EXTENDED TO MAY 17, 2021

(Rev. January 2020) Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

▶ 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

ΑI	or th	e 2019 calendar year, or tax year beginning $$ JUL 1 , 2019 and end	ling J	UN 30, 2020				
В	Check if applicab	C Name of organization		D Employer identific	cation number			
_		THE COMMONITY FOUNDATION OF FREDERICK						
	Addre	e COUNTI MARIDAND, INC.						
	Name	e Doing business as		52-14887	11			
	Initial returr	Number and street (or P.O. box if mail is not delivered to street address) Roo	E Telephone number					
	☐Final returr	, 312 EAST CHURCH STREET		301-695-7660				
	termi ated	City or town, state or province, country, and ZiP or foreign postal code		G Gross receipts \$	26,455,057.			
	Amer returr	FREDERICK, MD ZI/UI		H(a) Is this a group re				
	Appli			for subordinates				
	pend	ISAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No			
Ι,	Гах-ех	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or L	527	If "No," attach a	list. (see instructions)			
		te: ► WWW.FREDERICKCOUNTYGIVES.ORG		H(c) Group exemption				
Κ	orm o		∟ Year ∈	of formation: 1986 N	State of legal domicile: MD			
Pa	art I	Summary						
φ	1	Briefly describe the organization's mission or most significant activities: $\underline{\text{GENERO}}$	US D	ONORS CREAT	E POSITIVE			
& Governance	!	IMPACT IN THE LIVES OF FREDERICK COUNTY CI	TIZE	NS THROUGH	GRANTS AND			
Ë	2	Check this box if the organization discontinued its operations or disposed						
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	23			
S. O.	4	Number of independent voting members of the governing body (Part VI, line 1b)			23			
S	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)		5	14			
ξ	6	Total number of volunteers (estimate if necessary)		6	148			
Activities	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.			
_	b	Net unrelated business taxable income from Form 990-T, line 39		7b	23,746.			
Revenue				Prior Year	Current Year			
	8	Contributions and grants (Part VIII, line 1h)	4,955,711.	9,466,029.				
	9	Program service revenue (Part VIII, line 2g)		0.	0.			
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	8,907,653.	6,977,317.				
U.	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)		13,863,364.	16,443,346.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		6,431,210.	7,622,606.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,113,001.	1,255,405.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
άx	b	Total fundraising expenses (Part IX, column (D), line 25) ► 475,521	<u>• 1</u>					
Щ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,179,313.	1,070,014.			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		8,723,524.	9,948,025.			
	19	Revenue less expenses. Subtract line 18 from line 12		5,139,840.	6,495,321.			
or Ses	i			ginning of Current Year	End of Year			
Net Assets Fund Baland	20	Total assets (Part X, line 16)		29,035,482.				
t As	21	Total liabilities (Part X, line 26)		10,920,882.	12,212,186.			
<u> 원</u> 코	22	Net assets or fund balances, Subtract line 21 from line 20	<u> 1</u>	18,114,600.	125,069,664.			
	art II							
` `		ulties of perjury, I declare that I have examined this return, including accompanying schedules and			/knowledge and belief, it is			
true	corre,	et, and complete. Declaration of preparer (other than officer) is based on all information of which [preparer	has any knowledge,				
	A							
Sig	n	Signature of officer		Date				
Her	е	ELIZABETH Y. DAY, PRESIDENT AND CEO						
		Type or print name and title						
		Print/Type preparer's name		Date Check	PTIN			
Pale	i	SUSAN KELLER Quay ! Kelk	0	3/04/21 self-employe				
	рагег	Firm's name ELLIN & TUCKER, CHARTERED		Firm's EIN ▶	52-0959934			
Use	Only	Firm's address 400 EAST PRATT ST. SUITE 200						
		BALTIMORE, MD 21202		Phone no.41	0-727-5735			
May	the I	RS discuss this return with the preparer shown above? (see instructions)		.,,.,.,.	X Yes No			
9320	01 01-2	10-20 LHA For Paperwork Reduction Act Notice, see the separate instructions.			Form 990 (2019)			

COUNTY MARYLAND, INC.

	irt III Statement of Program Service Accomplishments	Page Z
	Check if Schedule O contains a response or note to any line in this Part III	X
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.	
	O O O O O O O O O O O O O O O O O O O	
2	Did the organization undertake any significant program services during the year which were not listed on the	
_	prior Form 990 or 990-EZ?	X
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	X No
_	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, as	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$1, 432, 405. including grants of \$1, 311, 388.) (Revenue \$)
	STRATEGIC PRIORITY GRANTS - THE COMMUNITY FOUNDATION IDENTIFIES	
	COMMUNITY NEEDS THROUGH PERIODIC ASSESSMENTS AND, BASED UPON THESE	
	FINDINGS, DETERMINES STRATEGIC PRIORITIES FOR ITS DISCRETIONARY	
	GRANTMAKING. QUALIFIED 501C3 ORGANIZATIONS AND	
	GOVERNMENT/QUASI-GOVERNMENT ENTITIES APPLYING FOR FUNDING PROGRAMS N	TOI
	NORMALLY PROVIDED THROUGH TAX REVENUE MAY COMPLETE APPLICATIONS FOR	
	STRATEGIC FUNDING. APPLICANTS PARTICIPATE IN A RIGOROUS REVIEW PROCE	
	CONDUCTED BY THE COMMUNITY FOUNDATION'S GRANTS COMMITTEE. APPLICANTS	3
		MD
	MUST PROVIDE DESCRIPTIONS OF THEIR PROGRAMS, UNITS OF SERVICE AND	
	EXPECTED OUTCOMES, AND DETAILED FINANCIAL INFORMATION. REQUIRED REPO	RTS
	ENSURE ACCOUNTABILITY.	
4b	(Code:) (Expenses \$ 4,588,148 · including grants of \$ 4,304,260 ·) (Revenue \$)
	IMPACT GRANTS - THE COMMUNITY FOUNDATION ADMINISTERS GRANTS FROM FIE	
	OF INTEREST, DONOR-ADVISED AND DESIGNATED FUNDS ESTABLISHED BY DONOR	
	WHO WANT TO CREATE IMPACT AND SUPPORT THEIR FAVORITE CAUSES. FIELD CINTEREST FUND FOUNDERS SPECIFY GENERAL AREAS FOR THE COMMUNITY)F
	FOUNDATION TO DIRECT ITS GRANTMAKING, BUT NOT SPECIFIC NONPROFITS.	
	DONOR-ADVISED FUND FOUNDERS RECOMMEND GRANTS FROM THEIR FUNDS, WITH	ים עויה
	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 GRANTEES MUST BE IN GOOD STANDING WITH AI	,T,
	STATE AND FEDERAL REGISTRATIONS AND SOME MUST PROVIDE DESCRIPTIONS OF	
	THE IMPACT OF THEIR PROGRAMS AND REPORTS TO ENSURE ACCOUNTABILITY.	
4c	0.040.050	١
	SCHOLARSHIPS - THE COMMUNITY FOUNDATION IS ONE OF THE LARGEST PROVID	ERS '
	OF SCHOLARSHIPS IN FREDERICK COUNTY, AND WE ALSO ADMINISTER THE	
	TRUMPOWER SCHOLARSHIP FOR CARROLL COUNTY RESIDENTS, 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 STUD	DIES
	IMMEDIATELY FOLLOWING HIGH SCHOOL. THE COMMUNITY FOUNDATION'S	
	SCHOLARSHIP COMMITTEE REVIEWS ALL APPLICATIONS AND SELECTS RECIPIENT	'S
	THAT BEST MATCH THE CRITERIA SET FORTH BY THE DONOR WHEN THE	
	SCHOLARSHIP FUND WAS ESTABLISHED. SCHOLARSHIPS ARE AVAILABLE FOR ALM	OST
4d	Other program services (Describe on Schedule O.)	
,	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 8,262,603.	<u> </u>
	Form 99	(2019) U

Form 990 (2019) COUNTY MARYLAND, INC.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	x	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u> </u>		
	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-		
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
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.			in the second
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	X	'minide a vi
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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		, i	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		<u>x</u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	,	х	
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	14b	^	
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	เอ		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	İ	Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	ļ	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		1	
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
		20b	ļ	
	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		,, l	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	

No

Х

X

THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC. 52-1488711 Form 990 (2019) Part IV | Checklist of Required Schedules (continued) Yes 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 22 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 23 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			l
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	Ì	ļ	!
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			1
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		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):			151 - 601 L., 4.041
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		_X_
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?/f			х
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		ļ
30	contributions? If "Yes," complete Schedule M	ا مما		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
-	Schadula M. Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	02		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		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	36		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	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t 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			1 1

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	45		100	
þ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		1	1
C	Did the organization comply with backup withholding rules for reportable payments to vendors and re-	porta	ıble gaming			
	(gambling) winnings to prize winners?			1c		

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Form 990 (2019) COUNTY MARYLAND, INC.

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

			V	NI-
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		Yes	No
	filed for the calendar year ending with or within the year covered by this return 2a 14	di i		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	
-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За		За	х	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	X	······
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b	If "Yes," enter the name of the foreign country	Green.	74	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a		5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a				
	any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		350	1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7¢		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			223
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			3.5
_	sponsoring organization have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			- 3#
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	1,3,	<u> </u>
10	Section 501(c)(7) organizations. Enter:	100	4	
	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			1.004
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter;			
	Gross income from members or shareholders			
IJ		表為		
12a	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. is the organization filing Form 990 in lieu of Form 1041?	12a	1.30.6	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12.61		
	Section 501(c)(29) qualified nonprofit health insurance issuers.		g 47	- 1004
	Is the organization licensed to issue qualified health plans in more than one state?	13a		F 0.22 %
	Note: See the instructions for additional information the organization must report on Schedule O.	ASE.	WEST TO	5,50.3
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			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
þ	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		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?	16		X
	if "Yes," complete Form 4720, Schedule O.			

COUNTY MARYLAND, INC.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.			
þ	Enter the number of voting members included on line 1a, above, who are independent	a prope		+ 5
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		W.C.	- N
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	Ť		
	more members of the governing body?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		15.65	
	The governing body?	8a	X	4
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
•	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9		
	tion by the internal revenue codes,	···-	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	162	No X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	IVa		
Б	and branches to ensure their operations are consistent with the organization's exempt purposes?	404		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	10b	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	- 2 \	19
	Did the organization have a written conflict of interest policy? If "No," go to line 13		X	ZW. i
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	X	
		12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40-	X	
40	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Δ.	
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?	<u> </u>	X	
	The organization's CEO, Executive Director, or top management official	15a		
ø	Other officers or key employees of the organization	15b	X	: (A) : (A)
40.	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
168	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		Table 1	v
1.	taxable entity during the year?	16a		<u> </u>
a	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	Mary 1		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			2.443
500	exempt status with respect to such arrangements?	16b		
	tion 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) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finar	ıcial	
00	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			
		г.	000	0040
932006	i 01-20-20	rorm	990	ZU19)

Form 990 (2019) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

Check this box if neither the organize (A)	(B)			(0	C)			(D)	(E)	(F)	
Name and title	Average	/do	not c	Pos	ition) *ban		Reportable	Reportable	Estimated	
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of	
	week		cer an	dad	lrecto	or/trus	itee)	from	from related	other compensation	
	(list any hours for	Individual trustee or director						the	organizations		
	related	e or d	鷾			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization	
	organizations	truste	Institutional trustee		aaf	Highest compensated employee		(** 2) 1000 NNOO)		and related	
	below	ridual	tufion	Ja.	Кеу етрюуев	est cc loyee	Fe .			organizations	
	line)	indir	list.	Officer	Key	High emp	Fотте				
(1) NANCY THRASHER	1.00							_			
CHAIRMAN		Х		Х	<u> </u>			0.	0.	0 .	
(2) MICHAEL H. DELAUTER	1.00								_		
FIRST VICE CHAIRMAN		X		X	_			0.	0.	0.	
(3) RACHEL I. MANDEL	1.00							_	_	_	
SECOND VICE CHAIRMAN	4 00	X		Х				0.	0.	0.	
(4) JAMES SUMMERS	1.00							•		_	
TREASURER	1 00	Х		X				0.	0.	0.	
(5) C. MATT WILEY	1.00	,,		77				0	_		
SECRETARY	1.00	Х		X			-	0.	0.	0.	
(6) THOMAS E. LYNCH, III PAST CHAIRMAN	1.00	_,		37				0		•	
(7) IAN P BARTMAN	1.00	Х		Х				0.	0.	0.	
TRUSTEE	1.00	x						0.	0.	0.	
(8) ALEJANDRO CANADAS	1.00	₽				_		0.	0.	0.	
TRUSTEE	1.00	x						0.	0.	0.	
(9) STACEY L, COLLINS	1.00			-					· ·	0.	
TRUSTEE	1.00	x						0.	0.	0.	
(10) GORDON M. COOLEY	1.00			\dashv		-		•			
TRUSTEE		x		Į				0.	0.	0.	
(11) MICHAEL CUMBERLAND	1.00		-								
TRUSTEE		x					i	0.	o.	0.	
(12) TAITIA L. ELLIOTT	1.00						Ì				
TRUSTEE		Х						0.	0.	0.	
(13) JEAN M. JOYCE	1.00		T	一							
TRUSTEE		Х					ľ	0.	0.	0.	
(14) AMARIS LITTLE	1.00		T								
TRUSTEE		X		ļ				0.	0.	0.	
(15) VERONICA D. LOWE	1.00		\neg								
TRUSTEE		Х						0.	0.	0.	
(16) R. SEAN MCADAM	1.00		I	I	1						
TRUSTEE		Х						0.	0.	0.	
(17) LINDA S THANE MORGAN	1.00							_	_	_	
TRUSTEE		Х						0.	0.	0.	

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Form 990 (2019)

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	/ees	, an	d H	ighe	st (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos	ition	٦ . +6		Reportable	Reportable	Estimated
	hours per	box	t, unle	ss pe	arson	is bo	th an		compensation	amount of
	week	-	cer ar	id a d	irecto	or/tru:	stee)	from	from related	other
	(list any	or director	İ					the	organizations	compensation
	hours for related	or dî	ļ			ated		organization	(W-2/1099-MISC)	from the
	organizations	يق	慧			pens		(W-2/1099-MISC)		organization
	below	ua! tr	ional		ploye	t com				and related
	line)	Individual	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(18) DARRYN NAYLIN	1.00	Ι-	┝▔	Ü	<u> </u>	1	<u> </u>			
TRUSTEE		Х				İ		0.	0.	0.
(19) NICOLE CHAFITZ ORR	1.00									
TRUSTEE		Х	<u>.</u>					0.	0.	0.
(20) RICHARD A. PEARRELL	1.00		ĺ	i	Γ					
TRUSTEE		Х						0.	0.	0.
(21) GREGORY POWELL	1.00							_		
TRUSTEE	4 00	X				<u> </u>		0.	0.	0.
(22) DANIEL J. SCHIFFMAN	1.00									
TRUSTEE	1 00	Х	_		ļ	<u> </u>	_	0.	0.	0.
(23) LOUANNE S. WELGOSS TRUSTEE	1.00	Ι,,			Į				,	
(24) GARY L. ROLLINS	1.00	Х	 					0.	0.	0.
TRUSTEE	1.00	х						0.	0.	_
(25) TOD P. SALISBURY	1.00	_	H				-	0.	U -	0.
TRUSTEE	1.00	Х						0.	0.	0.
(26) DANIEL K. TREGONING	1.00	-	_			1	\vdash	0,	0.	0.
TRUSTEE		x						0.	0.	0.
1b Subtotal							>	0.	0.	0.
c Total from continuation sheets to Part VI	I, Section A						>	405,469.	0.	49,619.
d Total (add lines 1b and 1c)					, . ,			405,469.	0.	49,619.
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	oove	e) wł	no re	eceived more than \$100	,000 of reportable	
compensation from the organization										3
										Yes No
3 Did the organization list any former officer,	director, truste	ee, k	еу е	mpl	oye	e, o	hig	hest compensated emp	loyee on	
line 1a? If "Yes," complete Schedule J for st	uch individual									3 X
4 For any individual listed on line 1a, is the su	m of reportabl	le co	mpe	ensa	tion	and	i oth	her compensation from	the organization	Y
and related organizations greater than \$150 5 Did any person listed on line 1a receive or a										4 X
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," comp	•									5 X
Section B. Independent Contractors	Diete Odrieddie	3 U /	טו טנ	ici) k	0013	.017				5 X
1 Complete this table for your five highest cor	npensated inc	lepe	nde	nt co	ontr	acto	ors t	hat received more than	\$100,000 of compens	ation from
the organization. Report compensation for t										
(A)								(B)		(C)
Name and business	address	NC	NE	}			_	Description of s	ervices C	ompensation
							+			
							İ			
							十			
							-			
							T			
										
2 Total number of independent contractors (in	eludina hut n	at lie	nitos	l to t	thoo	o lie	400	aboval who received to	oro than	
\$100,000 of compensation from the organiz		J (111	i ii toʻʻ		0		.eu	above) who received fil	OI TIME	
SÉE PART VII, SECTION	I A CONT	Ίľ	ΙŪΑ	ΤI	ON	1 8	H	EETS	ا المالية المالية المالية المالية المالية المالية المالية المالية المالية المالية المالية المالية المالية المالية	Form 990 (2019)

	MARYLAND								52-148	8711
Part VII Section A. Officers, Directors,		mple	оуеє			ligh	est			
(A) Name and title	(B) Average hours	(cl	heck	Pos			oly)	(D) Reportable compensation from	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual frustee or director	Institutional trustee	Officer Key employee Highest compensated employee	Former	the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organization		
27) COLLEEN CHIDESTER RUSTEE	1.00	х						0.	0.	(
28) KEVIN HESSLER PRUSTEE	1.00	х						0.	0.	
29) ELIZABETH Y. DAY	50.00			х						******
30) GAIL M. FITZGERALD	50.00	_						168,486.	0.	20,54
CHIEF FINANCIAL OFFICER (31) LAURA MCCULLOUGH	50.00			Х				123,528.	0.	17,58
DIRECTOR PHILANTHROPIC SERVICES					-	Х		113,455.	0.	11,48
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,										
								1		
			\downarrow	_			.			
										···
	1	<u>,,, , l</u>	<u> </u>		ļ	l		405 450		40 55
otal to Part VII, Section A, line 1c						• • • • • •		405,469.		49,619

Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (A) Revenuè excluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 fts, Grants r Amounts 1 a Federated campaigns b Membership dues 1b c Fundraising events 1c d Related organizations 1d ₽ e Government grants (contributions) 1e f All other contributions, gifts, grants, and 9,466,029 842,642 g Noncash contributions included in lines 1a-1f | 1g |\$ h Total. Add lines 1a-1f 9,466,029 **Business Code** Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f. Investment income (including dividends, interest, and other similar amounts) 4,263,689. 4,263,689. Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents 6a b Less: rental expenses ... c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory 12,725,339 b Less: cost or other basis Other Revenue and sales expenses **|76|** 10,011,711 2,713,628, d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses ______8b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses 9b c Net income or (loss) from gaming activities_ 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold _____ c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11 a d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions 16,443,346. 6,977,317. 932009 01-20-20 Form **990** (2019)

Form 990 (2019) COUNTY MARYLAND, INC. Part IX Statement of Functional Expenses

_	Check if Schedule O contains a respon			·····	/Ps\
Do 7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part Vill.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	5,615,648.	5,615,648.		
2	Grants and other assistance to domestic	3,013,040.	3,013,040.		
~	individuals. See Part IV, line 22	2,006,958.	2,006,958.		
3	Grants and other assistance to foreign	2,000,550.	4,000,550.		
Ŭ	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,			The grant was in passing a re-	<u> </u>
_	trustees, and key employees	369,711.	121,605.	195,737.	52,369
6	Compensation not included above to disqualified			, , , , , , , , , , , , , , , , , , , ,	,
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	722,238.	273,514.	156,969.	291,755
8	Pension plan accruals and contributions (include				•
	section 401(k) and 403(b) employer contributions)	20,965.	9,020.	4,794.	7,151
9	Other employee benefits	72,007.	33,615.	4,794. 15,353.	7,151 23,039
10	Payroll taxes	70,484.	25,792.		23,992
1	Fees for services (nonemployees):			,	
а	Management				
	Legal				
	Accounting	20,725.	4,352.	16,373.	
	Lobbying		<u> </u>		
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	629,051.	CALL STATE OF THE	629,051.	
g	Other. (If line 11g amount exceeds 10% of line 25,			, , , , , , , , , , , , , , , , , , , ,	
Ŭ	column (A) amount, list line 11g expenses on Sch O.)	6,877.	509.	132.	6,236
2	Advertising and promotion	28,679.	9,806.	18,436.	437
3	Office expenses	55,653.	18,205.	16,545.	20,903
4	Information technology	111,932.	60,979.	39,545.	11,408
5	Royalties				
6	Occupancy	82,736.	29,785.	41,368.	11,583
7	Travel	5,765.	152.	3,719.	1,894
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	2,299.	504.	716.	1,079
0	Interest				
1	Payments to affiliates				•
2	Depreciation, depletion, and amortization	28,286.	10,183.	15,274.	2,829
3	Insurance	12,755.	4,803.	6,676.	1,276
4	Other expenses. Itemize expenses not covered			auta szászák m	1000
	above (List miscellaneous expenses on line 24e, If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)	Control of the Contro			
а	EVENTS	34,962.	14,998.	8,940.	11,024
b	ANNUAL REPORT & NEWSLET	15,582.	4,175.	9,849.	1,558
С	DUES & SUBSCRIPTIONS	12,613.	5,371.	4,448.	2,794
d	STRATEGIC INITIATIVES	11,319.	10,000.		1,319
е	All other expenses	10,780.	2,629.	5,276.	2,875
5	Total functional expenses, Add lines 1 through 24e	9,948,025.	8,262,603.	1,209,901.	475,521
3	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)				

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Form **990** (2019)

Pa	rt 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
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	1,195,846.	2	3,749,448.
	3	Pledges and grants receivable, net	303,085.	3	362,103.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			And the same of th
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
Assets	7	Notes and loans receivable, net		7	
\ss	8	Inventories for sale or use	25 25 2	8	0.00
_	9	Prepaid expenses and deferred charges	97,850.	9	87,835.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 634, 645.			
		Less: accumulated depreciation 10b 494,600.	148,015.	10c	140,045
	11	Investments - publicly traded securities	123,141,645.	11	127,172,073
	12	Investments · other securities. See Part IV, line 11		12	
	13	Investments · program-related. See Part IV, line 11		13	
	14	intangible assets	4 140 041	14	F 770 246
	15	Other assets. See Part IV, line 11	4,149,041.	15	5,770,346.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	129,035,482. 1,301,595.	16	137,281,850.
	17	Accounts payable and accrued expenses	1,301,393.	17	2,295,622.
	18 19	Grants payable		18	
	20	Deferred revenue		19	
	21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D		21	
en.	22	Loans and other payables to any current or former officer, director,	Angel and the British	21	110 May 110 May 110 May 110 May 110 May 110 May 110 May 110 May 110 May 110 May 110 May 110 May 110 May 110 May
ţ <u>i</u>	~~	trustee, key employee, creator or founder, substantial contributor, or 35%		- 1	2 A 2 A 2 A 2 A 2 A 2 A 2 A 2 A 2 A 2 A
Liabilíties		controlled entity or family member of any of these persons		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties	-	23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	9,619,287.	25	9,916,564.
	26	Total liabilities. Add lines 17 through 25	10,920,882.	26	
40		Organizations that follow FASB ASC 958, check here	1 327547	0.468	
ces		and complete lines 27, 28, 32, and 33.		0.1	
ılan	27	Net assets without donor restrictions	96,047,360.	27	101,440,206.
1 Be	28	Net assets with donor restrictions	22,067,240.	28	23,629,458.
nnc		Organizations that do not follow FASB ASC 958, check here	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
řΤ		and complete lines 29 through 33.		1.35	
ts c	29	Capital stock or trust principal, or current funds		29	
sse	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances		Retained earnings, endowment, accumulated income, or other funds		31	
Se	32	Total net assets or fund balances	118,114,600.	32	125,069,664.
	33	Total liabilities and net assets/fund balances	129,035,482.	33	137,281,850.

Form **990** (2019)

Form	1990 (2019) COUNTY MARYLAND, INC.	52-	L488711	Page 12
Pa	rt XI Reconciliation of Net Assets			-
	Check if Schedule O contains a response or note to any line in this Part XI			<u>X</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1	16,443	
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,025.
3	Revenue less expenses. Subtract line 2 from line 1	3		,321.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	118,114	
5	Net unrealized gains (losses) on investments	5	-204	,866.
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 on Schedule O)	9	664	,609.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,			
	column (B))	10	125,069	,664.
Pa	rt XIII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			Х
				Yes No
1	Accounting method used to prepare the Form 990: Cash Z Accrual Other		3	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a		
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			. PAÑ
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	e basis,		
	consolidated basis, or both:		5.68	
	Separate basis X Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,		77
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X
	If the organization changed either its oversight process or selection process during the tax year, explain on Sci			1
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	-	t	
	Act and OMB Circular A-133?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ		1 1	
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			
			Form 9	990 (2019)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

COMMUNITY FOUNDATION OF FREDERICK

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

52-1488711 COUNTY MARYLAND, INC. Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 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, 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). 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.) 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 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. J Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type 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). (lv) is the organization listed in your governing document (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other nina document: (described on lines 1-10 organization support (see instructions) support (see instructions) Yes Nο above (see instructions)) Total

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	5069519.	4539653.	6047669.	4955711.	9466029.	30078581.
2	Tax revenues levied for the organ-						 -
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to	İ					
	the organization without charge						
4	Total. Add lines 1 through 3	5069519.	4539653.	6047669.	4955711.	9466029.	30078581.
5	The portion of total contributions		- 180 - 28 ⁰				
	by each person (other than a						
	governmental unit or publicly		4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		NAC SERVICE CONTRACTOR		
	supported organization) included				Lega, Car		
	on line 1 that exceeds 2% of the						
	amount shown on line 11,					61 SOM = 18	
	column (f)		17.486.84.657		1.00		1094989.
6	Public support. Subtract line 5 from line 4.	1.00	4.4			all the state of t	28983592.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	5069519.	4539653.	6047669.	(d) 2018 4955711.	9466029.	30078581.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	2554892.	_2743582.	2886406.	4038142.	4263689.	16486711.
9	Net income from unrelated business						
	activities, whether or not the	i					
	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		客装 管 -				46565292.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	-
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	
	organization, check this box and stop	here				***************************************	<u> </u>
	tion C. Computation of Publ						
	Public support percentage for 2019 (I					14	62.24 %
	Public support percentage from 2018					15	62.32 %
16a	33 1/3% support test - 2019. If the o					•	
	stop here. The organization qualifies	as a publicly supp	orted organization				> X
b	33 1/3% support test - 2018. If the o						
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances test						
	more, and if the organization meets th	ne "facts-and-circui	mstances" test, ch	eck this box and s	stop here. Explain	in Part VI how the	
	organization meets the "facts-and-circ						
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	i, 16b, 17a, or 17b	, check this box a	nd see instruction	s
					Sche	dule A (Form 990	or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 COUNTY MARYLAND, INC.

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")]		
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose					1	
3	Gross receipts from activities that						
_	are not an unrelated trade or bus-						
	iness under section 513						
4			-		 		
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge				<u> </u>		
6	Total. Add lines 1 through 5						
7ε	Amounts included on lines 1, 2, and						
	3 received from disqualified persons				·		
t,	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						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)	ier.	1.00		100	(2) 10 (2) (3)	
	ction B. Total Support	r v	THE PERSON OF THE PROPERTY OF THE PERSON OF	<u> </u>	1	109-03-036 A T 10-1 1 1 1 1 1 1 1 1	
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6	\u) 2010	(8) 2.010	(0) 2017	(4) 2010	(6) 2010	(I) Total
	Gross income from interest.						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources					•	
	Unrelated business taxable income						
Ų	(less section 511 taxes) from businesses						
	completed often lune 00 d075						
	acquired after June 30, 1975						
	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				1		
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	s first, second, thir	d, fourth, or fifth t	tax year as a sectio	n 501(c)(3) organiz	ation.
	check this box and stop here				•		▶ □
Sec	tion C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2019 (column (fi)		15	%
	Public support percentage from 2018					16	%
	tion D. Computation of Investigation			*************************	***************************************	10	
	· · · · · · · · · · · · · · · · · · ·			aa 40 aab (N		1 4 7 1	
							<u>%</u>
	Investment income percentage from 2018 Schedule A, Part III, line 17 33 1/3% support tests - 2019. 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						%
19a							. \square
	more than 33 1/3%, check this box a		· · · · · · · · · · · · · · · · · · ·				
b	33 1/3% support tests - 2018. If the						
	line 18 is not more than 33 1/3%, che					-	
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check t	this box and see in	structions	▶└┴
00000	n na nr 4a				A.1.		000 571 0040

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(o)(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
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3b		
3c		
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4b	<u> </u>	
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10b		2019

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Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			11
	below, the governing body of a supported organization?	11a	ļ	<u> </u>
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	1 1 1		
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		13.6	% []
	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,		S	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
•	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		nd or s
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,	h. A. Sla		131
500	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2	<u> </u>	L
360	aton of Type II oupporting Organizations		V	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		Yes	No
'	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	114 5		
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1553 \$4.00.		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	- A -		. 12
_	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	1-1800		
	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?	1	TOLE-DV-1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	47 9		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			i.
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	8 45	77 15	
	significant voice in the organization's investment policies and in directing the use of the organization's	1.46.55		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions	:).		
а	The organization satisfied the Activities Test, Complete line 2 below.			
þ	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 in	struction	s).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			À
	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	. Notani.		
	that these activities constituted substantially all of its activities.	2a		<u> </u>
b			İ	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	l'		F- 1/2
	reasons for the organization's position that its supported organization(s) would have engaged in these		ئىدىد	
	activities but for the organization's involvement.	2b	. greekii	1251, 1961, 19
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	n a ba si Strandasi		
_	trustees of each of the supported organizations? Provide details in Part VI.	3a	3.2	
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.	3b		

932025 09-25-19

Schedule A (Form 990 or 990-EZ) 2019 COUNTY MARYLAND, INC.

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Org	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust o	on Nov. 20, 1970 (explain in I	Part VI). See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	ompiete	Sections A through E.	
Sect	ion 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		
Sect	ion B - Minimum Asset Amount	· · · · · · · · · · · · · · · · · · ·	(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	100	· · · · · · · · · · · · · · · · · · ·	
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):	la a		(1) (2) (2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
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,	1		
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		"
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	The state of the	
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	\$77 7 70 0 00 00 00 00 00 00 00 00 00 00 00 00	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to	i		
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	lly integr	ated Type III supporting orga	anization (see
	Inches patients	- 0		•

Schedule A (Form 990 or 990-EZ) 2019

THE COMMUNITY FOUNDATION OF FREDERICK 52-1488711 Page 7 Schedule A (Form 990 or 990-EZ) 2019 COUNTY MARYLAND, INC. Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions Current Year Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI), See instructions. 6 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2019 from Section C, line 6 10 Line 8 amount divided by line 9 amount (ii) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2019 Amount for 2019 Distributable amount for 2019 from Section C, line 6 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions. Excess distributions carryover, if any, to 2019 a From 2014 **b** From 2015 c From 2016 d From 2017 e From 2018 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2019 from Section D, a Applied to underdistributions of prior years **b** Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2020. Add lines 3j and 4c. Breakdown of line 7:

Schedule A (Form 990 or 990-EZ) 2019

a Excess from 2015
 b Excess from 2016
 c Excess from 2017
 d Excess from 2018
 e Excess from 2019

THE COMMUNITY FOUNDATION OF FREDERICK

<u>Schedule A</u>	(Form 990 or 990-E	Z) 2019 COUNTY I	MARYLAND,	TNC.		52-1488711 _{Pag}
Part VI	line 1; Part IV, Sec Section D, lines 5,	lines 1, 2, 35, 36, 45, 44 tion D, lines 2 and 3; Pa 6, and 8; and Part V, Se	c, 5a, 6, 9a, 9b, 9c rt IV. Section E. lin	, 11a, 11b, and 11 es 1c. 2a. 2b. 3a.	c; Part IV, Section B, I and 3b: Part V. line 1:	17a or 17b; Part III, line 12; ines 1 and 2; Part IV, Section C, Part V. Section B. line 1e: Part V.
	(See instructions.)		, , , , , , , , , , , , , , , , , , , ,		- - -	
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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 19 Open to Public

Inspection

Employer identification number

COUNTY MARYLAND, INC. 52-1488711 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the

THE COMMUNITY FOUNDATION OF FREDERICK

	organization answered "Yes" on Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	142	623
2	Aggregate value of contributions to (during year)	2,259,170.	6,999,944.
3	Aggregate value of grants from (during year)	1,122,173.	6,963,216.
4	Aggregate value at end of year	1,394,746.	122,772,522.
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's	exclusive legal control?	X Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of	_	
	The state of the s		
Pa	rt II Conservation Easements. Complete if the org		
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).	
	Preservation of land for public use (for example, recrea	tion or education) Preservation of a	a historically important land area
	Protection of natural habitat	Preservation of a	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form o	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic structu	re
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel		
	year >		
4	Number of states where property subject to conservation eas	sement is located 🕨	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	ervation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservat	ion easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) above	,	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	•	
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial stateme	nts that describes the
	organization's accounting for conservation easements.		
Pai	t III Organizations Maintaining Collections of	·	her Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 95	•	
	of art, historical treasures, or other similar assets held for pub		•
	service, provide in Part XIII the text of the footnote to its finar		
b	If the organization elected, as permitted under FASB ASC 95		
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthe	erance 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 treat		gain, provide
	the following amounts required to be reported under FASB A	<u> </u>	
	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		> \$

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

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52-1488711 Page	9		4
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Pa	rt III Organizations Maintaining C	Collections of A	rt, Historical Tr	easures, or Ot	her Sin	nilar Asse	ts (continu	ıed)
3	Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its							
	collection items (check all that apply):							
а	Public exhibition	d	I ∐_Loan or exc	hange program				
b	b Scholarly research e Other							
C	c Preservation for future generations							
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 of	or receive donations	of art, historical trea	sures, or other sim	ilar asset:	s	_	
	to be sold to raise funds rather than to be m						Yes	No_
Pai	rt IV Escrow and Custodial Arran		ete if the organizatio	n answered "Yes"	on Form	990, Part IV,	line 9, or	
	reported an amount on Form 990, Pa							
1a	a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included							
	on Form 990, Part X?					L	∐ Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing table:		_			
					·		Amount	
	Beginning balance					<u> </u>		
d	Additions during the year							
е	Distributions during the year							
f	Ending balance				<u>1</u>	f		
	Did the organization include an amount on F						Yes	No No
	If "Yes," explain the arrangement in Part XIII.							
Pai	t V Endowment Funds. Complete		ľ					
		(a) Current year	(b) Prior year	(c) Two years back	- ` '	ee years back		years back
1a	0 0 7	11,605,973.		11,570,024		L,675,359.		894,072.
b	Contributions	600,478.	·	74,795		68,273.		125,085.
	Net investment earnings, gains, and losses	254,955.				545,958.		-8,880.
	Grants or scholarships	499,885.	482,680.	510,599	'·	702,167.		334,918.
е	Other expenditures for facilities	017 200				45 300		
	and programs	97,392.			1	17,399.		
f	Administrative expenses	11,864,129.	11 505 052	44 226 488	1 11	F 70 004	11	CDE 350
g	End of year balance		<u> </u>		1.1	1,570,024.	T. T. T. T. T. T. T. T. T. T. T. T. T. T	675,359.
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1g, column (a	i)) held as:				
	Board designated or quasi-endowment		%					
	Permanent endowment ► 86.80 Term endowment ► 13.20	%						
С								
•	The percentages on lines 2a, 2b, and 2c sho		attender to the state					
Зa	Are there endowment funds not in the posse	ession of the organiz	ation that are neid a	na aaministerea to	r trie orga	anization	1,	/ N-
	by:						3a(i)	Yes No
	(i) Unrelated organizations	······						X
h	(ii) Related organizations	ationa listad an requi	rad an Cahadula D3				3a(ii)	
4	Describe in Part XIII the intended uses of the					••••••	3b	
	t VI Land, Buildings, and Equipm		owinent funds.					
<u></u>	Complete if the organization answere		n Part IV line 11a S	See Form 990 Part	X line 10)		
	Description of property	(a) Cost or o			Accumu		(d) Book	value
	peddiption of property	basis (investr			depreciati		(a) DOOK	, aluc
	Land	<u>`</u>	,	:				
	Buildings							
c	Leasehold improvements		38	9,208.	312,	098.	77	,110.
d	Equipment			5,437.	182,		62	,935.
	Other							
	. Add lines 1a through 1e. (Column (d) must e		X, column (B). line 1	0c.)			140	,045.
	and the second section of the second section of the second section sec	,	, , , , , , , ,	/		Schodule		990) 2019

COUNTY	MARYLAND.	INC.
$\sim \sim \sim 111 \pm 1$		T-11 C *

Part VII Investments - Other Securities.	on Form 000. Doct IV. Se	a 11h San Form 000 Dart V Bas 10	
Complete if the organization answered "Yes" ((a) Description of security or category (including name of security)	on Form 990, Part IV, III (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" (e 11c. See Form 990, Part X, line 13.	_£
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	or-year market value
(1)			
(2)		<u> </u>	
(3)			
(4)			
(5)			
(7)		-	
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			Train 1)
Part IX Other Assets.			- · <u>,</u> ·
Complete if the organization answered "Yes" of	on Form 990, Part IV, lin	e 11d. See Form 990, Part X, line 15.	
(a) D	escription		(b) Book value
(1)			,
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	4-1		
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	•		
Complete if the organization answered "Yes" of	on Form 990, Part IV, lin	e 11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes	MIDDIOE		
(2) LIABILITIES UNDER SPLIT-IN	NTEREST		0 074 000
(3) AGREEMENTS	1 126)		2,071,038.
	3 136)		7,845,526.
(5)			
(6)			
(7)			
(8)			
(9)	051		0 016 564
Total. (Column (b) must equal Form 990, Part X, col. (B) line		>	9,916,564.
Liability for uncertain tax positions. In Part XIII, provide to organization's liability for uncertain tax positions under leading.		•	·1

932053 10-02-19

Schedule D (Form 990) 2019

THE COMMUNITY FOUNDATION OF FREDERICK

52-1488711 Page 4 COUNTY MARYLAND, INC. Schedule D (Form 990) 2019 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. 16,026,058. Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: -204,866. a Net unrealized gains (losses) on investments 2a 2b **b** Donated services and use of facilities c Recoveries of prior year grants 2c 1,272,397. 2d d Other (Describe in Part XIII.) 1,067,531. e Add lines 2a through 2d 14,958,527. 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: 629,051. a Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII.) 1,484,819. c Add lines 4a and 4b 16,443,346. Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 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. 9,054,783. Total expenses and losses per audited financial statements _____ 1 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2b b Prior year adjustments c Other losses 2c 166,726. d Other (Describe in Part XIII.) 166,726. e Add lines 2a through 2d 8,888,057. 3 Subtract line 2e from line 1 3 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: 629,051. a Investment expenses not included on Form 990, Part VIII, line 7b 430,917. b Other (Describe in Part XIII.) 1,059,968. c Add lines 4a and 4b 9,948,025. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 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

Schedule D (Form 990) 2019

932054 10-02-19

Schedule D (Form 990) 2019 COUNTY MARYLAND, INC.	52-1488/11 Page 5
Part XIII Supplemental Information (continued)	
NOT MEET A "MORE-LIKELY-THAN-NOT" THRESHOLD OF BEING SUSTA	INED BY THE
APPLICABLE TAX AUTHORITY. MANAGEMENT DOES NOT BELIEVE IT H	AS TAKEN ANY TAX
POSITIONS THAT WOULD NOT MEET THIS THRESHOLD.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
CHANGE IN CSV	13,602.
RELATED ORGANIZATION INCOME	182,935.
CHANGE IN PV OF FUTURE INTEREST	1,075,860.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	1,272,397.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
FUNDS HELD FOR OTHERS	855,768.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
RELATED ORGANIZATION EXPENSES	166,726.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
FUNDS HELD FOR OTHERS	430,917.
	-

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Attach to Form 990.

OMB No. 1545-0047 2019

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization
THE COMMUNITY FOUNDATION OF FREDERICK

Employer identification number

52-1488711 COUNTY MARYLAND, INC. General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. 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 L. 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. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) (f) Total (a) Region (b) Number of (c) Number of (d) Activities conducted in the region employees, agents, and expenditures (by type) (such as, fundraising, prooffices is a program service, for and in the region gram services, investments, grants to describe specific type independent contractors in the region investments recipients located in the region) of service(s) in the region in the region CENTRAL AMERICA AND ENDOWMENT INVESTMENTS OFF SHORE THE CARIBBEAN 7,631,399,

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

0

0

Schedule F (Form 990) 2019

7 631 399

7,631,399,

0.

3 a Subtotal

c Totals (add lines 3a

and 3b)

b Total from continuation

sheets to Part I

52-1488711

Page 2

COUNTY MARYLAND, INC.

Schedule F (Form 990) 2019

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any

recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
 Enter total number of recipient organizations listed aby the IRS, or for which the grantee or counsel has Enter total number of other organizations or entities 	ecipient organizations h the grantee or coun other organizations or	s listed above that are risel has provided a sectentities.	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities	foreign country, er	recognized as tax-ey	empt		
ı							Schee	Schedule F (Form 990) 2019

Schedule F (Form 990) 2019 COUNTY MARYLAND, INC. 52–1488711

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

Part III can be duplicated if additional space is needed.

Page 3

1	I	ŀ	I	I	I	l	l	I	I	I €
(h) Method of valuation (book, FMV, appraisal, other)										Schedule F (Form 990) 2019
(g) Description of noncash assistance										Sched
(f) Amount of noncash assistance										
(e) Manner of cash disbursement										
(d) Amount of cash grant										
ober of ients										
(b) Region							9			
(a) Type of grant or assistance (b) Region recipi										

COUNTY MARYLAND, INC. chedule F (Form 990) 2019 Page 4 Part IV | Foreign Forms 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) 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) 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) Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) X Yes No Did the organization have an ownership interest in a foreign partnership during the tax year? /f "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) 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see

Instructions for Form 5713; don't file with Form 990) _____ Yes X No

Schedule F (Form 990) 2019

THE COMMUNITY FOUNDATION OF FREDERICK

Schedule F	(Form 990) 2019	COUNTY	MARYLAND,	INC.		52-1488711	Page 5
Part V	Supplemental						
				nitoring of funds); Pa	art I, line 3, column (f) (acco	ounting method; amounts of	
						ethod); and Part III, column (c)
						formation. See instructions.	
	·						
							
		_					

932075 10-12-19

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Part 1

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

OMB No. 1545-0047 2019

▶ Attach to Form 990.

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

Open to Public Inspection Employer identification number

52 - 1488711

THE COMMUNITY FOUNDATION OF FREDERICK INC General Information on Grants and Assistance COUNTY MARYLAND, Name of the organization

2 N X Yes 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 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 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. criteria used to award the grants or assistance? Part

126. SERVICES FOR RESIDENTS OF CASE MGR, TRANSPORTATION, AND INTERVENTION FOR PLATOON FRADE CERTIFICATIONS AND MENTAL HEALTH & CRISIS SENIORS IN SINGLE-UNIT ASSIST, AFTER-SCHOOL (h) Purpose of grant or assistance SERVICE COORDINATION SHADY GROVE HOSPITAL **fODEL FOR LOW-INCOME** EMERGENCY FINANCIAL FINANCIAL EMERGENCY SUPPORT AND DIRECT CHILDCARE ASSIST PREDERICK COUNTY SUILDING FUND, NRESTRICTED MRESTRICTED HOUSING 22 (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) ö ö ö Ö ċ ö (e) Amount of assistance non-cash recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant 683. 12,500, 82,824, 6,466, 11,957. 20,000 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 'n, (c) IRC section (if applicable) 52-1591139 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(c)(3) 53-0196605 46-5336766 47-1798824 52-0610441 52-1532556 (b) EIN GLENDALE DR. - FREDERICK, MD 21702 1 (a) Name and address of organization INC. - 216 ABRECHT PL - FREDERICK ADVOCATES FOR HOMELESS FAMILIES FREDERICK COUNTY MD INC. - 8222 8420 GAS HOUSE PIKE SUITE Z ALL SAINTS EPISCOPAL CHURCH AMERICAN NATIONAL RED CROSS ADVENTIST HEALTH CARE, INC. ADVOCATES FOR THE AGING OF or government 106 WEST CHURCH STREET 9901 MEDICAL CENTER DR WASHINGTON, DC 20013 22 NEEDS A FACE INC. ROCKVILLE, MD 20850 FREDERICK, MD 21701 FREDERICK, MD 21701 431 18TH ST. NW MD 21701 Q

3 Enter total number of other cugalizations are the instructions for Form 990.

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SEE PART IV FOR COLUMN (H) DESCRIPTIONS 37

Schedule I (Form 990) (2019)

932101 10-26-19

THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC. Schedule I (Form 990)

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)	RYLAND, I	INC. Governments and Organ	OF FREDERICK	nited States (Sche	dule I (Form 990). Pa		52~1488711 Page 1
1	(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
ANIMAL PLACE PO BOX 1118 GRASS VALLEY, CA 95945	68-0200668	501(C)(3)	.000,2	.0			FOOD FOR THOUGHT PROGRAM
ARC OF FREDERICK COUNTY, INC. 620-A RESEARCH DR FREDERICK, MD 21703-8619	52-6055211	501(C)(3)	157,559.	0			FREDERICK COUNTY SERVICES, CENTER-BASED EMPLOYMENT TRAINING PROGRAMS, OUTINGS &
ASCENSION EPISCOPAL CHURCH 23 N COURT ST WESTMINSTER, MD 21157	23-7376868	501(C)(3)	5,000.	0			SALARIES FOR CHILDREN & YOUTE MINISTRY
ASIAN AMERICAN CENTER OF FREDERICK 1080 WEST PATRICK ST.SUITE 16 FREDERICK, MD 21703	86-1140556	501(C)(3)	36,349.	0			STARRING FOR COMMUNITY HEALTH NEEDS, MEDICAL, HOUSING & TRANSPORTATION SUPPORT FOR CLIENTS
BIRTHING CIRCLE INC. 3605 FIELDSTONE RD RANDALLSTOWN, MD 21133	81-2549648	501(C)(3)	.005,5	•0			DOULA PROJECT AND FOR PROGRAMS TO IMPROVE BIRTH OUTCOMES AND LIVES OF INFANTS & FAMILIES
BLESSINGS IN A BACKPACK, INC. P.O. BOX 3508 FREDERICK, MD 21705	26-1964620	501(C)(3)	.672,77	0			UNRESTRICTED FOR FREDERICK COUNTY, WEEKEND & SUMMER FOOD BACKPACKS AND FOOD DISTRIBUTIONS
BOYS & GIRLS CLUB OF FREDERICK COUNTY, INC 413 BURCK ST FREDERICK, MD 21701	26-3424855	501(C)(3)	51,500.	. 0			STEM LAB, SUMMER SCHOLARSHIPS, ART PROGRAM, CONVERSION OF SPACE TO FULLTIME DAYCARE
BRAINY CAMPS 111 MICHIGAN AVENUE, NW WASHINGTON, DC 20010	27-1547370	501(C)(3)	10,000.	0.			CAMP NEW FRIENDS
BROADFORDING BIBLE BRETHREN CHURCH 13523 BROADFORDING CHURCH RD HAGERSTOWN, MD 21740	23-7205826	501(C)(3)	31,132.	0			UNRESTRICTED Schedule I (Form 990)

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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.)	Assistance to Go	vernments and Organ	izations in the Ur	nited States (Sche	dule I (Form 990), Par	tII.)	
(a) Name and address of organization or government	(p) 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
BRUNSWICK ECUMENICAL ASSISTANCE COMMITTE ON NEEDS, INC - 7 SOUTH MARYLAND AVENUE - BRUNSWICK, MD							BRUNSWICK FOOD BANK AND FINANCIAL EMERGENCY RELIEF TO RESIDENTS IN
,	65-1284873	501(C)(3)	6,458.	0.0			
BRUNSWICK MAIN STREET, INC. 13 W. POTOMAC ST. BRUNSWICK, MD 21716	20-1752140	501(C)(3)	10,000,	0			INSTITUTE MICRO GRANT PROGRAM TO ASSIST EXISTING DOWNTOWN BRUNSWICK BUSINESSES TO
CALVARY UNITED METHODIST CHURCH 131 WEST SECOND STREET FREDERICK, MD 21701	52-0685068	501(C)(3)	.12,951.	0			CONCERT SERIES, PRESCHOOL SCHOLARSHIPS AND EXPENSES, UNRESTRICTED
CARE NET PREGNANCY CENTER OF FREDERICK COUNTY - 707 NORTH MARKET ST FREDERICK, MD 21701	52-1322581	501(C)(3)	10,738.	0.			DIAPERS, WIPES, RASH CREAM, CAR SEATS FOR LOW INCOME MOTHERS WITH CHILDREN, UNRESTRICTED
CARROLL MANOR FIRE COMPANY 2795 ADAMS ST ADAMSTOWN, MD 21710	52-1293774	501(C)(3)	.01,750.	•0			UNRESTRICTED
CENTRO HISPANO DE FREDERICK, INC 5 WILLOWDALE DR FREDERICK, ND 21702	30-0430736	501(C)(3)	28,730.	.0			GOLDEN YEARS DATA COLLECTION PLAN & PROGRAM VAN RENTEL, PROGRAMS FOR VULNERABLE POPULATIONS
CHILDREN OF INCARCERATED PARENTS PARTNERSHIP INC PO BOX 791 FREDERICK, MD 21705	27-3552072	501(C)(3)	13,844.	0.			UNRESTRICTED, RESOURCES FOR WOMEN AND CAREGIVERS OF IMPACTED CHILDREN, CONTINUING EDUCATION FOR
CHILDREN'S HOSPITAL FOUNDATION 801 ROEDER RD. #3 SILVER SPRING, MD 20910	52-1640402	501(C)(3)	61,405.	0.			LODGING ASSISTANCE AND FAMILY RESOURCES FOR PATIENTS FIGHTING CHILDHOOD CANCER &
CHURCH OF THE TRANSFIGURATION 6909 MARYLAND AVE., P.O. BOX 87 BRADDOCK HEIGHTS, MD 21714	52-1549171	501(C)(3)	250,417.	0.			ONRESTRICTED
							Schedule I (Form 990)

Schedule I (Form 990)

THE COMMUNITY FOUNDATION OF FREDERICK

COUNTY MARYLAND, INC

Page 1 CROSSROADS FREEDOM CENTER EDICAL DAY CARE, RESPITE RT CLASSES FOR CHILDREN, BEST PLACES TO WORK AND SLEMENTARY AGE CHILDREN MAKING ART INSTRUCTION SERVICES, EQUIPMENT TO HTY OF FREDERICK DAY RANSPORTATION, ALICE COOF REPAIR FOR MEN'S SUPPORT SAFE COVID-19 (h) Purpose of grant or assistance TINANCIAL ASSISTANCE XTRACURRICULARS AND SUBSIDIES FOR ADULT HOUSE AND PORCH AT AMILIES WITH HOME TVENTS, EMERGENCY R-TRAIN STAFF IN LTERNATE SERVICE ROVISION MODELS, URCHASE PERSONAL SCHOLARSHIPS TO 52-1488711 NRESTRICTED NRESTRICTED IDUCATION, (g) Description of non-cash assistance Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) appraisal, other) (f) Method of valuation (book, FMV, Ö ö ö ď ö ö (e) Amount of non-cash assistance o 12,951. 9,000 8,000, 6,975. (d) Amount of cash grant 8,250, 23 447 37,030 26 060 FREDERICK COUNTY (c) IRC section if applicable 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 22-2964056 13-6068327 52-1481592 82-3087890 26-1168347 83-2589088 52-6000789 52-1598993 (b) EIN DEVELOPMENT - 101 NORTH COURT ST. DELAPLAINE VISUAL ARTS EDUCATION CENTER - 40 S. CARROLL STREET -174 THOMAS JOHNSON DR SUITE 202 (a) Name and address of organization or government DAYBREAK ADULT DAY SERVICES CITY OF FREDERICK ECONOMIC 1255 23RD ST NW SULTE 200 CR FREEDOM CENTER, INC. COUNCIL ON FOUNDATIONS COMMUNITY OPTIONS, INC 7819 ROCKY SPRINGS RD - FREDERICK, MD 21701 WASHINGTON, DC 20037 NEW MARKET, MD 21774 IJAMSVILLE, MD 21754 CROSSED BRIDGES, LLC FREDERICK, MD 21702 FREDERICK, MD 21702 MD 21702 FREDERICK, MD 21701 4730 LJAMSVILLE RD. CLTY YOUTH MATRIX Schedule I (Form 990) 5710 KENT DR 91 HOWARD CT FREDERICK,

Schedule I (Form 990)

PLOWERS OVER FREDERICK

PROJECT AND DOWNTOWN

HOLIDAY LIGHTS

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81,020.

501(C)(3)

52-1682341

DOWNTOWN FREDERICK PARTNERSHIP,

INC. - 19 E. CHURCH ST. -

MD 21701

FREDERICK,

o

THE COMMUNITY FOUNDATION OF FREDERICK

52-1488711

COUNTY MARYLAND, Schedule I (Form 990)

Page 1 Schedule I (Form 990) SPECIES (THEATRE) PROJECTS ESSENTIAL STAFF & GENERAL COVID-19 RELATED CLOSURES SCHOLARSHIPS FOR STUDENTS IN MIDDLETOWN, MD VALLEY STUDENT SUCCESS PROGRAM, AND FOR PROGRAMS AT THE FREE RANGE HUMANS & THE ASSIST CURRENT STUDENTS SUILDINGS, UNRESTRICTED AND FOOD AID RELATED TO **TAINTENANCE OF THE CAMP** DEVELOPMENT & TRAINING, SENERAL FUND, BUILDING WITH EMERGENCY SHELTER EDICAL/HEALTH FIELDS BRIGHT FUTURES 2019 & SENIOR LIVING CAPITAL (h) Purpose of grant or assistance 2020 PROGRAMS, STAFF PURSING CAREERS IN NAMP, UNRESTRICTED CAPACITY BUILDING FUND, DEACON FUND OPERATIONS DURING IN FREDERICK, MD PRESERVATION OF MAINTENANCE & ENDANGERED MPAIGN (g) Description of non-cash assistance Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (f) Method of valuation (book, FMV, appraisal, other) ö ö 0 ं ċ . ö (e) Amount of non-cash assistance ö ö 5,000. 5,000. 5,210, 22,146, 48,631, 6,438. (d) Amount of cash grant 11,672. 22, 287. 67,759 FREDERICK COUNTY (c) IRC section if applicable 501(C)(3) 52-0627772 501(C)(3) 52-1231768 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3)501(C)(3) 47-2371933 52-0610464 52-6000943 52-1126146 11-3451703 52-0651674 52-1076100 (b) EIN DR. J. ELMER HARP MEDICAL CENTER, COUNTY - 8420 GAS HOUSE PIKE STE. FAHRNEY-KEEDY MEMORIAL HOME, INC. ğ FREDERICK CHURCH OF THE BRETHREN FREDERICK COUNTY 4-H CAMP CENTER FAMILY PARTNERSHIP OF FREDERICK OPOSSUMTOWN PIKE - FREDERICK, (a) Name and address of organization or government FREDERICK ARTS COUNCIL, INC. FREDERICK COMMUNITY COLLEGE EVANGELICAL LUTHERAN CHURCH 248 W 35TH ST, 10TH FLOOR EE - FREDERICK, MD 21701 INC. - 400 EAST MAIN ST FOUNDATION, INC. - 7932 FRACTURED ATLAS, INC. 15 W. PATRICK STREET MIDDLETOWN, MD 21769 BOONSBORO, MD 21713 FREDERICK, MD 21701 201 FAIRVIEW AVENUE FREDERICK, MD 21701 FREDERICK, MD 21703 FREDERICK, MD 21701 NEW YORK, NY 10001 35 EAST CHURCH ST. 8507 MAPLEVILLE RD 3702 BASFORD RD 21702

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Schedule | (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)

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(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	(n) Purpose of grant or assistance
FREDERICK COUNTY DEPARTMENT OF			***				HOLIDAY SUPPORT FOR FOSTER CHILDREN AND
SOCIAL SERVICES - 1888 NORTH MARKET ST - FREDERICK, MD 21701	52-6000943	GOVT	11,600.	0			FRAGILE SENIORS, BUILDING ACCESS RAMPS
							EMERGENCY ASSISTANCE
FREDERICK COUNTY HUMANE SOCIETY							PROGRAM, SPAYING OF
217 W. PATRICK STREET							ADOPTABLE ANIMALS FOR
FREDERICK, MD 21701	52-6013207	501(C)(3)	5,059.	0.			LOW-INCOME FAMILIES,
FREDERICK COUNTY LANDMARKS FOUNDATION, INC 1110 ROSEMONT AVE - FREDERICK MD 21701	23-7241926	501(€)(3)	18	G			HISTORIC PRESERVATION
	1		* > > 1				
FREDERICK COUNTY PUBLIC LIBRARIES							CHILDREN'S PROGRAM,
110 EAST PATRICK ST.							TRAINING , MATERIALS AND
FREDERICK, MD 21701	52-0591537	501(C)(3)	91,466.	0.			ACTIVITIES FOR THE
							WALKERSVILLE HS BASEBALL
FREDERICK COUNTY PUBLIC SCHOOLS							PROGRAM & UNRESTRICTED,
EAST							MEDIA CENTER BOOKS FOR
FREDERICK, MD 21701	52-6000941	501(C)(3)	29,999.	0.			MONOCACY ELEMENTARY,
							EQUIPMENT FOR CITIZENS
FREDERICK COUNTY, MD GOVERNMENT							CARE AND MONTEVUE
				(ASSISTED LIVING, MEAL
FREDERICK, MD 21701	52-6000943	GOVT	.297,82.	n			FRAYS AND CART TO PROVIDE
FREDERICK HEALTH HOSPICE							UNRESTRICTED, CAMP JAMIE
1 FREDERICK HEALTH WAY							EXPENSES, KLINE HOSPICE
FREDERICK, MD 21701	52-0591612	501(C)(3)	73,370.	0			HOUSE
							GOOD SAMARITAN, EMERGENCY
FREDERICK HEALTH HOSPITAL, INC.							SERVICES, MEDICAL
400 WEST SEVENTH ST.							MANAGEMENT PROGRAM,
FREDERICK, MD 21701-4593	52-0591612	501(C)(3)	1,005,495.	0.			HURWITZ BREAST CANCER
							CHANGED LIFE RECOVERY
FREDERICK RESCUE MISSION, INC.							0
ELLOO!			6	·			EXPENSES, FAITH HOUSE
FREDERICK, MD 21701	52-0813371	501(C)(3)	120,472.	0.			CASE MANAGER AND
							Schodulo I (Earm 000)

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COUNTY MARYLAND,

Page 1 STORAGE UNIT FOR COVID-19 DISABILITIES, VETERANS OF DISTRIBUTION CAPACITY FOR INRESTRICTED AND CEMETERY CAPITAL IMPROVEMENT FUND, SIRL SCOUTS IN FREDERICK RESIDENTS, WALKERSVILLE SOVID-19 CRISIS, SCHOOL SDUCATIONAL SUPPORT FOR CULLER LAKE PROJECT AND SUPPORTING FAMILIES AND UNRESTRICTED EDUCATION PERSONS WITH CHILDREN SERVED BY THE PROGRAMS THAT TRAIN & KINETIC ART PROMENADE THILD ADVOCACY CENTER (h) Purpose of grant or assistance HE FOOD BANK DURING ELCA WORLD HUNGER 52-1488711 INCREASE FOOD SOCCE COURTS COOD BANK, COUNTY (g) Description of non-cash assistance Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) appraisal, other) (f) Method of valuation (book, FMV, ٠. ď ö o. 0. o ö ö (e) Amount of non-cash assistance 12,000. 19,529. 12,800. 30,500. 7,870, 9,408 6,230 16,596. (d) Amount of cash grant 76 756 (c) IRC section if applicable 52-1759639 501(C)(3) 501(C)(3) 23-7047548 501(C)(3) 501(C)(3) 46-1297552 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 52-6019540 501(C)(3) 52-0679615 20-5149362 54-0732966 20-1946411 52-1036628 (p) EIN GOOD SHEPHERD EVANGELICAL LUTHERAN FRIENDS FOR NEIGHBORHOOD PROGRESS, GIRL SCOUT COUNCIL OF THE NATION' MONOCACY VALLEY, INC. - 400 EAST CAPITAL - 4301 CONNECTICUT AVE., - 1509 HOMESTEAD AVE GLADE VALLEY COMMUNITY SERVICES, REV. PHILIP N. CURRAN 21 FULTON FRIENDS OF CARROLL CREEK URBAN CENTER - 4210 SPRINGVIEW CT. -NW SUITE M-2 - WASHINGTON, DC CHURCH STREET - FREDERICK, MD FRIENDS OF THE CHILD ADVOCACY GLADE UNITED CHURCH OF CHRIST (a) Name and address of organization or government FRIENDS OF BAKER PARK, INC. GOODWILL INDUSTRIES OF THE CHURCH - 1415 W. 7TH ST. -INC. - 100 S. MARKET ST. AVENUE, P.O. BOX 236 -WALKERSVILLE, MD 21793 WALKERSVILLE, MD 2179 INC. - P.O. BOX 655 -JEFFERSON, MD 21755 FREDERICK, MD 21701 FREDERICK, MD 21705 MD 21702 FREDERICK, MD 21701 Schedule I (Form 990) PO BOX 4146 PARK, INC. FREDERICK, 21701 20008

Schedule I (Form 990)

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THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC. Schedule I (Form 990)

e I (Form 990)	NITY FOUN RYLAND, I	THE COMMUNITY FOUNDATION OF F. COUNTY MARYLAND, INC.	FREDERICK			5	52-1488711 Page 1
Part II Continuation of Grants and Other Assistance to Governments	Assistance to Go		nizations in the Ur	nited States (Sche	and Organizations in the United States (Schedule I (Form 990), Part II.)	11.)	
(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
GRACE UNITED CHURCH OF CHRIST 25 EAST SECOND STREET FREDERICK, MD 21701	52-0607994	501(C)(3)	8,223.	0,			DNRESTRICTED
GRACEHAM MORAVIAN CHURCH 8231-A ROCKY RIDGE RD THURMONT, MD 21788	52-0607996	501(C)(3)	62,256.	0			UNRESTRICTED AND CEMETERY
HABITAT FOR HUMANITY OF FREDERICK COUNTY - 117 E CHURCH ST -		() () () () () () () () () ()		c			TOOLS, EQUIPMENT & SUPPLIES FOR A BRUSH WITH KINDNESS PROGRAM, HOME
FREDERICK, MD 21701	52-1820647	501(C)(3)	41,007.	0.			REPAIRS FOR THOSE IN
HEARTLY HOUSE, INC. P.O. BOX 857 FREDERICK, MD 21705	52-1186250	501(C)(3)	87,810.	0			RENTAL ASSISTANCE, COMMUNITY OUTREACH CAMPAIGN, NEW PHONE SYSTEM, SURVIVOR BASIC
HEIFER INTERNATIONAL P.O. BOX 8058 LITTLE ROCK, AR 72003-8058	35-1019477	501(C)(3)	10,000.	0			GNRESTRICTED
							MAINTENANCE &
HISTORICAL SOCIETY OF FREDERICK COUNTY, INC 24 EAST CHURCH ST.	52.6050333	601(7)(3)	r c c c	O			PRESERVATION OF BUILDINGS, MATERIALS, FRAINTIG AND ACTIVITIES
TOTAL THE STATE	00000	() () () () () () () () () ()	,	•			UNRESTRICTED FOR CRUMIAND
HOMEWOOD FOUNDATION, INC. P.O. BOX 250 WILLIAMSPORF, MD 21795	52-1892689	501(C)(3)	31,092.	•0			FARMS, THE BENEVOLENCE FUND, ALZHEIMER UNIT FOR SERVICES TO PERSONS WITH
							SCHOLARSHIPS AND
HOOD COLLEGE 401 ROSEMONT AV							FINANCIAL AID, MATH DAY, SUMMER CONCERT SERIES,
FREDERICK, MD 21701	52-0591608	501(C)(3)	51,736.	0.			CAMPUS GROUNDS
							YOUNG MEN RISING PROGRAM,
HOUSING AUTHORITY OF THE CITY OF FREDERICK - 209 MADISON ST							ASSISTANCE WITH TRANSPORTATION
≥ `	52-6001395	501(c)(3)	88,910.	0			CHILDCARE, EDUCATION
				i E			Schedule (Form 990)

THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC.

Schedule I (Form 990) COUNTY MARYLAND,		INC.				5	52-1488711 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule (Form 990), Part II.)	Assistance to Go	vernments and Orgar	izations in the Ur	ited States (Sche	dule I (Form 990), Par	1 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
HOWARD CHAPEL RIDGEVILLE UNITED METHODIST CHURCH - 1970 LONG CORNER RD MOUNT AIRY, MD 21771	52-1079627	501(C)(3)	294,404.	0.			CHURCH PROGRAMS
I BELIEVE IN ME, INC. PO BOX 4255							MENTORING HOTLINE & FOOD INSECURITY ASSISTANCE FOR UNDERPRIVILEGED YOUTH
FREDERICK, MD 21705	82-2072961	501(C)(3)	6,400.	0			FOOD FOR DISTRIBUTIONS
INTERPAITH HOUSING ALLIANCE, INC. 5301 BUCKEYSTOWN PIKE, STE. 320			L G	c			RENTAL SUPPORT, PROGRAMS TO ASSIST LOW & MODERATE INCOME FREDERICK COUNTY
FREDERICA, PID AL/U4	28/80/1-70	DUI(C)(3)	12,325.				KESTDENTS WITH HOUSING,
LITERACY COUNCIL OF FREDERICK COUNTY, INC 110 EAST PATRICK ST FREDERICK, MD 21701	52-1100228	501(C)(3)	19,569,	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)	9,572.	0.			SCHOLARSHIP AND FINANCIAL AID FUND
MARYLAND 4-H CLUB FOUNDATION, INC. 8020 GREENMEAD DR. COLLEGE PARK, MD 20815	52-6056016	501(C)(3)	.000,02	0			UNRESTRICTED FOR MONTGOMERY COUNTY 4-H CLUB
MARYLAND FFA FOUNDATION, INC. P.O. BOX 3241 SILVER SPRING, MD 20918-3241	52-1354382	501(C)(3)	. 21, 656.	.0			UNRESTRICTED AND FOR CHAPTER CLOSEST TO POOLESVILLE, MD
MARYLAND FOOD BANK 2200 HALETHORPE FARMS RD BALTIMORE, MD 21227	52-1135690	501(C)(3)	29,500.	0.			SENIOR PANTRY PROGRAM EXPENSES AND EMERGENCY FOOD ASSISTANCE TO LOW-INCOME, FOOD INSECURE
MCDANIEL COLLEGE 2 COLLEGE HILL WESTWINSTER, MD 21157-4390	52-0591694	501(C)(3)	5,748.	0			UNRESTRICTED AND SCHOLARSHIP FUND Colondial (Form OD)
							Schedule I (Form 990)

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THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC. Schedule I (Form 990)

Schedule (Form 990) COUNTY MARYLAND,	RYLAND, I	D, INC.	FREDERICA	;			52-1488711 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	nizations in the U	nited States (Sche	dule I (Form 990), Par	t 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
							PARENT COACHING EXPENSES,
MENTAL HEALTH ASSOCIATION OF							HEALTHY FAMILIES PROGRAM,
×	52-0968521	501(C)(3)	79 250.	0			COVID-10 TO ENSURE
							DENTAL CARE MEDICATIONS
MISSION OF MERCY, INC.							AND MEDICAL CARE FOR
22 S. MARKET ST SUITE 6D				•			WOMEN, OPIOID /CONTROLLED
FREDERICK, MD 21701	86-0704883	501(C)(3)	67,984.	0			SUBSTANCE USE SAFETY AND
O TOCHOO OF THE VINETAGE VICTORIA							
S501 HINGERFORD DR #149							STILLENES AT POOLESYTLLE
	52-1804509	501(C)(3)	40,000.	0			SH
MONTGOMERY UNITED METHODIST CHURCH							
28325 KEMPTOWN RD.							
DAMASCUS, MD 20872	52-1320691	501(C)(3)	32,000.	0		į	UNRESTRICTED
MOUNTAIN VIEW UNITED METHODIST							
CHURCH - 11501 MOUNTAIN VIEW RD -							NEEDS OF THE CHURCH AND
DAMASCUS, MD 20872	52-1200821	501(C)(3)	19,477.	0.			MISSION WORK
MT. AIRY VOLUNTEER FIRE COMPANY							
702 N. MAIN ST.							PHYSICAL FITNESS
MOUNT AIRY, MD 21771	52-0422267	501(C)(3)	16,985.	0.			EQUIPMENT, UNRESTRICTED
NATIONAL LUTHERAN HOME FOR THE							
AGED - 9701 VIERS DR - ROCKVILLE,		· · · · · ·					
MD 20850	53-0196624	501(C)(3)	10,000.	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 - 7 SOUTH							
MARYLAND AVENUE P.O. BOX 217 - BRUNSWICK, MD 21716	52-0683373	501(C)(3)	5,833,	0			UNRESTRICTED
THE STATE OF THE S							Cooperate Cooperate October 1

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COUNTY MARYLAND, Schedule I (Form 990)

Page 1 NAMPAIGN TO END RACEHORSE INVESTIGATION DEPARTMENT, SRIDGING THE GAP PROGRAM, DPERATING EXPENSES WHILE PERATING EXPENSES WHILE COUTH RECOVERY PROGRAMS, ERFORMANCE VENUES ARE PERFORMANCE VENUES ARE LOSED DUE TO COVID-19 CLOSED DUE TO COVID-19 (h) Purpose of grant or assistance REATMENT SERVICES TI SCREENING AND CRUELTY, CRUELTY INRESTRICTED NRESTRICTED NRESTRICTED NRESTRICTED NRESTRICTED UNRESTRICTED ONRESTRICTED MRESTRICTED PROGRAM (g) Description of non-cash assistance Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (Form 990), Part II.) (f) Method of valuation (book, FMV, appraisal, other) Ö 0. (e) Amount of non-cash assistance ö 0 Ö 0 ö o. 515. 7,000. 7,000 37,500, 14,800. 10,000. 8,000 10,000 (d) Amount of cash grant 5,669, 'n, (c) IRC section if applicable 501(C)(3) 501(C)(3) 52-2046378 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(c)(3)P.O. BOX 154 - JEFFERSON, MD 21755 36-2167026 501(C)(3) 59-3427729 501(C)(3) 52-1218336 52-0607930 83-0874099 46-3479474 52-1394893 54-1103871 (b) EIN CLUB DR - BONITA SPRINGS, FL 34134 SOUTHWEST FLORIDA - 26951 COUNTRY OF ANIMALS (PETA) - 501 FRONT ST PLEASANT VALLEY UNITED METHODIST BRETHREN - 6213 PICNIC WOODS RD. PEOPLE FOR THE ETHICAL TREATMENT PLANNED PARENTHOOD OF MARYLAND, CHURCH - 10849 WHITE HALL RD -PHOENIX FOUNDATION OF MARYLAND PREGNANCY RESOURCE CENTER OF (a) Name and address of organization or government 244 S. JEFFERSON ST.SUITE B PLEASANT VIEW CHURCH OF THE RESPONSIBLE MEDICINE - 5100 WISCONSIN AVE NW SUITE 400 7420 HAYWARD RD, STE 203 PHYSICIANS COMMITTER FOR INC. - 330 N. HOWARD ST. WASHINGTON, DC 20016 SMITHSBURG, MD 21783 FREDERICK, MD 21702 FREDERICK, MD 21705 BALTIMORE, MD 21201 FREDERICK, MD 21701 NORFOLK, VA 23510 OTHER VOICES, INC NEW SPIRE ARTS PO BOX 4193

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COUNTY MARYLAND, Schedule I (Form 990)

Page 1 DEPAUL DENTAL PROGRAM AND EDICAL & LIVING EXPENSES POOD & SHELTER TO SUPPORT DENTAL SERVICES, UTILITY, HELTER PROGRAMS, DIRECT 700D AND OTHER EMERGENCY HOMELESSNESS PREVENTION REFURBISHED PROGRAM FOR SUBSIDIZED CAR REPAIRS DURING COVID-19 CRISIS THE RECOVERY COMMUNITY HOUSING STABILIZATION CHOLARSHIP FUNDS AND (h) Purpose of grant or assistance SERVICES PROVIDED IN PREDERICK COUNTY MD, OR FAMILY IN NEED, EXPENSES, HOMELESS EMERGENCY FOOD AND FINANCIAL NEEDS OF OR WOMEN PROGRAM, HELTER EXPENSES, SCHOLARSHIPS TOMEN, YOUTH INRESTRICTED MRESTRICTED MRESTRICTED (g) Description of non-cash assistance Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) valuation (book, FMV, appraisal, other) (f) Method of ċ ं ö ö Ċ. ö (e) Amount of non-cash assistance ö ċ 20,910. 5 800 88,512, 29,472. 28,048. 48,000 36,993, (d) Amount of cash grant 12,266, 5 000 (c) IRC section if applicable 52-1449375 501(C)(3) 501(C)(3) 27-1336325 501(C)(3) 52-1182284 501(C)(3) 501(C)(3) 83-4466348 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 52-1752206 22-2406433 47-4247955 52-0954961 58-1437002 (p) EIN PRESERVATION AND ENHANCEMENT FUND RELIGIOUS COALITION FOR EMERGENCY ST. JOHN REGIONAL CATHOLIC SCHOOL OF MOUNT OLIVET CEMETERY - 515 S MARKET ST - FREDERICK, MD 21701 HUMAN NEEDS - 27 DEGRANGE ST. -223 W FIFTH ST P.O. BOX 1003 (a) Name and address of organization or government SECOND CHANCES GARAGE, INC. SAINT JOHN'S CATHOLIC PREP PROJECT LIFELINE, INC. 8414 OPOSSUMTOWN PIKE BUCKEYSTOWN, MD 21717 338 S. JEFFERSON ST. EMMITSBURG, MD 21727 FREDERICK, MD 21701 FREDERICK, MD 21701 FREDERICK, MD 21702 FREDERICK, MD 21702 FREDERICK, MD 21701 16840 S. SETON AVE. SETON CENTER, INC. SAMARITAN'S PURSE 528 N MARKET ST. BOONE, NC 28607 SALVATION ARMY P.O. BOX 3000 PO BOX 909

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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.)	Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Sche	dule I (Form 990), Par	t II.)	1000
(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
							NEW HORIZONS FREDERICK
SHIP OF FREDERICK COUNTY							SUMMER PROGRAM EXPENSES
P.O. BOX 1629							AND ACADEMY LIFE SKILLS
FREDERICK, MD 21702	47-2272768	501(C)(3)	35,250.	0			CURRICULUM, EMERGENCY
SOCIETY OF ST. VINCENT DE PAUL,							RENT, UTILITY, FOOD AND
ST. JOHN'S CONFERENCE INC 112							OTHER EMERGENCY FINANCIAL
EAST SECOND ST FREDERICK, MD							NEEDS OF RESIDENTS OF
21701	45-5454041	501(C)(3)	6,000.	0			PREDERICK COUNTY,
							CASE MGR, TRANSPORTATION,
ISH							CRITICAL SERVICES
TOTO - 529 S JEFFERSON ST -	52_0889386	501(0)(3)	34 139	c			FARTNERSHIP WITH FREDERICK CONTAINS
	000000-70	(5)(5)(10)	* / 6 7 ' \$ 6				
SPECIAL OPERATIONS FUND							
	52-1765222	501(C)(3)	.000,6	0.			UNRESTRICTED
	1						
ST. JOHN'S CEMETERY, INC.							
116 EAST 2ND ST			1				PRESERVATION &
FREDERICK, MD 21701	52-1746331	501(C)(3)	25,371.	0			MAINTENANCE
STEPHEN SILLER TURNEL TO TOWERS FOUNDATION - 2361 HYLAN BLVD -							
STATEN ISLAND, NY 10306	02-0554654	501(C)(3)	10,000.	0.		ļ	UNRESTRICTED
THE BISHOP MUSEUM OF SCIENCE AND NATURE - PO BOX 9265 - BRADENTON, FL 34206	59-0598726	501(C)(3)	40,000	0			UNRESTRICTED
							A NON-CONGREGATE
THE CLAGGETT CENTER							QUARANTINE & ISOLATION
3035 BUCKEYSTOWN PIKE							SHELTER FOR COUNTY FIRST
ADAMSTOWN, MD 21710	52-0623151	501(C)(3)	17,500.	0.		***************************************	RESPONDERS AND HEALTHCARE
							YOUTH PROGRAMS, MENTAL
THE FREDERICK CENTER, INC.							HEALTH NEEDS OF THE
PO BOX 3231	7000	504(0)(3)	7	C			EGBTQ+ COMMUNITY DURING
	40-1/03400	DOT(C)(3)	12,310	•			COLUMN CALANTA
							Schedule I (Form 990)

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THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC.

Schedule (Form 990) COUNTY MARYLAND,	RYLAND, I	THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC.	KEDEKICK				52-1488711 Page 1
rariii commusuon ol'arants and Orne Assistance to dovernments and Organizations in the United States (Schedule I (FORM 390), Part III)	Assistance to Go	vernments and Organ	nizations in the Ur	nted States (Sche	aule i (Form 990), Par	T 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
THE MONOCACY FOINDAFFON THE							LIFT & CARY SYSTEM, CAMP
620-B RESEARCH CT							SCHOLARSHIP, NEEDS OF THE
FREDERICK, MD 21703	52-1953383	501(C)(3)	12,642.	0.			DEVELOPMENTALLY DISABLED.
THE RANCH 7902 FINGERBOARD RD FREDERICK, MD 21704	52-1055741	501(C)(3)	6,143.	0.			ONRESTRICTED
THOMPSON LEGACY FOUNDATION PO BOX 2384 KELLER, TX 76244	84-3174097	501(C)(3)	10,000.	0.			ONRESTRICTED
							STUFF THE BUS, COVID-19
UNITED WAY OF FREDERICK COUNTY, INC 629 NORTH MARKET ST -							EMERGENCY RELIEF CAMPAIGN ALICE REPORT
ERICK, MD 21701	52-0607973	501(C)(3)	66,234.	0.			Care I
UNIVERSITY OF MARYLAND COLLEGE PARK FOUNDATION INC 1221 SYMONS HALL - COLLEGE PARK, MD 20742	52-2197313	501(C)(3)	22,271.	0.			KIDS GROWING WITH GRAINS FOR KIDS IN FREDERICK COUNTY, UNRESTRICTED
UNIVERSITY OF ROCHESTER PO BOX 270032 300 EAST RIVER RD. ROCHESTER, NY 14627	16-0743209	501(C)(3)	71,312.	0.			PIANO CONCERTS
WALKERSVILLE UNITED METHODIST CHURCH - 22 MAIN ST WALKERSVILLE, MD 21793	52-6043801	501(C)(3)	7,852.	0.			UNRESTRICTED
WAREFIGHTER ADVANCE INC. PO BOX 222 PATUXENT RIVER, MD 20670	82-0791635	501(C)(3)	15,000.	0.			UNRESTRICTED
							TIVOLI SOCIETY, FAMILIES
WEINBERG CENTER FOR THE ARTS, INC. 20 WEST PATRICK ST. FREDERICK, MD 21701	52-1900511	501(C)(3)	5,730,	0			NEED FUND PROGRAM EXPENSES, CAPITAL IMPROVEMENTS,
							Schedule I (Form 990)

THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC.

e I (Form 990)	COUNTY MARYLAND, INC.	THE COMPANY FOUNDATION OF FREDERICA COUNTY MARYLAND, INC.	VEDENT CN			5	52-1488711 Page 1	ا
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Sche	dule I (Form 990), Pa	rt II.)		ı
(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	Í
WELLS HOUSE, INC & GALE RECOVERY 427 EAST PATRICK ST FREDERICK, MD 21701	52-1061150	501(C)(3)	6,644.	0.			HOLISTIC THERAPIES FOR MEN IN RECOVERY, MUSIC THERAPY EXPENSES, TRAUMA INFORMED YOGA TO FEMALE	ı ı
WHITE COAT WASTE PROJECT PO BOX 26029 WASHINGTON, DC 20001	46-0856543	501(C)(3)	10,000.	0			ONRESTRICTED	
XMCA OF FREDERICK COUNTY 1000 NORTH MARKET ST FREDERICK, MD 21701	52-0607953	\$01(C)(3)	.868,98	0.			CONVERT CAMP WEST MAR AS AN EMERGENCY FAMILY SHELTER FOR HOMELESS FAMILIES DURING COVID-19	
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Schedule I (Form 990)

932241 04-01-19

COUNTY MARYLAND, INC.

Page 2

52-1488711

Schedule I (Form 990) (2019) COUNTY MARYLAND, INC.

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	359	2,006,958.	0		
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	Iditional information.	
PART I, LINE 2:					
THROUGH THE GRANT APPLICATION PROCE	SS,	NONPROFIT ORG	ORGANIZATIONS	MUST	
DESCRIBE THE PROGRAM FOR WHICH THEY	ARE	REQUESTING S	SUPPORT AND	AND MUST	
DEMONSTRATE HOW THE GRANT WILL NOT	ONLY HELP	LP ACHIEVE	THEIR GOALS,	LS, BUT HOW	
THE GRANT WILL POSITIVELY IMPACT T	IMPACT THE COMMUNITY.		MANDATORY GRANT	NT REPORTS	
FROM EACH ORGANIZATION ENSURE ACCOUNTABILITY.	UNTABILI	ry.			

COLUMN (H): LINE 1, PART II,

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

932102 10-26-19

Schedule I (Form 990) (2019)

THE COMMUNITY FOUNDATION OF FREDERICK Schedule (Form 990) COUNTY MARYLAND, INC. 52-1488711 Page 2 Part IV Supplemental Information
Part 14 Supplemental information
(H) PURPOSE OF GRANT OR ASSISTANCE: CASE MGR, TRANSPORTATION, CHILDCARE
ASSIST, EMERGENCY FINANCIAL ASSIST, AFTER-SCHOOL AND SUMMER ACTIVITIES,
RENT & UTILITIES, 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, UNRESTRICTED
NAME OF ORGANIZATION OR GOVERNMENT: ARC OF FREDERICK COUNTY, INC.
(H) PURPOSE OF GRANT OR ASSISTANCE: FREDERICK COUNTY SERVICES,
CENTER-BASED EMPLOYMENT TRAINING PROGRAMS, OUTINGS & ACTIVITIES FOR
CHILDREN WITH SPECIAL NEEDS, STAFFING AND GENERAL OPERATIONS DURING
COVID-19 RELATED CLOSURES, UNRESTRICTED
NAME OF ORGANIZATION OR GOVERNMENT: ASIAN AMERICAN CENTER OF FREDERICK
(H) PURPOSE OF GRANT OR ASSISTANCE: STAFFING FOR COMMUNITY HEALTH NEEDS,
MEDICAL HOHCING & MEANCHORMANTON CHINDODE FOR CLIENTE HADEDGOING CANCER

TREATMENTS, COVID-19 EMERGENCY RELIEF

NAME OF ORGANIZATION OR GOVERNMENT: BLESSINGS IN A BACKPACK, INC. (H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED FOR FREDERICK COUNTY, WEEKEND & SUMMER FOOD BACKPACKS AND FOOD DISTRIBUTIONS DURING COVID-19 **EMERGENCY**

NAME OF ORGANIZATION OR GOVERNMENT:

BOYS & GIRLS CLUB OF FREDERICK COUNTY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: STEM LAB, SUMMER SCHOLARSHIPS, ART PROGRAM, CONVERSION OF SPACE TO FULLTIME DAYCARE CENTER FOR ESSENTIAL

Part IV | Supplemental Information

PERSONNEL, OPERATIONS DURING COVID-19 RELATED CLOSURES, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

BRUNSWICK ECUMENICAL ASSISTANCE COMMITTEE ON NEEDS, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: BRUNSWICK FOOD BANK AND FINANCIAL

EMERGENCY RELIEF TO RESIDENTS IN THE GREATER BRUNSWICK AREA

NAME OF ORGANIZATION OR GOVERNMENT: BRUNSWICK MAIN STREET, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: INSTITUTE MICRO GRANT PROGRAM TO

ASSIST EXISTING DOWNTOWN BRUNSWICK BUSINESSES TO MEET THEIR IMMEDIATE

NEEDS DUE TO LOSS OF REVENUE FROM COVID-19 CRISIS

NAME OF ORGANIZATION OR GOVERNMENT: CENTRO HISPANO DE FREDERICK, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: GOLDEN YEARS DATA COLLECTION PLAN &

PROGRAM VAN RENTAL, PROGRAMS FOR VULNERABLE POPULATIONS DURING COVID-19

CRISIS, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

CHILDREN OF INCARCERATED PARENTS PARTNERSHIP INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED, RESOURCES FOR WOMEN

AND CAREGIVERS OF IMPACTED CHILDREN, CONTINUING EDUCATION FOR FAMILY

INDEPENDENCE

NAME OF ORGANIZATION OR GOVERNMENT: CHILDREN'S HOSPITAL FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: LODGING ASSISTANCE AND FAMILY

RESOURCES FOR PATIENTS FIGHTING CHILDHOOD CANCER & MEDICAL EXPENSES

NAME OF ORGANIZATION OR GOVERNMENT:

COUNTY MARYLAND, INC.

Part IV | Supplemental Information

CITY OF FREDERICK ECONOMIC DEVELOPMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: BEST PLACES TO WORK AND CITY OF FREDERICK DAY EVENTS, EMERGENCY FINANCIAL ASSISTANCE FOR RENT, MORTGAGE & UTILITY EXPENSES FOR SMALL BUSINESSES IN CITY OF FREDERICK SEVERELY IMPACTED BY COVID-19 CLOSURES.

NAME OF ORGANIZATION OR GOVERNMENT: CITY YOUTH MATRIX

(H) PURPOSE OF GRANT OR ASSISTANCE: EXTRACURRICULARS AND EDUCATION, TRANSPORTATION, ALICE FAMILIES WITH HOME ACTIVITY SUPPLIES AND MONTHLY FOOD INSECURITY ASSISTANCE

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY OPTIONS, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: RE-TRAIN STAFF IN ALTERNATE SERVICE PROVISION MODELS, PURCHASE-PERSONAL-PROTECTIVE EQUIPMENT & CLEANING SUPPLIES

NAME OF ORGANIZATION OR GOVERNMENT: DAYBREAK ADULT DAY SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: SUBSIDIES FOR ADULT MEDICAL DAY CARE, RESPITE SERVICES, EQUIPMENT TO SUPPORT SAFE COVID-19 REOPENING PLAN, PHONE SYSTEM UPGRADE

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, GENERAL OPERATING EXPENSE SUPPORT WHILE CLOSED DUE TO COVID-19, UNRESTRICTED

Part IV | Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT:

FAMILY PARTNERSHIP OF FREDERICK COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: BRIGHT FUTURES 2019 & 2020 PROGRAMS,

STAFF DEVELOPMENT & TRAINING, CAPACITY BUILDING STRATEGIC PLANNING

NAME OF ORGANIZATION OR GOVERNMENT:

FREDERICK COMMUNITY COLLEGE FOUNDATION, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: STUDENT SUCCESS PROGRAM, ASSIST CURRENT STUDENTS WITH EMERGENCY SHELTER AND FOOD AID RELATED TO COVID-19 CRISIS, 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: THURMONT LIBRARY, BOOKS, CHILDREN'S PROGRAM, TRAINING , MATERIALS AND ACTIVITIES FOR THE MARYLAND ROOM, MAINTENANCE, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: FREDERICK COUNTY PUBLIC SCHOOLS (H) PURPOSE OF GRANT OR ASSISTANCE: WALKERSVILLE HS BASEBALL PROGRAM & UNRESTRICTED, MEDIA CENTER BOOKS FOR MONOCACY ELEMENTARY, URBANA HS EQUIPMENT FOR ATHLETES, GOV THOMAS JOHNSON HIGH SCHOOL ACADEMY OF THE ARTS DANCE STUDIO UPGRADES, PROGRAMS FOR STUDENTS WITH DYSLEXIA, BRUNSWICK HS PIANOS, STUDENT ENRICHMENT PROGRAMS, AGRICULTURE EDUCATION AND ACTIVITIES, ACADEMIC AND EXTRA-CURRICULAR PROGRAMS AND ACTIVITIES AT CATOCTIN HS, ELEMENTARY SCHOOL INSTRUMENTAL MUSIC LIBRARY, MUSIC

COUNTY MARYLAND, INC.

Part IV | Supplemental Information

EQUIPMENT, SUPPLIES & CERTIFICATION EXAMS FOR STUDENTS IN CULINARY ARTS

AT CTC

NAME OF ORGANIZATION OR GOVERNMENT: FREDERICK COUNTY, MD GOVERNMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: EQUIPMENT FOR CITIZENS CARE AND

MONTEVUE ASSISTED LIVING, MEAL TRAYS AND CART TO PROVIDE SAFE IN-ROOM

MEALS DUE TO COVID-19, CHILD ADVOCACY CENTER TRAINING COSTS FOR STAFF AND

OR MDT PARTNERS, MEDICAL EXPENSES AND HOUSING EXPENSES FOR THOSE IN NEED

NAME OF ORGANIZATION OR GOVERNMENT: FREDERICK HEALTH HOSPITAL, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: GOOD SAMARITAN, EMERGENCY SERVICES,

MEDICAL MANAGEMENT PROGRAM, HURWITZ BREAST CANCER FUND, PERINATAL MOOD &

ANXIETY DISORDERS SUPPORT & OUTREACH PROGRAM, MENTAL HEALTH TREATMENT TO

PREGNANT AND POSTPARTUM WOMEN OF FREDERICK COUNTY, CHRONIC CARE

MANAGEMENT PROGRAM, UNRESTRICTED

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, SUMMER CAMP ENRICHMENT EXPENSES, COVID-19

RELATED EXPENSES, KITCHEN SUPPLIES, FOOD DISTRIBUTION CENTER EXPENSES,

TRANSITIONAL HOUSING, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

FRIENDS FOR NEIGHBORHOOD PROGRESS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE FOOD DISTRIBUTION CAPACITY

FOR THE FOOD BANK DURING COVID-19 CRISIS, SCHOOL BASED HEALTH CENTER, AND

HEALTH CENTER EXPENSES

THE COMMUNITY FOUNDATION OF FREDERICK Schedule I (Form 990) COUNTY MARYLAND, INC. 52-1488711 Page 2 Part IV Supplemental Information
is and its Componential information
NAME OF ORGANIZATION OR GOVERNMENT: FRIENDS OF THE CHILD ADVOCACY CENTER
(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORTING FAMILIES AND CHILDREN
SERVED BY THE CHILD ADVOCACY CENTER STORAGE UNIT FOR COVID-19 EMERGENCY
RELIEF
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, VETERANS OF YOUTH
EMPOWERMENT PROJECT, UNRESTRICTED
NAME OF ORGANIZATION OR GOVERNMENT:
HABITAT FOR HUMANITY OF FREDERICK COUNTY
(H) PURPOSE OF GRANT OR ASSISTANCE: TOOLS, EQUIPMENT & SUPPLIES FOR A
BRUSH WITH KINDNESS PROGRAM, HOME REPAIRS FOR THOSE IN NEED, CAPACITY
BUILDING, UNRESTRICTED
NAME OF ORGANIZATION OR GOVERNMENT: HEARTLY HOUSE, INC.
(H) PURPOSE OF GRANT OR ASSISTANCE: RENTAL ASSISTANCE, COMMUNITY
OUTREACH CAMPAIGN, NEW PHONE SYSTEM, SURVIVOR BASIC NEEDS, EXAM
ACCOMPANIMENT AND ADVOCACY SERVICES FOR VICTIMS OF DOMESTIC VIOLENCE &
SEXUAL ASSAULT, 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

932291 04-01-19

COUNTY MARYLAND, INC.

Part IV | Supplemental Information

RESEARCH AND PROGRAMS THAT COVER HISTORIC TOPICS, UNRESTRICTED

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:

HOUSING AUTHORITY OF THE CITY OF FREDERICK

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

NAME OF ORGANIZATION OR GOVERNMENT: I BELIEVE IN ME, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: MENTORING HOTLINE & FOOD INSECURITY ASSISTANCE FOR UNDERPRIVILEGED YOUTH, FOOD FOR DISTRIBUTIONS DURING COVID-19, UNRESTRICTED

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

(H) PURPOSE OF GRANT OR ASSISTANCE: RENTAL SUPPORT, PROGRAMS TO ASSIST LOW & MODERATE INCOME FREDERICK COUNTY RESIDENTS WITH HOUSING, TECHNOLOGY CAPACITY BUILDING, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

LITERACY COUNCIL OF FREDERICK COUNTY, INC.

COUNTY MARYLAND, INC.

Part IV | Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: MATERIALS FOR WOMEN'S LITERACY PROGRAMS, SMALL BUSINESS WORKPLACE LITERACY CLASS EXPENSES, ENGLISH CLASSES FOR LOW-WAGE WOMEN IN HOSPITALITY & HEALTH ASSISTANCE INDUSTRIES, AL IN ONE COMPUTERS FOR VOLUNTEER WORKSPACE, VOLUNTEER ENGAGEMENT CAPACITY BUILDING, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: MARYLAND FOOD BANK

(H) PURPOSE OF GRANT OR ASSISTANCE: SENIOR PANTRY PROGRAM EXPENSES AND EMERGENCY FOOD ASSISTANCE TO LOW-INCOME, FOOD INSECURE RESIDENTS OF FREDERICK COUNTY DURING COVID-19 CRISIS

NAME OF ORGANIZATION OR GOVERNMENT:

MENTAL HEALTH ASSOCIATION OF FREDERICK COUNTY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: PARENT COACHING EXPENSES, HEALTHY FAMILIES PROGRAM, MHA'S RESPONSE TO COVID-10 TO ENSURE CONTINUITY OF SERVICES FOR THE COMMUNITY, 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 /CONTROLLED SUBSTANCE USE SAFETY AND PATIENT EDUCATION, HOSPITAL SHARED PATIENT PARTNERSHIP, UNRESTRICTED

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, PRESCRIPTION EXPENSE, HOMELESS SHELTER, SHELTER BEDS, EXTRAORDINARY NEEDS RELATED TO COVID-19, AND UNRESTRICTED

Part IV | Supplemental Information

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, PATHWAY OF HOPE PROGRAM,

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, YOUTH APPRENTICESHIP PROGRAM,

PROGRAM CAR PLACEMENT & VEHICLE REPAIRS PROJECT EXPENSES, AND EXPENSES

DURING COVID-19 RELATED CLOSURES

NAME OF ORGANIZATION OR GOVERNMENT: SETON CENTER, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: DEPAUL DENTAL PROGRAM AND DENTAL

SERVICES, UTILITY, FOOD AND OTHER EMERGENCY FINANCIAL NEEDS OF RESIDENTS

IN NORTHERN FREDERICK COUNTY

NAME OF ORGANIZATION OR GOVERNMENT: SHIP OF FREDERICK COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: NEW HORIZONS FREDERICK SUMMER

PROGRAM EXPENSES AND ACADEMY LIFE SKILLS CURRICULUM, EMERGENCY SHELTER

PROGRAM FOR HOMELESS FAMILIES, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

SOCIETY OF ST. VINCENT DE PAUL, ST. JOHN'S CONFERENCE INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RENT, UTILITY, FOOD AND OTHER

EMERGENCY FINANCIAL NEEDS OF RESIDENTS OF FREDERICK COUNTY, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

Part IV | Supplemental Information

SPANISH SPEAKING COMMUNITY OF MD, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: CASE MGR, TRANSPORTATION, CRITICAL SERVICES PARTNERSHIP WITH FREDERICK COUNTY PUBLIC SCHOOLS PROGRAM, EMPLOYMENT ASSISTANCE FOR LOW-INCOME RESIDENTS, TO SUSTAIN ESSENTIAL PROGRAMS DURING COVID019 CRISIS, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: THE CLAGGETT CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: A NON-CONGREGATE QUARANTINE & ISOLATION SHELTER FOR COUNTY FIRST RESPONDERS AND HEALTHCARE WORKERS DURING COVID-19 CRISIS

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

(H) PURPOSE OF GRANT OR ASSISTANCE: YOUTH PROGRAMS, MENTAL HEALTH NEEDS OF THE LGBTQ+ COMMUNITY DURING COVID-19 CRISIS, MENTAL/SOCIAL SUPPORT FOR RESIDENTS LIVING WITH HIV

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 (H) PURPOSE OF GRANT OR ASSISTANCE: HOLISTIC THERAPIES FOR MEN IN RECOVERY, MUSIC THERAPY EXPENSES, TRAUMA INFORMED YOGA TO FEMALE PATIENTS, SERVICES TO INDIVIDUALS WITH SUBSTANCE ABUSE DISORDERS AND UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: YMCA OF FREDERICK COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: CONVERT CAMP WEST MAR AS AN

SCHEDULE J (Form 990)

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.

THE COMMUNITY FOUNDATION OF FREDERICK

Open to Public

OMB No. 1545-0047

Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number COUNTY MARYLAND, INC. 52-1488711 **Questions Regarding Compensation**

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			1.5
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	s. Sassa		
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence	2854		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)	1.0		Ý.
ь	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or		97 J.	
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	23. 5 F .	Mirwin
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		建设	
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	and to be a suit.	of Wild Parent
			10 y.	14.5
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's	in .		
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			5
	establish compensation of the CEO/Executive Director, but explain in Part III.			N. Salaharan
	X Compensation committee			
	Independent compensation consultant X Compensation survey or study		等 (4)	
	Form 990 of other organizations X Approval by the board or compensation committee			色主題
	The second of section of garagettons			
4	During the year, dld any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing	11.30 05.90% 4		144
•	organization or a related organization:	****		
	Receive a severance payment or change-of-control payment?	4a	akaliain i	X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
٠	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part I!I.	<u> </u>		
	Tes to any or lines 420, list the persons and provide the applicable amounts for each from intraction	1000		Ç.
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			No. Con.
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	. W		
•	contingent on the revenues of:			No.
а	The organization?	5a	ati a se	X
	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.	14	. 15 / 15	
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		1001	
_	contingent on the net earnings of:			T. C.
а	The organization?	6a	- CLIMBONES -	X
	Any related organization?	6b		Х
	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	7	and the state of t	Х
8	the state of the s	25 4 7 36 7		r.
٠.	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	1.024	X
9		<u> </u>		· · ·
J	it "Yee" on line X, did the ordanization also tollow the reputitable presumption procedure described in			
	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53,4958-6(c)?	9		

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

52-1488711

Schedule J (Form 990) 2019 COUNTY MARYLAND, INC.

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

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

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

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	ple	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(0-(D)	in column (B) reported as deferred on prior Form 990
(1) ELIZABETH Y. DAY	€	163,486.	5,000.	0.	7,270.	13,271.	189,027.	0
PRESIDENT & CEO) (E		0	0		0	0	0
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COUNTY MARYLAND, INC.

Schedule J (Form 990) 2019

52-1488711

Page 3

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. Part III Supplemental Information

SCHEDULE M (Form 990)

Noncash Contributions

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990. ► Go to www.lrs.gov/Form990 for instructions and the latest information. Open to Public Inspection

Name of the organization

THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC.

Employer identification number 52-1488711

Pai	TUPES OF Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contrib	etermin		:s
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	Х	22	839,978	FAIR MARKET	' VA	LUE	
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
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 organia							
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement 29				
							Yes	No
30a	During the year, did the organization receive by	y contributio	on any property reg	oorted in Part I, lines 1 throu	igh 28, that it			
	must hold for at least three years from the date					100 h	<u></u>	l
	exempt purposes for the entire holding period	?	•••••			30a		X
b								ANDERS
31	Does the organization have a gift acceptance p					31	X	<u> </u>
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash	1			1
	contributions?				***************************************	32a	X	<u> </u>
þ	If "Yes," describe in Part II.					5	\$4.5 \$4.5	
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of propert	y for which column (a) is ch	ecked,			
	describe in Part II.						學學	PART OF

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

Schedule M	1 (For	<u>m 990</u>	0) 2019			ARYLAND		NC.						1-1488/11	Page 2
Part II	Su	pple	menta	l Informa	tion.	Provide the in	forma	tion re	quired by Part I,	lines 30	b, 32b, an	d 33,	and.	whether the organiza on of both. Also com	ation
	is re	porti	ng in Par for ony a	t I, column (dditional info	b), the	number of co	ntribut	tions, 1	the number of ite	ems rece	eived, or a	comb	inati	on of both. Also com	plete
	ជាទេ	part	ior arry a	uditional init	Jimau	JII.									
SCHEDU	JLE	М,	LIN	E 32B:											
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

THE COMMUNITY FOUNDATION OF FREDERICK

OMB No. 1545-0047 Open to Public Inspection

Employer identification number

52-1488711 COUNTY MARYLAND, INC. FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: SCHOLARSHIPS. IN FY2020, GRANTS TOTALING \$5,615,648 BENEFITED 276 NONPROFITS SERVING THE COMMUNITY, SUPPORTING THEIR CRITICAL PROGRAMS AND PROVIDING SERVICES TO THOUSANDS OF RESIDENTS. SCHOLARSHIPS FOR POST-SECONDARY STUDY (INCLUDING VOCATIONAL TRAINING) TOTALING \$2,006,958 WERE AWARDED TO 359 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: ANY AREA OF STUDY, SOME DO NOT CONSIDER FINANCIAL NEED AS CRITERIA, AND

SOME ARE RENEWABLE 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

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

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

Employer identification number 52-1488711

APPROVAL PRIOR TO FILING.

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. 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 1,075,860. CHANGE IN CASH SURRENDER VALUE OF LIFE INSURANCE 13,602. -424,853. FUNDS HELD FOR OTHERS TOTAL TO FORM 990, PART XI, LINE 9 664,609.

Name of the organization	THE COMMUN COUNTY MAF			FREDERICE	ζ	Employer identification number 52-1488711
PART XII, LIN	E 2C					
THE PROCESS RE	EGARDING TH	IE PREPARA	TION OF	THE AUDITE	ED FINA	NCIAL
STATEMENTS IS	UNCHANGED	FROM THE	PRIOR YE	AR.		
Print on Additional Control of Co						
						
Proceed to the contract of the						

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SCHEDULE R

(Form 990)

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

▶ Attach to Form 990.

2019

OMB No. 1545-0047

Employer identification number 52-1488711 Open to Public Inspection

> THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC. Name of the organization Department of the Treasury Internal Revenue Service

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

Part

Direct controlling entity Ξ End-of-year assets e Total income <u>5</u> Legal domicile (state or foreign country) Primary activity <u>a</u> Name, address, and EIN (if applicable) of disregarded entity

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

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

SEE PART VII FOR CONTINUATIONS

932161 09-10-19 LHA

Schedule R (Form 990) 2019 COUNTY MARYLAND, INC.

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

Page 2

52-1488711

Schedule R (Form 990) 2019 Percentage ownership Yes No (i) Section 512(b)(13) controlled entity? Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. Ξ General or managing partner? Percentage ownership Yes No 9 Ξ Code V-UBI amount in box n 20 of Schedule K-1 (Form 1065) Share of end-of-year assets Ξ 6 Disproportionate Yes No allocations? Ξ Share of total income Share of end-of-year assets <u>6</u> Type of entity (C corp, S corp, or trust) ø Share of total income Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) ਉ ◉ Legal domicile (state or foreign country) <u>ত</u> (d)
Direct controlling entity Primary activity (c)
Legal
domicile
(state or
foreign Primary activity <u>@</u> Name, address, and EIN of related organization Name, address, and EIN of related organization 932162 09-10-19 Part IV

THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC. Schedule R (Form 990) 2019

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Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes	s No	<u>0</u>
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?	s with one or more re	ated organizations listed	in Parts II-IV?	X°		.]
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a	×	ایج
b Gift, grant, or capital contribution to related organization(s)				qp q	X	_M
်(၇				<u>ئ</u>	×	bd.
d Loans or loan guarantees to or for related organization(s)				먇	×	M
				1e	×	M
						100
f Dividends from related organization(s)				* +		्र े Ы
Sale of assets to related organization(s)				Þ	×	 <u> </u>
				두	×	_M
				F	×	
i Localidade di assets with related Organization(s)				= =	i ×	
Lease of facilities, equipment, or other assets to related organization(s)				7	i	[
k Lease of facilities equipment or other assets from related organization(s)				¥	×	ы
	nization(s)			F	×	 _{!>4}
m Performance of services or membership or fundasising sometations by related organization(s)	nization(s)			Ę.	×	M
Observe of facilities a continued of the little continued of the control of the continued o	mcadon (9)			÷	+	ĺ
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Contract of (A) contract to the set of the s				\$ \$	×	· ×
				×	╁	
q heiribürsenlen pald by related biga lization(s) for expenses				10 G	(36.4)	
Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s)				1r 1s	4 ⋈	ہا₄
Л					ł	l
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.	ho must complete th	is line, including covered	relationships and transaction thresholds.			1
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	rolved		
THE COMMUNITY FOUNDATION HOLDING COMPANY (1) INC.	a	69,011.	.CASH AMOUNT			
(2)						1
(2)						
(4)						
(5)				;		
			-			
932163 09-10-19	74		Schedule R (Form 990) 2019	R (Form 9	90) 201	019

52-1488711

COUNTY MARYLAND, INC.

Schedule R (Form 990) 2019

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

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

I	a -	ı	ı		ı		1					ı		ı		ı	•		ı			l e	5 1
(K)	amount in box 20 managing ownership				Ì																		Schedule K (Form 990) 2019
	Per S M						 _						 					 	\bot			1	ಕ ೯
(1)	eneral o anaging rartner?	Yes No					\dashv			 				_					-			- !	- - -
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	Code	(Forn																				ľ	"
_	Dispropor- tionate ar allocations?	N								 					 					 		1	
(H)	Dispre tion allocat	Yes No			_											 						4	
	ਦ ਲੋ																						
(B)	Share of end-of-year	assets																					
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	501(c)(3) 0008.7	Yes No		 		 					 							 				4	
	Predominant income pa (related, unrelated, excluded from tax under	514)																					
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	Legal domicile (state or foreign	′/										;										١	
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THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC.

	2-1488711 Page 5
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	FOIINDATION OF
PRIMARI ACTIVITI: PROVIDE PINANCIAL BUPFORT TO THE COMMONTH	CONDATION OF
FREDERICK COUNTY MD	
	• 11 11
<u> </u>	

8621 Information Return by a Shareholder of a Passive Foreign OMB No. 1545-1002

(Rev. De Departn	ecemb nent o	er 2018) - Investment Company or Qualiff		Attachment Sequence No. 69
Internal	Rever	nue Service Go to www.irs.gov/Form8621 for instructions ar		Sequence No. 03
		areholder OMMUNITY FOUNDATION OF FREDERICK	Identifying number (see instructions)	
			52-1488711	
		Y MARYLAND, INC.		
312	E	reet, and room or suite no. If a P.O. box, see instructions. AST CHURCH STREET		ther tax year beginning TUN 30, 2020
		n, state, and ZIP code or country RICK, MD 21701		
Check	type	of shareholder filing the return: Individual X Corporation Partnersh	ip S Corporation Nongranto	r Trust Estate
		y Excepted Specified Foreign Financial Assets are reported on this form. See instructions		<u></u>
		nsurance Corporation Election-I, a shareholder of stock of a foreign corporation, elect to tr		
Insura	nce C	Corporation under the alternative facts and circumstances test within the meaning of section	n 1297(f)(2). See Instructions	L
		gn corporation, passive foreign investment company (PFIC), or qualified electing fund (QEF) LINE OFFSHORE RECOVERY FUND II, LP	Employer identification number (if any)	
Addres	es (Er	nter number, street, city or town, and country.)	Reference ID number (see instructions) 01	
201	M	AIN STREET, SUITE 1900	Tax year of foreign corporation, PFIC, or Q	EF; Calendar vear
		WORTH, CAYMAN ISLANDS 76102	or other tax year beginning JAN 3	
Pai	rt i	Summary of Annual Information (see instructions)	and officing	,
		following information with respect to all shares of the PFIC held by the shareholder:		
		ription of each class of shares held by the shareholder:		
,		Check if shares jointly owned with spouse.		· · · · · · · · · · · · · · · · · · ·
2	Date	shares acquired during the tax year, if applicable;		
3	Num	ber of shares held at the end of the tax year:	· · · · · · · · · · · · · · · · · · ·	
4	Valu	e of shares held at the end of the tax year (check the appropriate box, if applicable):		
4		\$0.513165 Held at the ellit of the tax year (check the appropriate box, if approache).	(d) \$150,001-200,000	
	٠,	If more than \$200,000, list value;	(a) Ψ130,001~200,000	
	(6)	ii iijote tilali \$200,000, iist value.		
5	Tyne	of PFIC and amount of any excess distribution or gain treated as an excess distribution u	nder section 1291, inclusion under section :	1293
		inclusion or deduction under section 1296 (check all boxes that apply);	non soundi 125 i, molasion ariasi seculori	
	(a)	Section 1291 \$		
	(b)	Section 1293 (Qualified Electing Fund) \$		
	(C)	Section 1296 (Mark to Market) \$		
. Da	rt II			
A	1,20,11	Election To Treat the PFIC as a QEF, I, a shareholder of a PFIC, elect to treat the PFIC as	a DEF. Complete lines 6a through 7c of	Part III
В		Election To Extend Time For Payment of Tax. I, a shareholder of a QEF, elect to extend to the QEF until this election is terminated. Complete lines 8a through 9c of Part III to Note: If any portion of line 6a or line 7a of Part III is includible under section 951, you man 1294(c) and 1294(f) and the related regulations for events that terminate this election.	he time for payment of tax on the undistribu o calculate the tax that may be deferred	ted earnings and profits
c [Election To Mark-to-Market PFIC Stock. I, a shareholder of a PFIC, elect to mark-to-mar 1296(e). Complete Part IV.	ket the PFIC stock that is marketable within	the meaning of section
ם		Deemed Sale Election. I, a shareholder on the first day of a PFIC's first tax year as a QEF PFIC. Enter gain or loss on line 15f of Part V.	F, elect to recognize gain on the deemed sale	of my interest in the
E		Deemed Dividend Election. I, a shareholder on the first day of a PFIC's first tax year as a amount equal to my share of the post-1986 earnings and profits of the CFC as an excess excess distribution is greater than zero, also complete line 16 of Part V.		
F		Election To Recognize Gain on Deemed Sale of PFIC. I, a shareholder of a former PFIC distribution the gain recognized on the deemed sale of my interest in the PFIC on the last gain on line 15f of Part V.		
G [Deemed Dividend Election With Respect to a Section 1297(e) PFIC. I, a shareholder of 1.1297-3(a), elect to make a deemed dividend election with respect to the Section 1297(e) PFIC includes the CFC qualification date, as defined in Regulations section 1.1297-3(d). Edistribution is greater than zero, also complete line 16, Part V.	e) PFIC. My holding period in the stock of the Enter the excess distribution on line 156	e Section 1297(e) e, Part V. If the excess
Η		Deemed Dividend Election With Respect to a Former PFIC. I, a shareholder of a former elect to make a deemed dividend election with respect to the former PFIC. My holding per defined in Regulations section 1.1298-3(d). Enter the excess distribution on line 156	riod in the stock of the former PFIC includes	the termination date, as

Page	2
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Pa	art III Income From a Qualified Electing Fund (QEF). All QEF shareholders complete lines 6a through Election B, also complete lines 8a through 9c. See instructions.	jh 7c. If you are making	
6.8	Enter your pro rata share of the ordinary earnings of the QEF	SHALL SHALL	
b			
	excluded under section 1293(g) 6b		
C		6c	
7 a	and the second s		
	Enter the portion of line 7a that is included in income under section 951 or that may be		
-	excluded under section 1293(g) 7b		
C	Subtract line 7b from line 7a. This amount is a net long-term capital gain. Enter this amount in Part II of the Schedule D		
	used for your income tax return. See instructions	. 7c	
	Complete lines 8 and 9 only if you are making a section 1294 election (Election B) for the current tax year.		
8 a	Add lines 6c and 7c	8a	
b	Enter the total amount of cash and the fair market value of other property distributed	C (A)	
	or deemed distributed to you during the tax year of the QEF. See instructions		
C	Enter the portion of line 8a not already included in line 8b that is attributable to shares		
	in the QEF that you disposed of, pledged, or otherwise transferred during the tax year 8c		
d	Add lines 8b and 8c	. 8d	
е	Subtract line 8d from line 8a, and enter the difference (if zero or less, enter amount in brackets)	8e	
	Important: If line 8e is greater than zero, and no portion of line 6a or 7a is includible in income under section 95		
	you may make Election B with respect to the amount on line 8e.		
9 a	Enter the total tax for the tax year. See instructions 9a		
b	Enter the total tax for the tax year determined without regard to the amount entered	100.7	
	on line 8e 9b		
C	Subtract line 9b from line 9a. This is the deferred tax, the time for payment of which is extended by making		
	Election B	. 9c	
	art IV Gain or (Loss) From Mark-to-Market Election (see instructions)	1.0	
	Enter the fair market value of your PFiC stock at the end of the tax year		
	Enter your adjusted basis in the stock at the end of the tax year	10b	
C	Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amount as ordinary income	10-	
	on your tax return. If a loss, go to line 11		
	Enter any unreversed inclusions (as defined in section 1296(d))	11	
12	Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Include this amount as an ordinary	12	
10	loss on your tax return If you sold or otherwise disposed of any section 1296 stock (see instructions) during the tax year:	16	
10			
	·	132	
а	Enter the fair market value of the stock on the date of sale or disposition		
a b	Enter the fair market value of the stock on the date of sale or disposition Enter the adjusted basis of the stock on the date of sale or disposition		
a b	Enter the fair market value of the stock on the date of sale or disposition Enter the adjusted basis of the stock on the date of sale or disposition Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as ordinary income on your	13b	
a b c	Enter the fair market value of the stock on the date of sale or disposition Enter the adjusted basis of the stock on the date of sale or disposition Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as ordinary income on your tax return. If a loss, go to line 14	13b	
a b c 14a	Enter the fair market value of the stock on the date of sale or disposition Enter the adjusted basis of the stock on the date of sale or disposition Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as ordinary income on your tax return. If a loss, go to line 14 Enter any unreversed inclusions (as defined in section 1296(d))	13b	
a b c 14a	Enter the fair market value of the stock on the date of sale or disposition Enter the adjusted basis of the stock on the date of sale or disposition Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as ordinary income on your tax return. If a loss, go to line 14 Enter any unreversed inclusions (as defined in section 1296(d)) Enter the loss from line 13c, but only to the extent of unreversed inclusions on line 14a. Include this amount as an ordinary	13b 13c 14a	
a b c 14a b	Enter the fair market value of the stock on the date of sale or disposition Enter the adjusted basis of the stock on the date of sale or disposition Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as ordinary income on your tax return. If a loss, go to line 14 Enter any unreversed inclusions (as defined in section 1296(d)) Enter the loss from line 13c, but only to the extent of unreversed inclusions on line 14a. Include this amount as an ordinary loss on your tax return. If the loss on line 13c exceeds unreversed inclusions on line 14a, complete line 14c	13b 13c 14a	
a b c 14a b	Enter the fair market value of the stock on the date of sale or disposition Enter the adjusted basis of the stock on the date of sale or disposition Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as ordinary income on your tax return. If a loss, go to line 14 Enter any unreversed inclusions (as defined in section 1296(d)) Enter the loss from line 13c, but only to the extent of unreversed inclusions on line 14a. Include this amount as an ordinary	13b 13c 14a 14b	

Part V Distributions From and Dispositions of Stock of a Section 1291 Fund (see instr	uctic	ns)
Complete a separate Part V for each excess distribution and disposition. See instructions.		
15 a Enter your total distributions from the section 1291 fund during the current tax year with respect to the applicable stock. If the		
holding period of the stock began in the current tax year, see instructions	15a	
b Enter the total distributions (reduced by the portions of such distributions that were excess distributions but not		
included in income under section 1291(a)(1)(B)) made by the fund with respect to the applicable stock for each of the 3 years		
preceding the current tax year (or if shorter, the portion of the shareholder's holding period before the current tax year)	15b	
c Divide line 15b by 3.0. (See instructions if the number of preceding tax years is less than 3.)	15c	
d Multiply line 15c by 125% (1.25)	15d	·
e Subtract line 15d from line 15a. This amount, if more than zero, is the excess distribution with respect to the applicable stock.		
If there is an excess distribution, complete line 16. If zero or less and you did not dispose of stock during the tax year, do not		
complete the rest of Part V. See instructions if you received more than one distribution during the current tax year. Also,		
see instructions for rules for reporting a nonexcess distribution on your income tax return	15e	
f Enter gain or loss from the disposition of stock of a section 1291 fund or former section 1291 fund. If a gain,		
complete line 16. If a loss, show it in brackets and do not complete line 16	15f	
16 a If there is a positive amount on line 15e or 15f (or both), attach a statement for each excess distribution and disposition.	YES	
Show your holding period for each share of stock or block of shares held. Allocate the excess distribution or gain to each day	-9 - A. 	
in your holding period. Add all amounts that are allocated to days in each tax year.		
b Enter the total of the amounts determined in line 16a that are allocable to the current tax year and tax years		
before the foreign corporation became a PFIC (pre-PFIC years). Enter these amounts on your income tax	Na di	
return as other income	16b	
c Enter the aggregate increases in tax (before credits) for each tax year in your holding period		
(other than the current tax year and pre-PFIC years). See instructions	16c	
d Foreign tax credit (see instructions)	16d	
e Subtract line 16d from line 16c. Enter this amount on your income tax return as "additional tax." See instructions	16e	
f Determine interest on each net increase in tax determined on line 16e using the rates and methods of section 6621.		
Enter the aggregate amount of interest here. See instructions	16f	

Status of Prior Year Section 1294 Elections and Termination of Section 1294 Elections Part VI Complete a separate column for each outstanding election. Complete lines 17 through 20 to report the status of outstanding prior year section 1294 elections. (i) (ii) (iii) (iv) (v) (vi) 17 Tax year of outstanding election 18 Undistributed earnings to which the election relates 19 Deferred tax 20 Interest accrued on deferred tax (line 19) as of the filing Complete lines 21 through 24 only if a section 1294 election is terminated in the current year. 21 Event terminating election 22 Earnings distributed or deemed distributed during the tax year 23 Deferred tax due with this return 24 Accrued interest due with this return Complete lines 25 and 26 only if there is a partial termination of a section 1294 election in the current tax year. 25 Deferred tax outstanding after partial termination of election, Subtract line 23 from line 19 26 Interest accrued after partial termination of election. Subtract line 24 from line 20

Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund

Internal Rev	enue Service Go to www.irs.gov/Form8621 for instructions a	nd the latest information.	Sequence No. 69
Name of s	hareholder	Identifying number (see instructions)	
	COMMUNITY FOUNDATION OF FREDERICK TY MARYLAND, INC.	52-1488711	
Number, s	treet, and room or suite no. If a P.O. box, see instructions.		r tax year beginning
312 I	EAST CHURCH STREET	JUL 1 , 2019 and ending JU	N 30, 2020
	n, state, and ZIP code or country ERICK, MD 21701		
٠.	e of shareholder filing the return; Individual X Corporation Partnersh 1y Excepted Specified Foreign Financial Assets are reported on this form. See instructions		
	Insurance Corporation Election-I, a shareholder of stock of a foreign corporation, elect to t		
	Corporation under the alternative facts and circumstances test within the meaning of section		
	sign corporation, passive foreign investment company (PFIC), or qualified electing fund (QEF) STON PRIVATE EQUITY OPPORTUNITIES IV L.P.	Employer identification number (if any)	
Address (8	nter number, street, city or town, and country.)	Reference ID number (see instructions) 0 2	
	BOYLSTON STREET DN, CAYMAN ISLANDS 02199	Tax year of foreign corporation, PFIC, or QEF: or other tax year beginning JAN 1 and ending DEC 3	Calendar year 2019, 1, 2019.
Part I	Summary of Annual Information (see instructions)		
	e following information with respect to all shares of the PFIC held by the shareholder:		
1 Des	cription of each class of shares held by the shareholder: Check if shares jointly owned with spouse.	· ·	
2 Dat	Check it shares jointly owned with spouse. e shares acquired during the tax year, if applicable;		
7 -0.	o on a coupling of the cost your it approaches		
3 Nur	nber of shares held at the end of the tax year:		
(a)	ue of shares held at the end of the tax year (check the appropriate box, if applicable): \$0-50,000 (b) \$50,001-100,000 (c) \$100,001-150,000 If more than \$200,000, list value:	(d) \$150,001-200,000	
	e of PFIC and amount of any excess distribution or gain treated as an excess distribution under section 1296 (check all boxes that apply): Section 1291 \$ Section 1293 (Qualified Electing Fund) \$ Section 1296 (Mark to Market) \$	nder section 1291, inclusion under section 1293	3,
Part I			
Α	Election To Treat the PFIC as a QEF. I, a shareholder of a PFIC, elect to treat the PFIC as	a QEF. Complete lines 6a through 7c of Pa	art III.
ВШ	Election To Extend Time For Payment of Tax. I, a shareholder of a QEF, elect to extend of the QEF until this election is terminated. Complete lines 8a through 9c of Part III i Note: If any portion of line 6a or line 7a of Part III is includible under section 951, you may 1294(c) and 1294(f) and the related regulations for events that terminate this election.	the time for payment of tax on the undistributed to calculate the tax that may be deferred. ay not make this election. Also, see sections	earnings and profits
С	Election To Mark-to-Market PFIC Stock. I, a shareholder of a PFIC, elect to mark-to-mar 1296(e). Complete Part IV.	ket the PFIC stock that is marketable within the	meaning of section
D	Deemed Sale Election. I, a shareholder on the first day of a PFIC's first tax year as a QE PFIC. Enter gain or loss on line 15f of Part V.	F, elect to recognize gain on the deemed sale of	my interest in the
E	Deemed Dividend Election. I, a shareholder on the first day of a PFIC's first tax year as amount equal to my share of the post-1986 earnings and profits of the CFC as an excess excess distribution is greater than zero, also complete line 16 of Part V.		
F 🖂	Election To Recognize Gain on Deemed Sale of PFIC. I, a shareholder of a former PFIC distribution the gain recognized on the deemed sale of my interest in the PFIC on the last gain on line 15f of Part V.		
G \square	Deemed Dividend Election With Respect to a Section 1297(e) PFIC. I, a shareholder of 1.1297-3(a), elect to make a deemed dividend election with respect to the Section 1297(e) PFIC includes the CFC qualification date, as defined in Regulations section 1.1297-3(d), distribution is greater than zero, also complete line 16, Part V.	e) PFIC. My holding period in the stock of the Se	ection 1297(e)
H 🗀	Deemed Dividend Election With Respect to a Former PFIC. I, a shareholder of a former elect to make a deemed dividend election with respect to the former PFIC. My holding pedefined in Regulations section 1.1298-3(d). Enter the excess distribution on line 15 complete line 16, Part V.	riod in the stock of the former PFIC includes the	e termination date, as

Form	8621	(Rev.	12-2	2018)
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P	Part III Income From a Qualified Electing Fund (QEF). All QEF shareholders complete lines 6a through 7c. If you are making Election B, also complete lines 8a through 9c. See instructions.				
	a Enter your pro rata share of the ordinary earnings of the QEF 6a	E-030.1.			
	Enter your profess state of the ordinary earnings of the QEP				
	1 1	12.0			
	107	\dashv , \mid			
	Subtract line 6b from line 6a. Enter this amount on your tax return as ordinary income Enter your pro rata share of the total net capital gain of the QEF 7a	6c			
	Enter the portion of line 7a that is included in income under section 951 or that may be				
L		14.162			
	excluded under section 1293(g)				
٠	used for your income tax return. See instructions	. 7c			
	Complete lines 8 and 9 only if you are making a section 1294 election (Election B) for the current tax year.	/ 6			
g a	Add lines 6c and 7c	8a			
b	1 1	00			
	or deemed distributed to you during the tax year of the QEF. See instructions 8b		•		
c					
٠	in the QEF that you disposed of, pledged, or otherwise transferred during the tax year 80				
d	Add lines 8b and 8c	8d			
e	Subtract line 8d from line 8a, and enter the difference (if zero or less, enter amount in brackets)		* * *		
_	Important: If line 8e is greater than zero, and no portion of line 6a or 7a is includible in income under section 95	-			
	you may make Election B with respect to the amount on line 8e.	54976			
9 a	Enter the total tax for the tax year. See instructions 9a				
	Enter the total tax for the tax year determined without regard to the amount entered				
	on line 8e 9b				
C	Subtract line 9b from line 9a. This is the deferred tax, the time for payment of which is extended by making				
	Election B	90			
P	art IV Gain or (Loss) From Mark-to-Market Election (see instructions)				
10a	Enter the fair market value of your PFIC stock at the end of the tax year	. 10a			
b	Enter your adjusted basis in the stock at the end of the tax year	. 10b			
	Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amount as ordinary income				
	on your tax return. If a loss, go to line 11				
11	Enter any unreversed inclusions (as defined in section 1296(d))	11			
	Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Include this amount as an ordinary				
	loss on your tax return	. 12			
	If you sold or otherwise disposed of any section 1296 stock (see Instructions) during the tax year:				
	Enter the fair market value of the stock on the date of sale or disposition				
	Enter the adjusted basis of the stock on the date of sale or disposition	13b			
C	Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as ordinary income on your				
	tax return. If a loss, go to line 14				
	Enter any unreversed inclusions (as defined in section 1296(d))	14a			
b	Enter the loss from line 13c, but only to the extent of unreversed inclusions on line 14a. Include this amount as an ordinary				
	loss on your tax return. If the loss on line 13c exceeds unreversed inclusions on line 14a, complete line 14c	14b			
C	Enter the amount by which the loss on line 13c exceeds unreversed inclusions on line 14a, Include this amount on your tax				
	return according to the rules generally applicable for losses provided elsewhere in the Code and regulations	. 140			
	Note: See instructions in case of multiple sales or dispositions.				

Part V Distributions From and Dispositions of Stock of a Section 1291 Fund(see inst	ructio	ons)
Complete a separate Part V for each excess distribution and disposition. See instructions.		
15 a Enter your total distributions from the section 1291 fund during the current tax year with respect to the applicable stock. If the		
holding period of the stock began in the current tax year, see instructions	15a	
b Enter the total distributions (reduced by the portions of such distributions that were excess distributions but not		
included in income under section 1291(a)(1)(B)) made by the fund with respect to the applicable stock for each of the 3 years		
preceding the current tax year (or if shorter, the portion of the shareholder's holding period before the current tax year)	15b	
c Divide line 15b by 3.0. (See instructions if the number of preceding tax years is less than 3.)	15c	
d Multiply line 15c by 125% (1.25)	15d	
e Subtract line 15d from line 15a. This amount, if more than zero, is the excess distribution with respect to the applicable stock.		'
If there is an excess distribution, complete line 16. If zero or less and you did not dispose of stock during the tax year, do not		
complete the rest of Part V. See instructions if you received more than one distribution during the current tax year. Also,		
see instructions for rules for reporting a nonexcess distribution on your income tax return	15e	
f Enter gain or loss from the disposition of stock of a section 1291 fund or former section 1291 fund. If a gain,		
complete line 16. If a loss, show it in brackets and do not complete line 16	15f	
16 a If there is a positive amount on line 15e or 15f (or both), attach a statement for each excess distribution and disposition.	3 / 1 / 1 / Y	
Show your holding period for each share of stock or block of shares held. Allocate the excess distribution or gain to each day		
in your holding period. Add all amounts that are allocated to days in each tax year.		act of
b Enter the total of the amounts determined in line 16a that are allocable to the current tax year and tax years	is a pile of a	
before the foreign corporation became a PFIC (pre-PFIC years). Enter these amounts on your income tax		
return as other income	16b	
c Enter the aggregate increases in tax (before credits) for each tax year in your holding period		
(other than the current tax year and pre-PFIC years). See instructions	16c	
d Foreign tax credit (see instructions)	16d	
e Subtract line 16d from line 16c. Enter this amount on your income tax return as "additional tax." See instructions	16e	
f Determine interest on each net increase in tax determined on line 16e using the rates and methods of section 6621.		
Enter the aggregate amount of interest here. See instructions	16f	

	227 1.11 1.7 1.7 1.7		on 1294 Electio ach outstanding elec		ation of Section	1294 Elections	
	Complete lines 17 through 20 to report the status of outstanding prior year section 1294 elections.						
		(i)	(ii)	(ifi)	(iv)	(v)	(vi)
17	Tax year of outstanding election						
18	Undistributed earnings to which the election relates						
	Deferred tax Interest accrued on deferred tax (line 19) as of the filing date						
_	Complete lines 21 through				= 1		
	24 only if a section 1294 election is terminated in						
	the current year.				And that is training the constitution to be	MALON MINISTRA	
21	Event terminating election						
22	Earnings distributed or deemed distributed during the tax year						
23	Deferred tax due with this						
	return						
24	Accrued interest due with this return						
	Complete lines 25 and 26	7.0		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1450/1814 (15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	only if there is a partial						
	termination of a section 1294 election in the		line securities				
	current tax year.			· · · · · · · · · · · · · · · · · · ·			
25	Deferred tax outstanding	STOCK AND ADDRESS CONTROL OF THE STOCK AND ADDRESS CONTROL OF THE	VALUE AND STATEMENT OF THE STATE OF THE STAT		TO STATE OF THE PROPERTY OF TH	* aliai todobianinai. Abdidit 40 v. Mini atti 1900indi. Taki 120 - 125 124 1	1. G. of the sinch and all blocks over the since it is bounded
	after partial termination of						
	election. Subtract line 23 from line 19						
26	Interest accrued after partial						
	termination of election.						
	Subtract line 24 from line 20		1 .				

Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund

Internal Reven	bue Service ► Go to www.irs.gov/Form8621 for instructions ar	nd the latest information.	Sequence No. 69
Name of sha	areholder	Identifying number (see instructions)	
	OMMUNITY FOUNDATION OF FREDERICK Y MARYLAND, INC.	52-1488711	
Number, str	eet, and room or suite no. If a P.O. box, see instructions.	Shareholder tax year: calendar year or oth	er tax year beginning
312 E	AST CHURCH STREET		JN 30 2020 .
	, state, and ZIP code or country RICK, MD 21701		
Check type of	of shareholder filing the return: Individual X Corporation Partnershi	p S Corporation Nongrantor	Trust Estate
	Excepted Specified Foreign Financial Assets are reported on this form. See instructions		
	nsurance Corporation Election-i, a shareholder of stock of a foreign corporation, elect to tr orporation under the alternative facts and circumstances test within the meaning of sectio		
	on corporation, passive foreign investment company (PFIC), or qualified electing fund (QEF)	Employer identification number (if any)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	CAPITAL PARTNERS INTERNATIONAL 10 LP		
Address (En	iter number, street, city or town, and country.)	Reference ID number (see instructions) 0 3	
UGLANI	D HOUSE, P.O. BOX 309	Tax year of foreign corporation, PFIC, or QEF	: Calendar year
GRAND	CAYMAN, CAYMAN ISLANDS	or other tax year beginning JAN 1 and ending DEC 3	2019, 31,2019.
Part (Summary of Annual Information (see instructions)	and and and	,
	following information with respect to all shares of the PFIC held by the shareholder:		
1 Descr	ription of each class of shares held by the shareholder;		
0 Data	Check if shares jointly owned with spouse.		
2 Date	shares acquired during the tax year, if applicable:		
3 Numb	ber of shares held at the end of the tax year:		
4 Value	of shares held at the end of the tax year (check the appropriate box, if applicable):		
(a)		(d) \$150,001-200,000	
(e) l	f more than \$200,000, list value:		
F Time	of PFIC and amount of any excess distribution or gain treated as an excess distribution ur	oder coefien 1901, includion under caption 19	ດວ
	of PFIC and amount of any excess distribution of gain dealed as an excess distribution of no and another section 1296 (check all boxes that apply);	idei Section 1291, inclusion ander Section 12	au,
(a)	Section 1291 \$		
(b)	Section 1293 (Qualified Electing Fund) \$		
(c)	Section 1296 (Mark to Market) \$		
	Elections (see instructions)		
	Election To Treat the PFIC as a QEF. I, a shareholder of a PFIC, elect to treat the PFIC as		
	Election To Extend Time For Payment of Tax. I, a shareholder of a QEF, elect to extend to the QEF until this election is terminated. Complete lines 8a through 9c of Part III to Note: If any portion of line 6a or line 7a of Part III is includible under section 951, you ma 1294(c) and 1294(f) and the related regulations for events that terminate this election.	he time for payment of tax on the undistribute o calculate the tax that may be deferred. y not make this election. Also, see sections	d earnings and profits
	Election To Mark-to-Market PFIC Stock. I, a shareholder of a PFIC, elect to mark-to-mark 1296(e). Complete Part IV.	ket the PFIC stock that is marketable within the	e meaning of section
$D \square$	Deemed Sale Election. I, a shareholder on the first day of a PFIC's first tax year as a QEF PFIC. Enter gain or loss on line 15f of Part V.	, elect to recognize gain on the deemed sale o	f my interest in the
E	Deemed Dividend Election. I, a shareholder on the first day of a PFIC's first tax year as a		
	amount equal to my share of the post-1986 earnings and profits of the CFC as an excess excess distribution is greater than zero, also complete line 16 of Part V.		
	Election To Recognize Gain on Deemed Sale of PFIC. I, a shareholder of a former PFIC distribution the gain recognized on the deemed sale of my interest in the PFIC on the last <i>gain on line 15f of Part V.</i>	day of its last tax year as a PFIC under section	1297(a). <i>Enter</i>
	Deemed Dividend Election With Respect to a Section 1297(e) PFIC. I, a shareholder of 1.1297-3(a), elect to make a deemed dividend election with respect to the Section 1297(e) PFIC includes the CFC qualification date, as defined in Regulations section 1.1297-3(d). Edistribution is greater than zero, also complete line 16, Part V.	e) PFIC. My holding period in the stock of the :	Section 1297(e)
H 🗔	Deemed Dividend Election With Respect to a Former PFIC. I, a shareholder of a former elect to make a deemed dividend election with respect to the former PFIC. My holding per defined in Regulations section 1.1298-3(d). Enter the excess distribution on line 15e complete line 16, Part V.	riod in the stock of the former PFIC includes th	ne termination date, as

Pa	Int III Income From a Qualified Electing Fund (QEF). All QEF shat Election B, also complete lines 8a through 9c. See instructions.	ıreholder	s complete lines 6a through 7	c. If yo	ou are making
	Enter your pro rata share of the ordinary earnings of the QEF	6a		T	<u> </u>
		Ua		1	
b	· · · · · · · · · · · · · · · · · · ·	6b			
_	excluded under section 1293(g)				
	Subtract line 6b from line 6a. Enter this amount on your tax return as ordinary income			6c	
	Enter your pro rata share of the total net capital gain of the QEF	7a			
b	Enter the portion of line 7a that is included in income under section 951 or that may be	1 1			
	excluded under section 1293(g)			1	
C					
	used for your income tax return. See instructions			7c	
_	Complete lines 8 and 9 only if you are making a section 1294 election (Election B) for		-	ء ا	I
	Add lines 6c and 7c	i		8a	
þ	Enter the total amount of cash and the fair market value of other property distributed	1			
	or deemed distributed to you during the tax year of the QEF. See instructions	8b		20 1 1 10 1150	
C	Enter the portion of line 8a not already included in line 8b that is attributable to shares				
	in the QEF that you disposed of, pledged, or otherwise transferred during the tax year \dots				
d	Add lines 8b and 8c			8d	<u> </u>
6	Subtract line 8d from line 8a, and enter the difference (if zero or less, enter amount in brace)			8e	
	Important: If line 8e is greater than zero, and no portion of line 6a or 7a is includit	ole in ind	come under section 951,		
	you may make Election B with respect to the amount on line 8e.				
9 a	Enter the total tax for the tax year. See instructions	9a			
b	Enter the total tax for the tax year determined without regard to the amount entered				
	on line 8e				
C	Subtract line 9b from line 9a. This is the deferred tax, the time for payment of which is	extended	by making		
	Election B			9c	
Pa	art IV Gain or (Loss) From Mark-to-Market Election (see in	structi	ons)		
	Enter the fair market value of your PFIC stock at the end of the tax year			10a	
b	Enter your adjusted basis in the stock at the end of the tax year			10b	
	Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amo				
	on your tax return. If a loss, go to line 11		,.,	10c	
11	Enter any unreversed inclusions (as defined in section 1296(d))			11	
	Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Incl				
	loss on your tax return			12	
13	If you sold or otherwise disposed of any section 1296 stock (see instructions) during the	tax year	:		
a	Enter the fair market value of the stock on the date of sale or disposition			13a	
b	Enter the adjusted basis of the stock on the date of sale or disposition			13b	
C	Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as o	rdinary ir	ncome on your		
	tax return. If a loss, go to line 14			13c	
14a	Enter any unreversed inclusions (as defined in section 1296(d))			14a	
b	Enter the loss from line 13c, but only to the extent of unreversed inclusions on line 14a. Inc	lude this	amount as an ordinary		
	loss on your tax return. If the loss on line 13c exceeds unreversed inclusions on line 14a, c	omplete	line 14c	14b	
	Enter the amount by which the loss on line 13c exceeds unreversed inclusions on line 14a.				
	return according to the rules generally applicable for losses provided elsewhere in the Code	and reg	ulations	14c	
	Note: See instructions in case of multiple sales or dispositions.	-			

Part V Distributions From and Dispositions of Stock of a Section 1291 Fund (see inst	ructio	ons)
Complete a separate Part V for each excess distribution and disposition. See instructions.		•
15 a Enter your total distributions from the section 1291 fund during the current tax year with respect to the applicable stock. If the		
holding period of the stock began in the current tax year, see instructions	15a	
b Enter the total distributions (reduced by the portions of such distributions that were excess distributions but not		
included in income under section 1291(a)(1)(B)) made by the fund with respect to the applicable stock for each of the 3 years		
preceding the current tax year (or if shorter, the portion of the shareholder's holding period before the current tax year)	15b	
c Divide line 15b by 3.0. (See instructions if the number of preceding tax years is less than 3.)	15c	
d Multiply line 15c by 125% (1.25)	15d	
e Subtract line 15d from line 15a. This amount, if more than zero, is the excess distribution with respect to the applicable stock.		
If there is an excess distribution, complete line 16. If zero or less and you did not dispose of stock during the tax year, do not		
complete the rest of Part V. See instructions if you received more than one distribution during the current tax year. Also,		
see instructions for rules for reporting a nonexcess distribution on your income tax return	15e	
f Enter gain or loss from the disposition of stock of a section 1291 fund or former section 1291 fund. If a gain,		
complete line 16. If a loss, show it in brackets and do not complete line 16	15f	
16 a If there is a positive amount on line 15e or 15f (or both), attach a statement for each excess distribution and disposition.		
Show your holding period for each share of stock or block of shares held. Allocate the excess distribution or gain to each day		
in your holding period. Add all amounts that are allocated to days in each tax year.		
b Enter the total of the amounts determined in line 16a that are allocable to the current tax year and tax years	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
before the foreign corporation became a PFIC (pre-PFIC years). Enter these amounts on your income tax	a contact	
return as other income	16b	
c Enter the aggregate increases in tax (before credits) for each tax year in your holding period		
(other than the current tax year and pre-PFIC years). See instructions	16c	
d Foreign tax credit (see instructions)	16d	
e Subtract line 16d from line 16c. Enter this amount on your income tax return as "additional tax." See instructions	16e	
f Determine interest on each net increase in tax determined on line 16e using the rates and methods of section 6621.		
Enter the aggregate amount of interest here. See instructions	16f	

15.	e di la la compania del compania del la compania del compania de la compania de la compania de la compania del compania				ation of Section	1294 Elections	
_		parate column for e	ach outstanding elec	ction.	T		
	Complete lines 17 through 20 to report the status of outstanding prior year section 1294 elections.						
		(i)	(ii)	(III)	(lv)	(v)	(vi)
17	Tax year of outstanding election						
18	Undistributed earnings to which the election relates						
	Deferred tax Interest accrued on deferred tax (line 19) as of the filing date						
	Complete lines 21 through 24 only if a section 1294 election is terminated in the current year.						
	Event terminating election Earnings distributed or deemed distributed during the tax year						
23	Deferred tax due with this return						
24	Accrued interest due with this return						
25	Complete lines 25 and 26 only if there is a partial termination of a section 1294 election in the current tax year. Deferred tax outstanding after partial termination of election. Subtract line 23 from line 19						
26	Interest accrued after partial termination of election. Subtract line 24 from line 20						

Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund Go to www.irs.gov/Form8621 for instructions and the latest information. OMB No. 1545-1002 Attachment Sequence No. 69

Nan	e of sh	areholder	Identifying number (see instructions)			
		OMMUNITY FOUNDATION OF FREDERICK				
CO	UNT	Y MARYLAND, INC.	52-1488711			
Nun	nber, st	reet, and room or suite no. If a P.O. box, see instructions.	Shareholder tax year: calendar year or other tax year beginning			
31	.2 E	AST CHURCH STREET	JUL 1 , 2019 and ending JUN 30, 2020.			
City FR	or towi	n, state, and ZIP code or country RICK, MD 21701				
Che	ck type	of shareholder filing the return: Individual X Corporation Partnershi	S Corporation Nongrantor Trust Estate			
Che	ck if an	y Excepted Specified Foreign Financial Assets are reported on this form. See instructions				
Qua	lifying I	nsurance Corporation Election-I, a shareholder of stock of a foreign corporation, elect to tre	eat such stock as the stock of a Qualifying			
Insu	rance (Corporation under the alternative facts and circumstances test within the meaning of section	n 1297(f)(2). See instructions			
		gn corporation, passive foreign investment company (PFIC), or qualified electing fund (QEF) NSIC EDGE PLUS OFFSHORE LTD	Employer identification number (if any)			
Add	ress (E	nter number, street, city or town, and country.)	Reference ID number (see instructions) 0 4			
31	8 W	ADAMS STREET	Tax year of foreign corporation, PFIC, or QEF: Calendar year			
CH	ICA	GO, CAYMAN ISLANDS 60606	or other tax year beginning JAN 1 2019, and ending DEC 31, 2019.			
√.P	art l	Summary of Annual Information (see instructions)				
Prov		following information with respect to all shares of the PFIC held by the shareholder:				
1	Desc	cription of each class of shares held by the shareholder:				
_		Check if shares jointly owned with spouse.				
2	Date	shares acquired during the tax year, if applicable:				
3	Num	ber of shares held at the end of the tax year:				
4	Valu	e of shares held at the end of the tax year (check the appropriate box, if applicable):				
4		\$0.50,000 (b) \$50,001-100,000 (c) \$100,001-150,000	(d) \$150,001-200,000			
		If more than \$200,000, list value:	(u) 130,00 1×200,000			
	(-)					
5	Туре	of PFIC and amount of any excess distribution or gain treated as an excess distribution un	der section 1291, inclusion under section 1293,			
	and	inclusion or deduction under section 1296 (check all boxes that apply):				
	(a)	Section 1291 \$				
	(b)	Section 1293 (Qualified Electing Fund) \$				
	(c)	Section 1296 (Mark to Market) \$				
	art II					
Α	\vdash	Election To Treat the PFIC as a QEF. I, a shareholder of a PFIC, elect to treat the PFIC as	,			
В		Election To Extend Time For Payment of Tax. I, a shareholder of a QEF, elect to extend the QEF until this election is terminated. Complete lines 8a through 9c of Part III to Note: If any portion of line 6a or line 7a of Part III is includible under section 951, you may 1294(c) and 1294(f) and the related regulations for events that terminate this election.	calculate the tax that may be deferred.			
С		Election To Mark-to-Market PFIC Stock. I, a shareholder of a PFIC, elect to mark-to-mark 1296(e). Complete Part IV.	et the PFIC stock that is marketable within the meaning of section			
D		Deemed Sale Election. I, a shareholder on the first day of a PFIC's first tax year as a QEF, PFIC. Enter gain or loss on line 15f of Part V.	elect to recognize gain on the deemed sale of my interest in the			
Ε		Deemed Dividend Election. i, a shareholder on the first day of a PFIC's first tax year as a	÷ ', ','			
		amount equal to my share of the post-1986 earnings and profits of the CFC as an excess excess distribution is greater than zero, also complete line 16 of Part V.	distribution. Enter this amount on line 15e of Part V. If the			
F		Election To Recognize Gain on Deemed Sale of PFIC. I, a shareholder of a former PFIC of distribution the gain recognized on the deemed sale of my interest in the PFIC on the last a gain on line 15f of Part V.	day of its last tax year as a PFIC under section 1297(a). <i>Enter</i>			
G		Deemed Dividend Election With Respect to a Section 1297(e) PFIC. I, a shareholder of a 1.1297-3(a), elect to make a deemed dividend election with respect to the Section 1297(e) PFIC includes the CFC qualification date, as defined in Regulations section 1.1297-3(d). Electribution is greater than zero, also complete line 16, Part V.) PFIC. My holding period in the stock of the Section 1297(e)			
Н		Deemed Dividend Election With Respect to a Former PFIC. I, a shareholder of a former elect to make a deemed dividend election with respect to the former PFIC. My holding peridefined in Regulations section 1.1298-3(d). Enter the excess distribution on line 15e, complete line 16, Part V.	od in the stock of the former PFIC includes the termination date, as			

	art III Income From a Qualified Electing Fund (QEF). All QEF sha	arenoiders compi	ete lines 6a through 7c. If	you are making
	Election B, also complete lines 8a through 9c. See instructions.			
	Enter your pro rata share of the ordinary earnings of the QEF	6a		**
b	Enter the portion of line 6a that is included in income under section 951 or that may be		(), (),	
	excluded under section 1293(g)			•
	Subtract line 6b from line 6a. Enter this amount on your tax return as ordinary income			G
	Enter your pro rata share of the total net capital gain of the QEF	7a	. 1	
b	Enter the portion of line 7a that is included in income under section 951 or that may be	1 1	1	
	excluded under section 1293(g)			:
C	Subtract line 7b from line 7a. This amount is a net long-term capital gain. Enter this amou		Total a	# 1
	used for your income tax return. See instructions			0
_	Complete lines 8 and 9 only if you are making a section 1294 election (Election B) for			I
	Add lines 6c and 7c			1
Þ	Enter the total amount of cash and the fair market value of other property distributed		Mary and Mar	
	or deemed distributed to you during the tax year of the QEF. See instructions	8b		
C	Enter the portion of line 8a not already included in line 8b that is attributable to shares			
	in the QEF that you disposed of, pledged, or otherwise transferred during the tax year			A
	Add lines 8b and 8c			
е	Subtract line 8d from line 8a, and enter the difference (if zero or less, enter amount in brace	7,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Important: If line 8e is greater than zero, and no portion of line 6a or 7a is includit	ole in income ui	naer section 951,	
۰.	you may make Election B with respect to the amount on line 8e.	ا مو ا		
	Enter the total tax for the tax year. See instructions	9a		
D	Enter the total tax for the tax year determined without regard to the amount entered	9b		
	on line 8e Subtract line 9b from line 9a. This is the deferred tax, the time for payment of which is a		ina	
Ü		•	T .	
Pa	rt IV Gain or (Loss) From Mark-to-Market Election (see in	etructione)		<u> </u>
	Enter the fair market value of your PEIC stock at the end of the tay year		T 10	la
h	Enter the fair market value of your PFIC stock at the end of the tax year Enter your adjusted basis in the stock at the end of the tax year			
	Enter your adjusted basis in the stock at the end of the tax year		10	
C	Enter your adjusted basis in the stock at the end of the tax year Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amo	ount as ordinary i	income 10	lb
C	Enter your adjusted basis in the stock at the end of the tax year Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amount your tax return. If a loss, go to line 11	ount as ordinary i	income 10	ib ic
c 11	Enter your adjusted basis in the stock at the end of the tax year Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amon your tax return. If a loss, go to line 11 Enter any unreversed inclusions (as defined in section 1296(d))	ount as ordinary i	10 income 10 11 11 11 11 11 11 11 11 11 11 11 11	ib ic
11 12	Enter your adjusted basis in the stock at the end of the tax year Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amon your tax return. If a loss, go to line 11 Enter any unreversed inclusions (as defined in section 1296(d)) Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Incl	ount as ordinary i	10 10 10 10 10 10 10 10 10 10 10 10 10 1	le 1
11 12	Enter your adjusted basis in the stock at the end of the tax year Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amon your tax return. If a loss, go to line 11 Enter any unreversed inclusions (as defined in section 1296(d))	ount as ordinary i	10 10 10 10 10 10 10 10 10 10 10 10 10 1	le 1
11 12 13	Enter your adjusted basis in the stock at the end of the tax year Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amon your tax return. If a loss, go to line 11 Enter any unreversed inclusions (as defined in section 1296(d)) Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Includes on your tax return If you sold or otherwise disposed of any section 1296 stock (see instructions) during the	ount as ordinary i ude this amount : e tax year:	10 10 10 10 10 10 10 10 10 10 10 10 10 1)c 1
11 12 13 a	Enter your adjusted basis in the stock at the end of the tax year Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amon your tax return. If a loss, go to line 11 Enter any unreversed inclusions (as defined in section 1296(d)) Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Includes on your tax return If you sold or otherwise disposed of any section 1296 stock (see instructions) during the Enter the fair market value of the stock on the date of sale or disposition	ount as ordinary i ude this amount : e tax year:	income 10 11 12 12 13 13 13 13 13	ib ic 1
11 12 13 a b	Enter your adjusted basis in the stock at the end of the tax year Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amon your tax return. If a loss, go to line 11 Enter any unreversed inclusions (as defined in section 1296(d)) Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Includes on your tax return If you sold or otherwise disposed of any section 1296 stock (see instructions) during the	ount as ordinary i ude this amount : e tax year:	10 10 10 10 10 10 10 10 10 10 10 10 10 1	ib ic 1
11 12 13 a b c	Enter your adjusted basis in the stock at the end of the tax year Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amon your tax return. If a loss, go to line 11 Enter any unreversed inclusions (as defined in section 1296(d)) Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Includes on your tax return If you sold or otherwise disposed of any section 1296 stock (see instructions) during the Enter the fair market value of the stock on the date of sale or disposition Enter the adjusted basis of the stock on the date of sale or disposition	ount as ordinary i ude this amount : e tax year: ordinary income o	income 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ib lic 1 2 sa lib
11 12 13 a b	Enter your adjusted basis in the stock at the end of the tax year Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amon your tax return. If a loss, go to line 11 Enter any unreversed inclusions (as defined in section 1296(d)) Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Includes on your tax return If you sold or otherwise disposed of any section 1296 stock (see instructions) during the Enter the fair market value of the stock on the date of sale or disposition Enter the adjusted basis of the stock on the date of sale or disposition Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as o	ount as ordinary i ude this amount : e tax year: ordinary income o	10 10 10 10 10 10 10 10 10 10 10 10 10 1	oc 1 2 2 Sa Sib
11 12 13 a b c	Enter your adjusted basis in the stock at the end of the tax year Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amount your tax return. If a loss, go to line 11 Enter any unreversed inclusions (as defined in section 1296(d)) Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Includes on your tax return If you sold or otherwise disposed of any section 1296 stock (see instructions) during the Enter the fair market value of the stock on the date of sale or disposition Enter the adjusted basis of the stock on the date of sale or disposition Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as of tax return. If a loss, go to line 14 Enter any unreversed inclusions (as defined in section 1296(d)) Enter the loss from line 13c, but only to the extent of unreversed inclusions on line 14a. Inc	ount as ordinary i ude this amount a e tax year; ordinary income o	10 10 10 10 10 10 10 10 10 10 10 10 10 1	oc 1 2 2 Sa Sib
11 12 13 a b c	Enter your adjusted basis in the stock at the end of the tax year Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amon your tax return. If a loss, go to line 11 Enter any unreversed inclusions (as defined in section 1296(d)) Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Includes on your tax return If you sold or otherwise disposed of any section 1296 stock (see instructions) during the Enter the fair market value of the stock on the date of sale or disposition Enter the adjusted basis of the stock on the date of sale or disposition Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as of tax return. If a loss, go to line 14 Enter any unreversed inclusions (as defined in section 1296(d))	ount as ordinary i ude this amount a e tax year; ordinary income o	10 10 10 10 10 10 10 10 10 10 10 10 10 1	de de de de de de de de de de de de de d
11 12 13 a b c	Enter your adjusted basis in the stock at the end of the tax year Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amon your tax return. If a loss, go to line 11 Enter any unreversed inclusions (as defined in section 1296(d)) Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Includes on your tax return If you sold or otherwise disposed of any section 1296 stock (see instructions) during the Enter the fair market value of the stock on the date of sale or disposition Enter the adjusted basis of the stock on the date of sale or disposition Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as of tax return. If a loss, go to line 14 Enter any unreversed inclusions (as defined in section 1296(d)) Enter the loss from line 13c, but only to the extent of unreversed inclusions on line 14a. Includes on your tax return. If the loss on line 13c exceeds unreversed inclusions on line 14a. Enter the amount by which the loss on line 13c exceeds unreversed inclusions on line 14a.	ount as ordinary i ude this amount a e tax year: ordinary income o clude this amount complete line 14c Include this amo	10 10 10 10 10 10 10 10 10 10 10 10 10 1	de de de de de de de de de de de de de d
11 12 13 a b c	Enter your adjusted basis in the stock at the end of the tax year Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amon your tax return. If a loss, go to line 11 Enter any unreversed inclusions (as defined in section 1296(d)) Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Includes on your tax return If you sold or otherwise disposed of any section 1296 stock (see instructions) during the Enter the fair market value of the stock on the date of sale or disposition Enter the adjusted basis of the stock on the date of sale or disposition Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as of tax return. If a loss, go to line 14 Enter any unreversed inclusions (as defined in section 1296(d)) Enter the loss from line 13c, but only to the extent of unreversed inclusions on line 14a. Includes on your tax return. If the loss on line 13c exceeds unreversed inclusions on line 14a, co	ount as ordinary i ude this amount a e tax year: ordinary income o clude this amount complete line 14c Include this amo	10 10 10 10 10 10 10 10 10 10 10 10 10 1	ib ic 1 2 ia ib ic a ib

Part V Distributions From and Dispositions of Stock of a Section 1291 Fund (see in	struction	ons)
Complete a separate Part V for each excess distribution and disposition. See instructions.		•
15 a Enter your total distributions from the section 1291 fund during the current tax year with respect to the applicable stock. If the		
holding period of the stock began in the current tax year, see instructions	. 15a	
b Enter the total distributions (reduced by the portions of such distributions that were excess distributions but not		
included in income under section 1291(a)(1)(B)) made by the fund with respect to the applicable stock for each of the 3 years		
preceding the current tax year (or if shorter, the portion of the shareholder's holding period before the current tax year)	15b	
c Divide line 15b by 3.0. (See instructions if the number of preceding tax years is less than 3.)	150	
d Multiply line 15c by 125% (1.25)	15d	
e Subtract line 15d from line 15a. This amount, if more than zero, is the excess distribution with respect to the applicable stock.		
If there is an excess distribution, complete line 16. If zero or less and you did not dispose of stock during the tax year, do not		
complete the rest of Part V. See instructions if you received more than one distribution during the current tax year. Also,		
see instructions for rules for reporting a nonexcess distribution on your income tax return	. 15e	
f Enter gain or loss from the disposition of stock of a section 1291 fund or former section 1291 fund. If a gain,		
complete line 16. If a loss, show it in brackets and do not complete line 16	15f	
16 a If there is a positive amount on line 15e or 15f (or both), attach a statement for each excess distribution and disposition.	11.75	
Show your holding period for each share of stock or block of shares held. Allocate the excess distribution or gain to each day	in the Mil	
in your holding period. Add all amounts that are allocated to days in each tax year.	1	****
b Enter the total of the amounts determined in line 16a that are allocable to the current tax year and tax years		
before the foreign corporation became a PFIC (pre-PFIC years). Enter these amounts on your income tax		
return as other income	16b	
c Enter the aggregate increases in tax (before credits) for each tax year in your holding period		
(other than the current tax year and pre-PFIC years). See instructions	. 16c	
d Foreign tax credit (see instructions)	. 16d	
e Subtract line 16d from line 16c. Enter this amount on your income tax return as "additional tax." See instructions	16e	
f Determine interest on each net increase in tax determined on line 16e using the rates and methods of section 6621.		
Enter the aggregate amount of interest here. See instructions	. 16f	

F	Part VI Status of Prior Year Section 1294 Elections and Termination of Section 1294 Elections Complete a separate column for each outstanding election.						
	Complete lines 17 through 20 to report the status of outstanding prior year section 1294 elections.						
17	Tax year of outstanding	(1)	(ii)	(iii)	(iv)	(v)	(vi)
17	election						
18	Undistributed earnings to which the election relates	***************************************					
19	Deferred tax						
	Interest accrued on deferred						
	tax (line 19) as of the filing date						
_	Complete lines 21 through					2.2	V 4 3 7 4 4 6 4 8
	24 only if a section 1294				1. 1. 1. 1		
	election is terminated in			4-1			
	the current year.				Mary Walt		
21	Event terminating election						
22	Earnings distributed or						
	deemed distributed during						
	the tax year						
23	Deferred tax due with this						
24	return Accrued interest due with						
44	this return						
	Complete lines 25 and 26	yantaron (Castar) or t			[2]		
	only if there is a partial			factor A. Sarva			
	termination of a section				7785 - 194 E 45 A 45 A	1.0000000000000000000000000000000000000	
	1294 election in the						
	current tax year.	The State of Control of the State of Control of the State of Control of the State of Control of the State of Control of the State of Control of the State of Control of the State of Control of the State of Control of the State of Control of the State of Control of the State of Control of the State of Control of the State of Control of Contr	Wantaka 1				and the same of th
25	Deferred tax outstanding						
	after partial termination of election. Subtract line 23						
	r 11 40						
	Interest accrued after partial						
	termination of election.						
	Subtract line 24 from line 20						

Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund

Internal Rev	enue Service Go to www.irs.gov/Form8621 for instructions a	nd the latest information. Sequence No. 69
	hareholder COMMUNITY FOUNDATION OF FREDERICK	Identifying number (see instructions)
	TY MARYLAND, INC.	52-1488711
Number, s	treet, and room or suite no. If a P.O. box, see instructions.	Shareholder tax year: calendar year or other tax year beginning
	SAST CHURCH STREET	JUL 1 , 2019 and ending JUN 30, 2020.
	n, state, and ZIP code or country ERICK, MD 21701	
Check type	e of shareholder filing the return: Individual X Corporation Partnersh	ip S Corporation Nongrantor Trust Estate
	ny Excepted Specified Foreign Financial Assets are reported on this form. See Instructions	
	Insurance Corporation Election-I, a shareholder of stock of a foreign corporation, elect to the	
	Corporation under the alternative facts and circumstances test within the meaning of section	
	algn corporation, passive foreign investment company (PFIC), or qualified electing fund (QEF) B CAPITAL PARTNERS INTERNATIONAL 11 LP	Employer identification number (if any)
Address (Enter number, street, city or town, and country.)	Reference ID number (see instructions) 0.5
UGLAN	ND HOUSE, P.O. BOX 309	Tax year of foreign corporation, PFIC, or QEF: Calendar year
GRANI	CAYMAN, CAYMAN ISLANDS	or other tax year beginning JAN 1 2019, and ending DEC 31, 2019.
Part I	Summary of Annual Information (see instructions)	Tand shaling DEO SI, 2015.
	e following information with respect to all shares of the PFIC held by the shareholder:	
	cription of each class of shares held by the shareholder:	
	Check if shares jointly owned with spouse.	
2 Dat	e shares acquired during the tax year, if applicable:	
3 Nur	nber of shares held at the end of the tax year:	
· ital	and of ordina do note at the one of the axyour.	
4 Valı	ue of shares held at the end of the tax year (check the appropriate box, if applicable):	
(a)		(d) \$150,001-200,000
(e)	If more than \$200,000, list value:	
- ~	CDEIO I I I COMPANIA I I I I I I I I I I I I I I I I I I	
	e of PFIC and amount of any excess distribution or gain treated as an excess distribution u	nder section 1291, inclusion under section 1293,
anu (a)	inclusion or deduction under section 1296 (check all boxes that apply): Section 1291 \$	
(a) (b)	Section 1293 (Qualified Electing Fund) \$	
(c)	Section 1296 (Mark to Market) \$	
	Elections (see instructions)	
Α	Election To Treat the PFIC as a QEF. I, a shareholder of a PFIC, elect to treat the PFIC as	a QEF. Complete lines 6a through 7c of Part III.
В□	Election To Extend Time For Payment of Tax. I, a shareholder of a QEF, elect to extend to the QEF until this election is terminated. Complete lines 8a through 9c of Part III t Note: If any portion of line 6a or line 7a of Part III is includible under section 951, you ma 1294(c) and 1294(f) and the related regulations for events that terminate this election.	o calculate the tay that may be deferred
c \square	Election To Mark-to-Market PFIC Stock. I, a shareholder of a PFIC, elect to mark-to-mar 1296(e). Complete Part IV.	ket the PFIC stock that is marketable within the meaning of section
D	Deemed Sale Election. I, a shareholder on the first day of a PFIC's first tax year as a QEF PFIC. Enter gain or loss on line 15f of Part V.	F, elect to recognize gain on the deemed sale of my interest in the
E	Deemed Dividend Election. I, a shareholder on the first day of a PFIC's first tax year as a amount equal to my share of the post-1986 earnings and profits of the CFC as an excess excess distribution is greater than zero, also complete line 16 of Part V.	
F \square	Election To Recognize Gain on Deemed Sale of PFIC. I, a shareholder of a former PFIC distribution the gain recognized on the deemed sale of my interest in the PFIC on the last gain on line 15f of Part V.	or a PFIC to which section 1297(d) applies, elect to treat as an excess day of its last tax year as a PFIC under section 1297(a). <i>Enter</i>
G 🗀	Deemed Dividend Election With Respect to a Section 1297(e) PFIC. I, a shareholder of 1.1297-3(a), elect to make a deemed dividend election with respect to the Section 1297(e) PFIC includes the CFC qualification date, as defined in Regulations section 1.1297-3(d). Edistribution is greater than zero, also complete line 16, Part V.	e) PFIC. My holdling period in the stock of the Section 1297(e) Enter the excess distribution on line 15e, Part V. If the excess
H	Deemed Dividend Election With Respect to a Former PFIC. I, a shareholder of a former elect to make a deemed dividend election with respect to the former PFIC. My holding per defined in Regulations section 1.1298-3(d). Enter the excess distribution on line 156 complete line 16. Part V.	iod in the stock of the former PFIC includes the termination date, as

_		-	40.00.101	
⊦orm.	8621	(Hev.	12-2018)	

Pa	Part III Income From a Qualified Electing Fund (QEF). All QEF shareholders complete lines 6a through 7c. If you are making				
	Election B, also complete lines 8a through 9c. See instructions.		I:	**************************************	
	Enter your pro rata share of the ordinary earnings of the QEF	6a			
D	Enter the portion of line 6a that is included in income under section 951 or that may be	اما			
	excluded under section 1293(g)				
	Subtract line 6b from line 6a. Enter this amount on your tax return as ordinary income	1	6c		
	Enter your pro rata share of the total net capital gain of the QEF	7a			
Q	Enter the portion of line 7a that is included in income under section 951 or that may be	l =, 1	12,44		
_	excluded under section 1293(g)	7b			
G	Subtract line 7b from line 7a. This amount is a net long-term capital gain. Enter this amount		1 _		
	used for your income tax return. See instructions		7c		
0 -	Complete lines 8 and 9 only if you are making a section 1294 election (Election B) for th Add lines 6c and 7c		1 . 1		
		 I I	8a		
U	Enter the total amount of cash and the fair market value of other property distributed		1 1		
_	or deemed distributed to you during the tax year of the QEF. See instructions	8b	-		
Ü	Enter the portion of line 8a not already included in line 8b that is attributable to shares in the QEF that you disposed of, pledged, or otherwise transferred during the tax year		1 1		
	to the second second second second second second second second second second second second second second second				
u	Add lines 8b and 8c	ata)	8d		
6			8e		
	Important: If line 8e is greater than zero, and no portion of line 6a or 7a is includible	9 In Income under Section 951,			
۵.	you may make Election B with respect to the amount on line 8e. Enter the total tax for the tax year. See instructions	9a			
	Enter the total tax for the tax year, see histocolors Enter the total tax for the tax year determined without regard to the amount entered	- 5a	- Ay		
U	on line 8e	9b	A 348		
r	Subtract line 9b from line 9a. This is the deferred tax, the time for payment of which is ex				
U	Election B		9c		
Pa	art IV Gain or (Loss) From Mark-to-Market Election (see insi	tructions)	30		
	Enter the fair market value of your PFIC stock at the end of the tax year	, , , , , , , , , , , , , , , , , , , ,	10a		
	Enter your adjusted basis in the stock at the end of the tax year		10b		
C	Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amou	nt as ordinary income	100		
	on your tax return. if a loss, go to line 11		10c		
11	Enter any unreversed inclusions (as defined in section 1296(d))		11		
	Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Includ				
	loss on your tax return	-	12		
	lf you sold or otherwise disposed of any section 1296 stock (see instructions) during the t				
	Enter the fair market value of the stock on the date of sale or disposition	•	13a		
	Enter the adjusted basis of the stock on the date of sale or disposition		13b		
	Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as ord		"		
	tax return. If a loss, go to line 14		13c		
	Enter any unreversed inclusions (as defined in section 1296(d))		14a		
	Enter the loss from line 13c, but only to the extent of unreversed inclusions on line 14a. Inclu				
	loss on your tax return. If the loss on line 13c exceeds unreversed inclusions on line 14a, cor		14b		
	Enter the amount by which the loss on line 13c exceeds unreversed inclusions on line 14a. Ir				
	return according to the rules generally applicable for losses provided elsewhere in the Code a		14c		
	Note: See instructions in case of multiple sales or dispositions.				

Part V Distributions From and Dispositions of Stock of a Section 1291 Fund (see inst	ructio	ons)
Complete a separate Part V for each excess distribution and disposition. See instructions.	100410	
15 a Enter your total distributions from the section 1291 fund during the current tax year with respect to the applicable stock. If the	-	
holding period of the stock began in the current tax year, see instructions	15a	
b Enter the total distributions (reduced by the portions of such distributions that were excess distributions but not		
included in income under section 1291(a)(1)(B)) made by the fund with respect to the applicable stock for each of the 3 years	ŀ	
preceding the current tax year (or if shorter, the portion of the shareholder's holding period before the current tax year)	15b	
c Divide line 15b by 3.0. (See instructions if the number of preceding tax years is less than 3.)	15c	
d Multiply line 15c by 125% (1.25)	15d	
e Subtract line 15d from line 15a. This amount, if more than zero, is the excess distribution with respect to the applicable stock.		
If there is an excess distribution, complete line 16. If zero or less and you did not dispose of stock during the tax year, do not	ŀ	
complete the rest of Part V. See instructions if you received more than one distribution during the current tax year. Also,		
see instructions for rules for reporting a nonexcess distribution on your income tax return	15e	
f Enter gain or loss from the disposition of stock of a section 1291 fund or former section 1291 fund. If a gain,		
complete line 16. If a loss, show it in brackets and do not complete line 16	15f	
16 a If there is a positive amount on line 15e or 15f (or both), attach a statement for each excess distribution and disposition.		
Show your holding period for each share of stock or block of shares held. Allocate the excess distribution or gain to each day		
in your holding period. Add all amounts that are allocated to days in each tax year.	and the state of t	
b Enter the total of the amounts determined in line 16a that are allocable to the current tax year and tax years	3.75	
before the foreign corporation became a PFIC (pre-PFIC years). Enter these amounts on your income tax	Page.	
return as other income	16b	
c Enter the aggregate increases in tax (before credits) for each tax year in your holding period		
(other than the current tax year and pre-PFIC years). See instructions	16c	
d Foreign tax credit (see instructions)	16d	
e Subtract line 16d from line 16c. Enter this amount on your income tax return as "additional tax." See instructions	16e	
f Determine interest on each net increase in tax determined on line 16e using the rates and methods of section 6621.		
Enter the aggregate amount of interest here. See instructions	16f	

Part Vi Status of Prior Year Section 1294 Elections and Termination of Section 1294 Elections Complete a separate column for each outstanding election. Complete lines 17 through 20 to report the status of outstanding prior year section 1294 elections. (ii) (iii) (i) (iv) 17 Tax year of outstanding election 18 Undistributed earnings to which the election relates 19 Deferred tax 20 Interest accrued on deferred tax (line 19) as of the filing date Complete lines 21 through 24 only If a section 1294 election is terminated in the current year. 21 Event terminating election 22 Earnings distributed or deemed distributed during the tax year 23 Deferred tax due with this return 24 Accrued interest due with this return Complete lines 25 and 26 only if there is a partial termination of a section 1294 election in the current tax year. 25 Deferred tax outstanding after partial termination of election. Subtract line 23 from line 19 26 Interest accrued after partial termination of election. Subtract line 24 from line 20

Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund

internal Revenue Service Go to www.irs.gov/Form8621 for instru	ctions and the latest information. Sequence No. 69
Name of shareholder THE COMMUNITY FOUNDATION OF FREDERICK	Identifying number (see instructions)
COUNTY MARYLAND, INC.	52-1488711
Number, street, and room or suite no. If a P.O. box, see instructions.	Shareholder tax year: calendar year or other tax year beginning
312 EAST CHURCH STREET	JUL 1 , 2019 and ending JUN 30, 2020.
City or town, state, and ZIP code or country FREDERICK, MD 21701	
Check type of shareholder filing the return: Individual X Corporation L Check if any Excepted Specified Foreign Financial Assets are reported on this form. See inst	· · · · · · · · · · · · · · · · · · ·
Qualifying Insurance Corporation Election-I, a shareholder of stock of a foreign corporation,	, elect to treat such stock as the stock of a Qualifying
Insurance Corporation under the alternative facts and circumstances test within the meaning	
Name of foreign corporation, passive foreign investment company (PFIC), or qualified electing fund (QEF) CRESTLINE OPPORTUNITY FUND III, LTD	Employer identification number (if any)
Address (Enter number street situar town and sountry)	98-1308312 Reference ID number (see instructions)
Address (Enter number, street, city or town, and country.)	0.6
27 HOSPITAL ROAD	Tax year of foreign corporation, PFIC, or QEF: Calendar year
GRAND CAYMAN, CAYMAN ISLANDS	or other tax year beginning JAN 1 2019, and ending DEC 31, 2019.
Part Summary of Annual Information (see instructions)	
Provide the following information with respect to all shares of the PFIC held by the sharehol	der:
Description of each class of shares held by the shareholder:	
Check if shares jointly owned with spouse. 2 Date shares acquired during the tax year, if applicable:	
2 Date shares acquired varing the tax year, it approache.	· · · · · · · · · · · · · · · · · · ·
Number of shares held at the end of the tax year;	
4 Value of shares held at the end of the tax year (check the appropriate box, if applicab	le);
(a) \$0-50,000 (b) \$50,001-100,000 (c) \$100,001-1	
(e) If more than \$200,000, list value:	· · · · · · · · · · · · · · · · · · ·
F T (P510)	" "
5 Type of PFIC and amount of any excess distribution or gain treated as an excess dist and inclusion or deduction under section 1296 (check all boxes that apply);	ribution under section 1291, inclusion under section 1293,
(a) Section 1291 \$	
(b) Section 1293 (Qualified Electing Fund) \$	
(c) Section 1296 (Mark to Market) \$	
Part II Elections (see instructions)	
A Election To Treat the PFIC as a QEF. I, a shareholder of a PFIC, elect to treat the	· · · · · · · · · · · · · · · · · · ·
Election To Extend Time For Payment of Tax. I, a shareholder of a QEF, elect to of the QEF until this election is terminated. Complete lines 8a through 9c of Note: If any portion of line 6a or line 7a of Part II is includible under section 95 1294(c) and 1294(f) and the related regulations for events that terminate this e	FPart III to calculate the tax that may be deferred.
C Election To Mark-to-Market PFIC Stock. I, a shareholder of a PFIC, elect to ma 1296(e). Complete Part IV.	
Deemed Sale Election. I, a shareholder on the first day of a PFIC's first tax year PFIC. Enter gain or loss on line 15f of Part V.	ır as a QEF, elect to recognize gain on the deemed sale of my interest in the
Deemed Dividend Election. I, a shareholder on the first day of a PFIC's first tax amount equal to my share of the post-1986 earnings and profits of the CFC as excess distribution is greater than zero, also complete line 16 of Part V	an excess distribution. Enter this amount on line 15e of Part V. If the
F Election To Recognize Gain on Deemed Sale of PFIC. I, a shareholder of a for distribution the gain recognized on the deemed sale of my interest in the PFIC of gain on line 15f of Part V.	mer PFIC or a PFIC to which section 1297(d) applies, elect to treat as an excess on the last day of its last tax year as a PFIC under section 1297(a). <i>Enter</i>
G Deemed Dividend Election With Respect to a Section 1297(e) PFIC. I, a shard 1.1297-3(a), elect to make a deemed dividend election with respect to the Section PFIC includes the CFC qualification date, as defined in Regulations section 1.12 distribution is greater than zero, also complete line 16, Part V.	ion 1297(e) PFIC. My holding period in the stock of the Section 1297(e) 97-3(d). Enter the excess distribution on line 15e, Part V. If the excess
H Deemed Dividend Election With Respect to a Former PFIC. I, a shareholder of elect to make a deemed dividend election with respect to the former PFIC. My had defined in Regulations section 1,1298-3(d). Enter the excess distribution of complete line 16. Part V.	olding period in the stock of the former PFIC includes the termination date, as

Earm	0604	(Dour	12-2018	١
FOLU	8021	thev.	12-2018	J

Pa	Part III Income From a Qualified Electing Fund (QEF). All QEF shareholders complete lines 6a through 7c. If you are making					
	Election B, also complete lines 8a through 9c. See instructions.	٠.	1	1		
	Enter your pro rata share of the ordinary earnings of the QEF	6a	<u> </u>	4		
b	Enter the portion of line 6a that is included in income under section 951 or that may be	1	Ī			
	excluded under section 1293(g)					
G	Subtract line 6b from line 6a. Enter this amount on your tax return as ordinary income		 1	6c		
	Enter your pro rata share of the total net capital gain of the QEF	7a				
D	Enter the portion of line 7a that is included in income under section 951 or that may be	1	Ī			
	excluded under section 1293(g)	7b		_		
C	Subtract line 7b from line 7a. This amount is a net long-term capital gain. Enter this amou			121. 131		
	used for your income tax return. See instructions			7c		
	Complete lines 8 and 9 only if you are making a section 1294 election (Election B) for				1	
	Add lines 6c and 7c		I	8a		
b	Enter the total amount of cash and the fair market value of other property distributed					
	or deemed distributed to you during the tax year of the QEF. See instructions	8b		_ ```		
C	Enter the portion of line 8a not already included in line 8b that is attributable to shares			100		
	in the QEF that you disposed of, pledged, or otherwise transferred during the tax year					
d	Add lines 8b and 8c			8d		
8	Subtract line 8d from line 8a, and enter the difference (if zero or less, enter amount in bra	ckets) .		8e		
	Important: If line 8e is greater than zero, and no portion of line 6a or 7a is including	ble in in	come under section 951,	P .		
	you may make Election B with respect to the amount on line 8e.	1	1			
	Enter the total tax for the tax year. See instructions	9a		. #1		
þ	Enter the total tax for the tax year determined without regard to the amount entered			100		
	on line 8e					
C	Subtract line 9b from line 9a. This is the deferred tax, the time for payment of which is		•			
	Election B			9с	-, -, -, -, -, -, -, -, -, -, -, -, -, -	
C.5.57 (93)8	rt IV Gain or (Loss) From Mark-to-Market Election (see in		,			
10a	Enter the fair market value of your PFIC stock at the end of the tax year			10a		
b	Enter your adjusted basis in the stock at the end of the tax year		,.,.,.,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10b		
	Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this am		-			
	on your tax return. If a loss, go to line 11			100		
	Enter any unreversed inclusions (as defined in section 1296(d))			11		
	Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Incl					
	oss on your tax return			12		
	lf you sold or otherwise disposed of any section 1296 stock (see instructions) during the					
	Enter the fair market value of the stock on the date of sale or disposition			13a		
þ	Enter the adjusted basis of the stock on the date of sale or disposition			13b		
C	Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as c	•	•			
tax return. If a loss, go to line 14						
	Enter any unreversed inclusions (as defined in section 1296(d))			14a		
	Enter the loss from line 13c, but only to the extent of unreversed inclusions on line 14a. Inc					
	oss on your tax return. If the loss on line 13c exceeds unreversed inclusions on line 14a, o	complete	line 14c	14b		
	Enter the amount by which the loss on line 13c exceeds unreversed inclusions on line 14a.					
I	eturn according to the rules generally applicable for losses provided elsewhere in the Code	e and re	gulations	14c		
	Note: See instructions in case of multiple sales or dispositions					

Part V Distributions From and Dispositions of Stock of a Section 1291 Fund (see inst	ructio	ons)
Complete a separate Part V for each excess distribution and disposition. See instructions.		,
15 a Enter your total distributions from the section 1291 fund during the current tax year with respect to the applicable stock. If the	}	
holding period of the stock began in the current tax year, see instructions	15a	
b Enter the total distributions (reduced by the portions of such distributions that were excess distributions but not		
included in income under section 1291(a)(1)(B)) made by the fund with respect to the applicable stock for each of the 3 years		
preceding the current tax year (or if shorter, the portion of the shareholder's holding period before the current tax year)	15b	
c Divide line 15b by 3.0. (See instructions if the number of preceding tax years is less than 3.)	15c	***
d Multiply line 15c by 125% (1.25)	15d	
e Subtract line 15d from line 15a. This amount, if more than zero, is the excess distribution with respect to the applicable stock.		
If there is an excess distribution, complete line 16. If zero or less and you did not dispose of stock during the tax year, do not		
complete the rest of Part V. See instructions if you received more than one distribution during the current tax year. Also,		
see instructions for rules for reporting a nonexcess distribution on your income tax return	15e	
f Enter gain or loss from the disposition of stock of a section 1291 fund or former section 1291 fund. If a gain,		
complete line 16. If a loss, show it in brackets and do not complete line 16	15f	
16 a If there is a positive amount on line 15e or 15f (or both), attach a statement for each excess distribution and disposition.		
Show your holding period for each share of stock or block of shares held. Allocate the excess distribution or gain to each day	AL ASSESSMENT	
in your holding period. Add all amounts that are allocated to days in each tax year.		
b Enter the total of the amounts determined in line 16a that are allocable to the current tax year and tax years		
before the foreign corporation became a PFIC (pre-PFIC years). Enter these amounts on your income tax		
return as other income	16b	
c Enter the aggregate increases in tax (before credits) for each tax year in your holding period		
(other than the current tax year and pre-PFIC years). See instructions	16c	
d Foreign tax credit (see instructions)	16d	
e Subtract line 16d from line 16c. Enter this amount on your income tax return as "additional tax." See instructions	16e	
f Determine interest on each net increase in tax determined on line 16e using the rates and methods of section 6621.		
Enter the aggregate amount of interest here. See instructions	16f	<u></u>

		Prior Year Secti eparate column for e			ation of Section	1294 Elections	•
	Complete lines 17 through 20 to report the status of outstanding prior year section 1294 elections.	Sparate Countin for e	acii bustai (jiriy 6,6)	JUII.			
17	Tax year of outstanding	(i)	(ii)	(iii)	(iv)	(v)	(vi)
	election						
18	Undistributed earnings to which the election relates			1			
	Deferred tax						
20	Interest accrued on deferred tax (line 19) as of the filing date	į					
	Complete lines 21 through						
	24 only if a section 1294						
	election is terminated in the current year.						
21	Event terminating election						
22	Earnings distributed or						
	deemed distributed during						
22	the tax year Deferred tax due with this		<u> </u>		1		
20	return						
24	Accrued interest due with						
	this return						
	Complete lines 25 and 26	A CONTRACTOR					
	only if there is a partial	TO EXPONENT		を行うには30種では、100 原本は40分類が、100 変質によりにより			
	termination of a section					11.00% N. 4.2.40% S. 5.	
	1294 election in the current tax year.						
25	Deferred tax outstanding						
	after partial termination of						
	election. Subtract line 23						
	from line 19						
26	Interest accrued after partial						
	termination of election.						
	Subtract line 24 from line 20	I	1	I	I		l

(Rev. November 2018) Department of the Treasury Internal Revenue Service

Return by a U.S. Transferor of Property

to a Foreign Corporation

Go to www.irs.gov/Form926 for instructions and the latest information.

Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Attachment Sequence No. **128**

Name of transferor	Identifying number (see instructions		
THE COMMUNITY FOUNDATION OF FREDERICK			
COUNTY MARYLAND, INC.	52-1488711		
 Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation. If the transferor was a corporation, complete questions 2a through 2d. If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 3 five or fewer domestic corporations? 	68(c)) by		
b Did the transferor remain in existence after the transfer?	Yes No		
If not, list the controlling shareholder(s) and their identifying number(s).			
Controlling shareholder	ldentifying number		
c If the transferor was a member of an affiliated group filing a consolidated return, was it the parer	nt corporation? Yes No		
If not, list the name and employer identification number (EIN) of the parent corporation.	it corporation? Tes INO		
Name of parent corporation	EIN of parent corporation		
d Have basis adjustments under section 367(a)(4) been made?	Yes No		
3 If the transferor was a partner in a partnership that was the actual transferor (but is not treated a complete questions 3a through 3d.	us such under section 367),		
a List the name and EIN of the transferor's partnership.			
Name of partnership	EIN of partnership		
 b Did the partner pick up its pro rata share of gain on the transfer of partnership assets? c Is the partner disposing of its entire interest in the partnership? 			
d Is the partner disposing of its entire interest in the partnership? d Is the partner disposing of an interest in a limited partnership that is regularly traded on an estat			
securities market?			
Part II Transferee Foreign Corporation Information (see instructions)			
4 Name of transferee (foreign corporation)	5a Identifying number, if any		
CRESTLINE OPPORTUNITY FUND III (CAYMAN) LTD	98-1308312		
6 Address (including country) 27 HOSPITAL ROAD GRAND CAYMAN KY1-9008 CAYMAN ISLANDS	5b Reference ID number		
7 Country code of country of incorporation or organization CJ	I		
8 Foreign law characterization (see instructions) EXEMPTED COMPANY			
9 Is the transferee foreign corporation a controlled foreign corporation? 24531 04-01-19 LHA For Paperwork Reduction Act Notice, see separate instructions.	X Yes No Form 926 (Rev. 11-2018		

		TY FOUNDATION C		COUNTY 52-1	.488711 Page 2
	Regarding Tran	nsfer of Property (see in	nstructions)		
Section A - Cash		7.		7.8	
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash			425,699.		
10 Was cash the only pro	ainder of Part III and				X Yes No
		an intangible property			1 (3)
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Stock and securities					
Inventory					
Other property (not listed under another category)					
Property with built-in loss					
Totals	家族職物 , 1000000000000000000000000000000000000				The second secon
If "Yes," go to line 12b b Was the transferor a d (including a branch the If "Yes," continue to lin c Immediately after the t transferee foreign corp If "Yes," continue to lin d Enter the transferred le	o. Iomestic corporation at is a foreign disregane 12c. If "No," skip transfer, was the dore coration? ne 12d. If "No," skip coss amount includect sfer property descrit		all of the assets of a fore %-owned foreign corpora ine 13. reholder with respect to the	ign branch tion? [Yes No Yes No Yes No Yes No
Section C - Intangible	Property Subj	ect to Section 367(d)			
Type of property	(a) Date of transfer	(b) Description of property	(c) (d) Useful Arm's length pri		(f) Income inclusion for year of transfer
Property described n sec. 367(d)(4)					
Totals					
				•	Form 926 (Rev. 11-2018)

20 a Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) If "Yes," complete lines 20b and 20c. b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation covered by section 367(e)(1)? See instructions Yes X No	For	n 926 (Rev. 11-2018) THE COMMUNITY FOUNDATION OF FREDERICK COUNTY	52-1488711	Page 3
Part IV Additional Information Regarding Transfer of Property (see instructions) 16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before0.648 % (b) After0.648 % 17 Type of nonrecognition transaction (see instructions) ▶ IRC SECTION 351 18 Indicate whether any transfer reported in Part III is subject to any of the following. a Gain recognition under section 904(f)(3)	15	reasonably anticipated to exceed 20 years? At the time of the transfer, did any of the transferred intangible property have an indefinite useful life? Did the transferor choose to apply the 20-year inclusion period provided under Regulations section 1.367(d)-1(c)(3)(ii) for any intangible property? If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(d)-1(c)(3)(ii) Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	No No
Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Su	oplemental Part III Information Required To Be Reported (see instructions)		
Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before				~/
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b Gain recognition under section 904(f)(5)(F)				
b Gain recognition under section 904(f)(5)(F)	а	Gain recognition under section 904(f)(3)	Yes [
c Recapture under section 1503(d)		Gain recognition under section 904(f)(5)(F)	L Yes [X No
d Exchange gain under section 987 19 Did this transfer result from a change in entity classification? 20 a Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) If "Yes," complete lines 20b and 20c. b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? 21 Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation covered by section 367(e)(1)? See instructions Yes X No		Recapture under section 1503(d)	└─ Yes	X No
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Form 000 /Day 44 0040)	C	Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) If "Yes," complete lines 20b and 20c. Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation	Yes [X No

Form 8868 (Rev. January 2020)

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

Department of the Treasury Internal Revenue Service

File a separate application for each return.

➤ Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the

	s, for which an extension request must be sent to the IR					;
	iis form, visit www.irs.gov/e-file-providers/e-file-for-chan					
Autom	atic 6-Month Extension of Time. Only subm	nit oriain	al (no copies needed).			
·····	ations required to file an income tax return other than F			s REMIC	s and trusts	76713 - 10105-10105-10105-10105-10105-10105-10105-10105-10105-10105-10105-10105-10105-10105-10105-10105-10105-
	Form 7004 to request an extension of time to file incom			, c , (12, , , ,)	tog on the constru	
Type or	or Name of exempt organization or other filer, see instructions; Taxpayer identification			number (TIN)		
print THE COMMUNITY FOUNDATION OF			DERICK			
File by the	COUNTY MARYLAND, INC.					8711
dua date for filing your return, See	Number, street, and room or suite no. If a P.O. box, see instructions.					
instructions,	City, town or post office, state, and ZIP code. For a fe FREDERICK, MD 21701					
Enter the	Return Code for the return that this application is for (fil	e a separa	te application for each return)	**********	*******	01
Applicati	on:	Return	1			Return
ls For		Code	Is For			Code
	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990		02	Form 1041-A			
	0 (individual)	03	Form 4720 (other than individual)	r than individual)		
Form 990	· · · · · · · · · · · · · · · · · · ·	04	Form 5227	and the second s	- inde the knowledge in the constraint of	10 11
	T (sec. 401(a) or 408(a) trust)	05	Form 6069			
Form 990	T (trust other than above) GAIL FITZGERAL)	06	Form 8870			12
Teleph If the c	poks are in the care of \blacktriangleright 312 EAST CHURCH one No. \blacktriangleright 301-695-7660 organization does not have an office or place of business for a Group Return, enter the organization's four digit	s in the Ur Group Exe	Fax No. ► nited States, check this box emption Number (GEN) I	f this is fo	r the whole gr	
DOX 🗪	. If it is for part of the group, check this box	and atta	ich a list with the names and TINs of	all memb	ers the extens	ion is for.
the ►[I request an automatic 6-month extension of time until MAY 17, 2021, to file the exempt organization return for the organization named above. The extension is for the organization's return for: Calendar year or X tax year beginning JUL 1, 2019 and ending JUN 30, 2020 calendar year A A A A A A A A A					n return for
2 If th	If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period					
	is application is for Forms 990 BL, 990 PF, 990 T, 4720,	or 6069,	enter the tentative tax, less			
	nonrefundable credits. See instructions.			За	\$	0.
	is application is for Forms 990-PF, 990-T, 4720, of 6069 mated tax payments made, include any prior year overp					n
	ance due. Subtract line 3b from line 3a. Include your pa	1 1111111111111111111111111111111111111	, , , , , , , , , , , , , , , , , , ,	3b	\$	0.
	ng EFTPS (Electronic Federal Tax Payment System). See	7			¢.	0.
	If you are going to make an electronic funds withdrawal			<u> 3c </u> 453-EO ar	nd Form 8879-	The state of the s
	or Privacy Act and Paperwork Reduction Act Notice,	see instri	uctions.	***************************************	Form 88	68 (Rev. 1-2020)
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