

DAUGHTER OF TRUSTEE BARBARA WALKER

(C) AMOUNT OF GRANT \$ 2,500.

(D) TYPE OF ASSISTANCE: SCHOLARSHIP

(E) PURPOSE OF ASSISTANCE: EDUCATIONAL

SCHEDULE L, PART III, GRANTS OR ASSISTANCE BENEFITTING INTERESTED PERSONS:

SCHOLARSHIP APPLICANTS ARE RANKED BASED ON VARIOUS CRITERIA BY

SCHOLARSHIP SOFTWARE; HIGHEST RANKING APPLICANTS ARE THEN CHOSEN FOR

REVIEW BY THE VARIOUS SELECTION COMMITTEES SET UP FOR DIFFERENT

SCHOLARSHIPS. EACH SELECTION COMMITTEE REVIEWS THE HIGHEST RANKING

APPLICANTS AND CHOOSES THE TOP APPLICANTS; DUE DILIGENCE IS THEN

PERFORMED BY THE STAFF OF THE FOUNDATION TO ENSURE THAT EACH OF THE TOP

APPLICANTS SELECTED MEETS THE SCHOLARSHIP CRITERIA. RECOMMENDATIONS

ARE THEN FORWARDED TO THE SCHOLARSHIP COMMITTEE, A COMMITTEE MADE UP OF

BOARD MEMBERS AND VOLUNTEERS, AND IF ANYONE ON THE SCHOLARSHIP

COMMITTEE HAS A CONFLICT THEY MUST ABSTAIN FROM THE VOTE. THE

SCHOLARSHIP COMMITTEE RECOMMENDATIONS ARE THEN FORWARDED TO THE BOARD.

Part V

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

WHERE AGAIN ANYONE WITH A CONFLICT ABSTAINS FROM THE VOTE OR ANY
DISCUSSION AROUND THE APPROVAL OF THE APPLICANTS.

MS. WALKER DID NOT PARTICIPATE ON THE SCHOLARSHIP SELECTION COMMITTEE
(MADE UP OF GUIDANCE COUNSELORS AND PERSONNEL) THAT AWARDED THE
SCHOLARSHIP, AND WAS NOT IN ATTENDANCE AT THE BOARD MEETING WHEN THE
BOARD APPROVED THE SCHOLARSHIP.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization **THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC.** Employer identification number **52-1488711**

Part I **Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	21	1,010,147.	FAIR MARKET VALUE
10 Securities - Closely held stock	X	1	26,950.	FAIR MARKET VALUE
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2018

THE COMMUNITY FOUNDATION OF FREDERICK

Schedule M (Form 990) 2018

COUNTY MARYLAND, INC.

52-1488711

Page 2

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 32B:

PUBLICLY TRADED STOCK IS PLACED IN AN ACCOUNT AND SOLD BY A BROKERAGE
FIRM.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Employer identification number
52-1488711

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SCHOLARSHIPS. IN FY2019, GRANTS TOTALING \$5,121,240 BENEFITED 249
NONPROFITS SERVING THE COMMUNITY, SUPPORTING THEIR CRITICAL PROGRAMS
AND PROVIDING SERVICES TO THOUSANDS OF RESIDENTS. SCHOLARSHIPS FOR
POST-SECONDARY STUDY (INCLUDING VOCATIONAL TRAINING) TOTALING
\$1,309,970 WERE AWARDED TO 375 STUDENTS. AS A RESULT, THE WELL-BEING,
GROWTH, AND SUCCESS OF FREDERICK COUNTY CITIZENS AND OUR
COMMUNITY-AT-LARGE WERE IMPROVED, AND ADVOCACY FOR NEW DONORS WAS
ACCOMPLISHED.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

GRANTS SUPPORT HEALTH AND HUMAN SERVICES, THE ARTS, FAITH-BASED
ORGANIZATIONS, EDUCATIONAL INSTITUTIONS, THE ENVIRONMENT, ANIMAL
WELL-BEING, YOUTH PROGRAMS, ELDER CARE, HISTORIC PRESERVATION, AND
OTHER COMMUNITY CAUSES.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

FOR ONE OR MORE YEARS. ADDITIONALLY, SOME SCHOLARSHIPS ARE OFFERED FOR
STUDENTS AGES 6 TO 17 FOR MUSIC, INSTRUMENTAL, DANCE AND VOCAL
INSTRUCTION AND SOME ARE OFFERED FOR YOUTH AGES 11 TO 18 FOR ATHLETIC
PROGRAMS.

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

THE AUDIT COMMITTEE, TREASURER, AND EXECUTIVE COMMITTEE REVIEW THE FORM
990, AND THEN FORWARD IT TO THE BOARD OF TRUSTEES FOR ITS REVIEW AND
APPROVAL PRIOR TO FILING.

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

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

832211 10-10-18

Name of the organization THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Employer identification number
52-1488711

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

OFFICERS, TRUSTEES, AND KEY EMPLOYEES MUST COMPLETE A QUESTIONNAIRE
OUTLINING THEIR INTERESTS AND RELATIONSHIPS THAT COULD GIVE RISE TO
CONFLICTS OF INTEREST. THE GOVERNANCE COMMITTEE AND STAFF REVIEW THE
INFORMATION CONTAINED THEREIN AND ARE WATCHFUL AT BOARD MEETINGS FOR VOTES
THAT MAY CONSTITUTE A CONFLICT MAKING SURE THAT THE INTERESTED PARTY
ABSTAINS FROM VOTING. THE ABSTENTION IS NOTED IN THE MEETING MINUTES.

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

THE HUMAN RESOURCES COMMITTEE SETS A SALARY RANGE FOR EACH POSITION. THE
RANGE IS BASED ON INFORMATION OBTAINED BY COMMITTEE MEMBERS FROM THE
COUNCIL ON FOUNDATIONS SALARY SURVEY, LOCAL AND REGIONAL SURVEYS AND
DISCUSSIONS OF COMMITTEE MEMBERS WHO ARE BUSINESS MEMBERS AND HUMAN
RESOURCE PERSONNEL FROM OTHER BUSINESSES.

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

COPIES ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE AS WELL AS UPON REQUEST.
ALL DONORS FOUNDING FUNDS RECEIVE A COPY OF THE ARTICLES OF INCORPORATION
AND BYLAWS AT THE TIME THE FUND AGREEMENT IS SIGNED.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN PRESENT VALUE OF REMAINDER INTERESTS	1,046,842.
CHANGE IN CASH SURRENDER VALUE OF LIFE INSURANCE	13,075.
FUNDS HELD FOR OTHERS	-383,932.
TOTAL TO FORM 990, PART XI, LINE 9	675,985.

PART XII, LINE 2C

Name of the organization THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Employer identification number
52-1488711

THE PROCESS REGARDING THE PREPARATION OF THE AUDITED FINANCIAL
STATEMENTS IS UNCHANGED FROM THE PRIOR YEAR.

Name of the organization

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

THE COMMUNITY FOUNDATION OF FREDERICK

Employer identification number
52-1488711

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

[illegible]

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 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
THE COMMUNITY FOUNDATION HOLDING COMPANY INC. - 52-2028247, 312 EAST CHURCH STREET, FREDERICK, MD 21701	PROVIDE FINANCIAL SUPPORT TO THE COMMUNITY FOUNDATION OF FREDERICK	MARYLAND	501(C)(3)	LINE 12A, I		X	
THE AUSERMAN FAMILY TRUST - 52-7165889 7420 HAYWARD ROAD FREDERICK, MD 21702	PROVIDE SUPPORT TO THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MD	MARYLAND	501(C)(3)	LINE 12A, I			X
THE PLEASANTS SUPPORTING CHARITABLE TRUST - 82-3576661, 24012 FREDERICK ROAD, CLARKSBURG, MD 20871	PROVIDE FINANCIAL SUPPORT TO THE COMMUNITY FOUNDATION OF FREDERICK	MARYLAND	501(C)(3)	LINE 12A, I		X	

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

SEE PART VII FOR CONTINUATIONS

Schedule R (Form 990) 2018

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
	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)	X	
	d Loans or loan guarantees to or for related organization(s)		X
	e Loans or loan guarantees by related organization(s)		X
	f Dividends from related organization(s)		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)		X
	l 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		X
	Reimbursement paid by related organization(s) for expenses		X
	Other transfer of cash or property to related organization(s)		X
	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, including covered relationships and transaction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Page 4

Page 4

[illegible]

Part VII Supplemental Information.

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

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME OF RELATED ORGANIZATION:

THE COMMUNITY FOUNDATION HOLDING COMPANY INC.

PRIMARY ACTIVITY: PROVIDE FINANCIAL SUPPORT TO THE COMMUNITY FOUNDATION OF
FREDERICK COUNTY MD

NAME OF RELATED ORGANIZATION:

THE PLEASANTS SUPPORTING CHARITABLE TRUST

PRIMARY ACTIVITY: PROVIDE FINANCIAL SUPPORT TO THE COMMUNITY FOUNDATION OF
FREDERICK COUNTY MD