

EXTENDED TO MAY 16, 2022

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

OMB No. 1545-0047

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

2020Department of the Treasury
Internal Revenue Service

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.Open to Public
Inspection**A** For the 2020 calendar year, or tax year beginning **JUL 1, 2020** and ending **JUN 30, 2021**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC.		D Employer identification number 52-1488711
	Doing business as		E Telephone number 301-695-7660
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 60,803,770.
	312 EAST CHURCH STREET		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code FREDERICK, MD 21701		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
F Name and address of principal officer: ELIZABETH Y. DAY SAME AS C ABOVE			H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (Insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.FREDERICKCOUNTYGIVES.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1986 M State of legal domicile: MD

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: GENEROUS DONORS CREATE POSITIVE IMPACT IN THE LIVES OF FREDERICK COUNTY CITIZENS THROUGH GRANTS AND		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	24
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	24
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	17
	6 Total number of volunteers (estimate if necessary)	6	139
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	10,777.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	9,466,029.	8,289,073.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	6,977,317.	19,137,827.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.	0.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	16,443,346.	27,426,900.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	7,622,606.	7,691,440.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	1,255,405.	1,363,816.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 664,441.	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,070,014.	1,464,676.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	9,948,025.	10,519,932.
	19 Revenue less expenses. Subtract line 18 from line 12	6,495,321.	16,906,968.
	Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year
21 Total liabilities (Part X, line 26)		137,281,850.	173,800,285.
22 Net assets or fund balances. Subtract line 21 from line 20		12,212,186.	14,864,426.
		125,069,664.	158,935,859.

Part II Signature Block

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

Sign Here	Signature of officer	Date
	ELIZABETH Y. DAY, PRESIDENT AND CEO Type or print name and title	
Paid Preparer	Print/Type preparer's name SUSAN KELLER	Preparer's signature <i>Susan J. Keller</i>
Use Only	Firm's name ▶ ELLIN & TUCKER, CHARTERED	Firm's EIN ▶ 52-0959934
	Firm's address ▶ 400 EAST PRATT ST. SUITE 200 BALTIMORE, MD 21202	Phone no. 410-727-5735

May the IRS discuss this return with the preparer shown above? See instructions

☒ Yes ☐ No

032001 12-23-20

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

Form **990** (2020)**SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION**

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

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Part III Statement of Program Service Accomplishments

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

☒ X

1 Briefly describe the organization's mission:

THE COMMUNITY FOUNDATION IS DEDICATED TO CONNECTING PEOPLE WHO CARE WITH CAUSES THAT MATTER TO ENRICH THE QUALITY OF LIFE IN FREDERICK COUNTY NOW AND FOR FUTURE GENERATIONS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

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

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

4a (Code:) (Expenses \$ 5,090,141. including grants of \$ 4,706,987.) (Revenue \$)
STRATEGIC INITIATIVE GRANTS - THE COMMUNITY FOUNDATION IDENTIFIES COMMUNITY NEEDS THROUGH PERIODIC ASSESSMENTS AND, BASED UPON THESE FINDING, DETERMINES STRATEGIC PRIORITIES FOR ITS DISCRETIONARY GRANTMAKING. QUALIFIED 501C3 ORGANIZATIONS AND GOVERNMENT/QUASI-GOVERNMENT ENTITIES APPLYING FOR FUNDING PROGRAMS NOT NORMALLY PROVIDED THROUGH TAX REVENUE MAY APPLY FOR STRATEGIC FUNDING. APPLICANTS PARTICIPATE IN A RIGOROUS REVIEW PROCESS CONDUCTED BY THE COMMUNITY FOUNDATION'S VOLUNTEER GRANTS COMMITTEE. APPLICANTS MUST BE IN GOOD STANDING WITH ALL STATE AND FEDERAL REGISTRATIONS, AND MUST PROVIDE DESCRIPTIONS OF THEIR PROGRAMS, UNITS OF SERVICE AND EXPECTED OUTCOMES, AND DETAILED FINANCIAL INFORMATION. REQUIRED REPORTS ENSURE ACCOUNTABILITY.

4b (Code:) (Expenses \$ 2,189,819. including grants of \$ 1,973,679.) (Revenue \$)
SCHOLARSHIPS-THE COMMUNITY FOUNDATION IS ONE OF THE LARGEST PROVIDERS OF SCHOLARSHIPS IN FREDERICK COUNTY, AND ADMINISTERS THE TRUMPOWER SCHOLARSHIPS FOR CARROLL COUNTY RESIDENTS. SCHOLARSHIPS ARE AWARDED TO INDIVIDUALS PURSUING EDUCATION PAST HIGH SCHOOL, INCLUDING TWO AND FOUR-YEAR COLLEGES AND UNIVERSITIES, TRADE AND TECHNICAL SCHOOLS, MASTERS AND DOCTORAL PROGRAMS, AND CERTIFICATIONS. STUDENTS MAY APPLY FOR SCHOLARSHIPS DURING ANY YEAR OF THEIR ACADEMIC CAREERS, INCLUDING NON-TRADITIONAL STUDENTS WHO DID NOT BEGIN THEIR POST-SECONDARY STUDIES IMMEDIATELY FOLLOWING HIGH SCHOOL. THE COMMUNITY FOUNDATION'S VOLUNTEER SCHOLARSHIP COMMITTEE REVIEWS ALL APPLICATIONS AND SELECTS RECIPIENTS THAT BEST MATCH THE CRITERIA SET FORTH BY THE DONOR WHEN THE SCHOLARSHIP FUND WAS ESTABLISHED. SCHOLARSHIPS ARE AVAILABLE FOR

4c (Code:) (Expenses \$ 1,093,051. including grants of \$ 1,010,774.) (Revenue \$)
IMPACT GRANTS - THE COMMUNITY FOUNDATION ADMINISTERS GRANTS FROM FIELD OF INTEREST, DONOR-ADVISED AND DESIGNATED FUNDS ESTABLISHED BY DONORS WHO WANT TO CREATE IMPACT AND SUPPORT THEIR FAVORITE CAUSES. FIELD OF INTEREST FUND FOUNDERS SPECIFY GENERAL AREAS FOR THE COMMUNITY FOUNDATION TO DIRECT ITS GRANTMAKING, BUT NOT SPECIFIC NONPROFITS. DONOR-ADVISED FUND FOUNDERS RECOMMEND GRANTS FROM THEIR FUNDS, WITH THE COMMUNITY FOUNDATION BOARD OF TRUSTEES HAVING FINAL APPROVAL. GRANTS FROM DESIGNATED FUNDS SUPPORT THE COMMUNITY CAUSES IDENTIFIED IN THE AGREEMENT EXECUTED WHEN THE DONOR ESTABLISHED THE FUND WITH THE COMMUNITY FOUNDATION. ALL GRANTEEES MUST BE IN GOOD STANDING WITH ALL STATE AND FEDERAL REGISTRATIONS AND SOME MUST PROVIDE DESCRIPTIONS OF THE IMPACT OF THEIR PROGRAMS AND REPORTS TO ENSURE ACCOUNTABILITY.

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

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

4e Total program service expenses 8,373,011.

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

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Part IV Checklist of Required Schedules

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

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Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, 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		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		X
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	X	
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	52	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

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2020.05093 THE COMMUNITY FOUNDATION OF 01834_01

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

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	17	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</i>	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		X
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? <i>Note: See the instructions for additional information the organization must report on Schedule O.</i>		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		X

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

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

Section A. Governing Body and Management

	1a	1b	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	24			
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b Enter the number of voting members included on line 1a, above, who are independent		24		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2	X
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	X
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	X
6 Did the organization have members or stockholders?			6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?			8a	X
b Each committee with authority to act on behalf of the governing body?			8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9	X

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

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

Section C. Disclosure

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

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

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

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

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Form 990 (2020)

52-1488711

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MICHAEL H. DELAUTER CHAIRMAN	1.00	X		X				0.	0.	0.
(2) RACHEL I. MANDEL FIRST VICE CHAIRMAN	1.00	X		X				0.	0.	0.
(3) ALEJANDRO CANADAS SECOND VICE CHAIRMAN	1.00	X		X				0.	0.	0.
(4) JAMES SUMMERS TREASURER	1.00	X		X				0.	0.	0.
(5) VERONICA D. LOWE SECRETARY	1.00	X		X				0.	0.	0.
(6) NANCY THRASHER PAST CHAIRMAN	1.00	X		X				0.	0.	0.
(7) IAN BARTMAN TRUSTEE	1.00	X						0.	0.	0.
(8) KIMBERLY CHANEY TRUSTEE	1.00	X						0.	0.	0.
(9) GORDON COOLEY TRUSTEE	1.00	X						0.	0.	0.
(10) MIKE CUMBERLAND TRUSTEE	1.00	X						0.	0.	0.
(11) TAITIA ELLIOTT TRUSTEE	1.00	X						0.	0.	0.
(12) JEAN JOYCE TRUSTEE	1.00	X						0.	0.	0.
(13) DETRIC KEMP TRUSTEE	1.00	X						0.	0.	0.
(14) ASHLEIGH KIGGANS TRUSTEE	1.00	X						0.	0.	0.
(15) THOMAS LYNCH TRUSTEE	1.00	X						0.	0.	0.
(16) R. SEAN MCADAM TRUSTEE	1.00	X						0.	0.	0.
(17) LINDA MORGAN TRUSTEE	1.00	X						0.	0.	0.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) DARRYN NAYLIN TRUSTEE	1.00	X						0.	0.	0.
(19) NICOLE ORR TRUSTEE	1.00	X						0.	0.	0.
(20) RICHARD PEARRELL TRUSTEE	1.00	X						0.	0.	0.
(21) GREG POWELL TRUSTEE	1.00	X						0.	0.	0.
(22) BEATRICE REAVER TRUSTEE	1.00	X						0.	0.	0.
(23) DANIEL SCHIFFMAN TRUSTEE	1.00	X						0.	0.	0.
(24) LOUANNE WELGOSS TRUSTEE	1.00	X						0.	0.	0.
(25) ELIZABETH Y. DAY PRESIDENT & CEO	50.00			X				168,527.	0.	21,701.
(26) GAIL M. FITZGERALD CHIEF FINANCIAL OFFICER	50.00			X				131,368.	0.	18,993.
1b Subtotal								299,895.	0.	40,694.
c Total from continuation sheets to Part VII, Section A								122,597.	0.	12,293.
d Total (add lines 1b and 1c)								422,492.	0.	52,987.

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

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

Section B. Independent Contractors

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

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

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

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2020)

Form 990

Part VII	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees <i>(continued)</i>
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**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

Form 990 (2020)

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Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	50,000.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	8,239,073.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 1,476,574.				
	h Total. Add lines 1a-1f			8,289,073.			
Program Service Revenue			Business Code				
	2 a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			3,498,350.			3,498,350.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real (ii) Personal				
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities (ii) Other	49,016,347.			
	b Less: cost or other basis and sales expenses	7b		33,376,870.			
	c Gain or (loss)	7c		15,639,477.			
	d Net gain or (loss)			15,639,477.			15,639,477.
	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a					
	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	9a					
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
	11 a						
	b						
	c						
	d All other revenue						
e Total. Add lines 11a-11d							
12 Total revenue. See instructions			27,426,900.	0.	0.	19,137,827.	

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

Form 990 (2020)

52-1488711 Page **10**

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 8b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	5,717,761.	5,717,761.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	1,973,679.	1,973,679.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	395,687.	128,523.	55,019.	212,145.
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	794,570.	310,241.	176,599.	307,730.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	22,750.	10,599.	4,925.	7,226.
9 Other employee benefits	71,137.	32,257.	19,547.	19,333.
10 Payroll taxes	79,672.	28,922.	25,335.	25,415.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	24,673.	5,181.	19,492.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	999,445.		999,445.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	16,658.	7,565.	1,829.	7,264.
12 Advertising and promotion	25,009.	6,653.	18,071.	285.
13 Office expenses	55,352.	12,865.	14,222.	28,265.
14 Information technology	101,854.	55,325.	31,989.	14,540.
15 Royalties				
16 Occupancy	79,776.	28,719.	35,846.	15,211.
17 Travel	108.		61.	47.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	15,709.	8,000.	7,501.	208.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	29,519.	10,627.	15,941.	2,951.
23 Insurance	15,778.	6,460.	7,741.	1,577.
24 Other expenses. Itemize expenses not covered 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 O.)				
a ANNUAL REPORT & NEWSLET	34,885.	8,851.	22,545.	3,489.
b EVENTS	28,501.	12,031.	7,219.	9,251.
c OTHER EXPENSE	23,772.	7,413.	10,067.	6,292.
d DUES & SUBSCRIPTIONS	13,637.	1,339.	9,086.	3,212.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	10,519,932.	8,373,011.	1,482,480.	664,441.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

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

Form 990 (2020)

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	3,749,448.	2	2,976,239.
	3 Pledges and grants receivable, net	362,103.	3	221,508.
	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% 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	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	87,835.	9	95,149.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	660,447.		
	b Less: accumulated depreciation	519,449.	10c	140,998.
	11 Investments - publicly traded securities	127,172,073.	11	162,919,609.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	5,770,346.	15	7,446,782.
16 Total assets. Add lines 1 through 15 (must equal line 33)	137,281,850.	16	173,800,285.	
Liabilities	17 Accounts payable and accrued expenses	2,295,622.	17	2,466,199.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	9,916,564.	25	12,398,227.
	26 Total liabilities. Add lines 17 through 25	12,212,186.	26	14,864,426.
	Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> X and complete lines 27, 28, 32, and 33.		
27 Net assets without donor restrictions		101,440,206.	27	131,053,571.
28 Net assets with donor restrictions		23,629,458.	28	27,882,288.
Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
29 Capital stock or trust principal, or current funds			29	
30 Paid-in or capital surplus, or land, building, or equipment fund			30	
31 Retained earnings, endowment, accumulated income, or other funds			31	
32 Total net assets or fund balances		125,069,664.	32	158,935,859.
33 Total liabilities and net assets/fund balances		137,281,850.	33	173,800,285.

Form **990** (2020)

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

Form 990 (2020)

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	27,426,900.
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,519,932.
3	Revenue less expenses. Subtract line 2 from line 1	3	16,906,968.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	125,069,664.
5	Net unrealized gains (losses) on investments	5	18,320,273.
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	-1,361,046.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	158,935,859.

Part XII Financial Statements and Reporting

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

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

Form **990** (2020)

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Employer identification number	52-1488711
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Part I	Reason for Public Charity Status. (All organizations must complete this part.) See instructions.
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The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

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

THE COMMUNITY FOUNDATION OF FREDERICK

Schedule A (Form 990 or 990-EZ) 2020 COUNTY MARYLAND, INC.

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4539653.	6047669.	4955711.	9466029.	8289073.	33298135.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	4539653.	6047669.	4955711.	9466029.	8289073.	33298135.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2026233.
6 Public support. Subtract line 5 from line 4.						31271902.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	4539653.	6047669.	4955711.	9466029.	8289073.	33298135.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2743582.	2886406.	4038142.	4263689.	3498350.	17430169.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						50728304.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)).	14	61.65 %
15 Public support percentage from 2019 Schedule A, Part II, line 14	15	62.24 %
16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2020

THE COMMUNITY FOUNDATION OF FREDERICK

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2020.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

b **33 1/3% support tests - 2019.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

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Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 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.)		

THE COMMUNITY FOUNDATION OF FREDERICK

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Part IV Supporting Organizations (continued)

- 11** Has the organization accepted a gift or contribution from any of the following persons?
- a** A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?
 - b** A family member of a person described in line 11a above?
 - c** A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in **Part VI**.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 1** Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2** Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 1** Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 1** Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2** Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s).
- 3** By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard.

	Yes	No
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

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

2 Activities Test. Answer lines 2a and 2b below.

- a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI** identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b** Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

	Yes	No
2a		
2b		
3a		
3b		

3 Parent of Supported Organizations. Answer lines 3a and 3b below.

- a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in **Part VI**.
- b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

THE COMMUNITY FOUNDATION OF FREDERICK

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	(B) Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2020

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

Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6 Other distributions (describe in Part VI). See instructions.	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8	
9 Distributable amount for 2020 from Section C, line 6	9	
10 Line 8 amount divided by line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020

THE COMMUNITY FOUNDATION OF FREDERICK

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Part VI

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

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

2020

**Open to Public
Inspection**

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

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

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

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

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

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

Name of organization	THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC.	Employer identification number	52-1488711
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

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

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

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

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

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

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

Schedule C (Form 990 or 990-EZ) 2020

LHA

032041 12-02-20

THE COMMUNITY FOUNDATION OF FREDERICK

Schedule C (Form 990 or 990-EZ) 2020 **COUNTY MARYLAND, INC.**

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2020

THE COMMUNITY FOUNDATION OF FREDERICK

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		275.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			275.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV Supplemental Information

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

PART II-B, LINE 1, LOBBYING ACTIVITIES:

LETTERS AND EMAILS WERE SENT AND TELEPHONE CALLS WERE MADE TO ELECTED

OFFICIALS REGARDING:

1-YOUTH HOMELESS ACT FOR THE STATE LEGISLATURE

2-FREDERICK COUNTY CRISIS STABILIZATION

3-AMERICAN RESCUE PLAN FUNDING IDEAS

Schedule C (Form 990 or 990-EZ) 2020

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2020

Open to Public
Inspection

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

Employer identification number
52-1488711

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	145	632
2 Aggregate value of contributions to (during year)	1,754,334.	5,273,297.
3 Aggregate value of grants from (during year)	937,802.	6,761,888.
4 Aggregate value at end of year	18,770,835.	139,739,932.

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☒ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☒ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

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

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

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

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

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

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

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

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

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

(ii) Assets included in Form 990, Part X ▶ \$

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

a Revenue included on Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

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

Schedule D (Form 990) 2020

032051 12-01-20

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

- 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):

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

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

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

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

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

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

	Amount
1c	
1d	
1e	
1f	

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	11,864,129.	11,605,973.	11,336,475.	11,570,024.	11,675,359.
b Contributions	10,902.	600,478.	58,041.	74,795.	68,273.
c Net investment earnings, gains, and losses	1,713,971.	254,955.	694,137.	202,255.	545,958.
d Grants or scholarships	446,838.	499,885.	482,680.	510,599.	702,167.
e Other expenditures for facilities and programs		97,392.			17,399.
f Administrative expenses					
g End of year balance	13,142,164.	11,864,129.	11,605,973.	11,336,475.	11,570,024.

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

- | | | | | |
|---|-------------------------------------|---|---------|---|
| a | Board designated or quasi-endowment | ▶ | _____ | % |
| b | Permanent endowment | ▶ | 78.5090 | % |
| c | Term endowment | ▶ | 21.4910 | % |

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

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

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

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

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

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

Description of property	(a) Cost or other basis (Investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		393,004.	285,308.	107,696.
d Equipment		267,443.	234,141.	33,302.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)			140,998.
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Schedule D (Form 990) 2020

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

Schedule D (Form 990) 2020

52-1488711 Page **3**

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LIABILITIES UNDER SPLIT-INTEREST	
(3) AGREEMENTS	2,404,626.
(4) FUNDS HELD FOR OTHERS (FAS 136)	9,993,601.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

12,398,227.

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

Schedule D (Form 990) 2020

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Schedule D (Form 990) 2020

52-1488711 Page 4

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

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

1	Total revenue, gains, and other support per audited financial statements	1	43,192,933.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	18,320,273.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	1,029,523.
e	Add lines 2a through 2d	2e	19,349,796.
3	Subtract line 2e from line 1	3	23,843,137.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	999,445.
b	Other (Describe in Part XIII.)	4b	2,584,318.
c	Add lines 4a and 4b	4c	3,583,763.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	27,426,900.

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

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

1	Total expenses and losses per audited financial statements	1	9,250,986.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	166,743.
e	Add lines 2a through 2d	2e	166,743.
3	Subtract line 2e from line 1	3	9,084,243.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	999,445.
b	Other (Describe in Part XIII.)	4b	436,244.
c	Add lines 4a and 4b	4c	1,435,689.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	10,519,932.

Part XIII Supplemental Information.

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

PART V, LINE 4:

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

PART X, LINE 2:

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

Part XIII Supplemental information (continued)

NOT MEET A "MORE-LIKELY-THAN-NOT" THRESHOLD OF BEING SUSTAINED BY THE
APPLICABLE TAX AUTHORITY. MANAGEMENT DOES NOT BELIEVE IT HAS TAKEN ANY TAX
POSITIONS THAT WOULD NOT MEET THIS THRESHOLD.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN CSV	9,107.
RELATED ORGANIZATION INCOME	242,495.
CHANGE IN PV OF FUTURE INTEREST	777,921.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	1,029,523.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

FUNDS HELD FOR OTHERS	2,584,318.
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PART XII, LINE 2D - OTHER ADJUSTMENTS:

RELATED ORGANIZATION EXPENSES	166,743.
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PART XII, LINE 4B - OTHER ADJUSTMENTS:

FUNDS HELD FOR OTHERS	436,244.
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SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Employer identification number

52-1488711

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

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

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	ENDOWMENT INVESTMENTS OFF SHORE		7,733,076.
3 a Subtotal	0	0			7,733,076.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			7,733,076.

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

Schedule F (Form 990) 2020

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

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)

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

3 Enter total number of other organizations or entities

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☒ Yes ☐ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☒ Yes ☐ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* ☐ Yes ☒ No

Schedule F (Form 990) 2020

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

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization THE COMMUNITY FOUNDATION OF COUNTY MARYLAND, INC.	Employer identification number 52-1488711
Part I General Information on Grants and Assistance	

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ADVENTIST HEALTH CARE, INC. 9901 MEDICAL CENTER DR ROCKVILLE, MD 20850	52-1532556	501(C)(3)	29,677.	0.			SHADY GROVE HOSPITAL UNRESTRICTED
ADVOCATES FOR HOMELESS FAMILIES, INC. - 216 ABRECHT PL - FREDERICK, MD 21701	52-1591139	501(C)(3)	57,297.	0.			CASE MGR, TRANSPORTATION, CHILDCARE ASSIST, EMERGENCY FINANCIAL ASSIST, AFTER-SCHOOL AND SERVICE COORDINATION
ADVOCATES FOR THE AGING OF FREDERICK COUNTY MD INC. - 8222 GLENDALE DR. - FREDERICK, MD 21702	46-5336766	501(C)(3)	48,065.	0.			MODEL FOR LOW-INCOME SENIORS IN SINGLE-UNIT HOUSING, PROGRAMS TO HELP
ALL SAINTS EPISCOPAL CHURCH 106 WEST CHURCH STREET FREDERICK, MD 21701	52-0610441	501(C)(3)	7,390.	0.			BUILDING MAINTENANCE, UNRESTRICTED
AMERICAN NATIONAL RED CROSS 431 18TH ST, NW WASHINGTON, DC 20013	53-0196605	501(C)(3)	6,927.	0.			FINANCIAL EMERGENCY SUPPORT AND DIRECT SERVICES FOR RESIDENTS OF FREDERICK COUNTY,
AMERICAN'S JUNIOR MISS SCHOLARSHIP FOUNDATION, INC - 751 GOVERNMENT ST - MOBILE, AL 36602	23-7438720	501(C)(3)	47,434.	0.			SCHOLARSHIPS FOR FREDERICK, CARROLL COUNTIES AND SOUTHERN MD STUDENTS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

119.

0.

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) 2020

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

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARC OF FREDERICK COUNTY, INC. 620-A RESEARCH DR FREDERICK, MD 21703-8619	52-6055211	501(C)(3)	106,176.	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 & YOUTH MINISTRY
ASIAN AMERICAN CENTER OF FREDERICK 1080 WEST PATRICK ST. SUITE 16 FREDERICK, MD 21703	86-1140556	501(C)(3)	22,155.	0.			SOUTH ASIAN SENIOR SERVICES, CITIZENSHIP INTEGRATED SERVICES, MEDICAL, HOUSING &
BETH SHOLOM CONGREGATION 1011 N. MARKET STREET FREDERICK, MD 21701	53-0196574	501(C)(3)	5,023.	0.			HIGH HOLIDAY BOOKS
BETTER TOGETHER 15275 COLLIER BLVD. NAPLES, FL 34119	47-5591391	501(C)(3)	10,000.	0.			UNRESTRICTED
BLESSINGS IN A BACKPACK, INC. P.O. BOX 3508 FREDERICK, MD 21705	26-1964620	501(C)(3)	15,969.	0.			WEEKEND FOOD BACKPACKS FOR LOW-INCOME FCPS STUDENTS AND FCPS SUCCESS PROGRAM, UNRESTRICTED
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, VIRTUAL EDUCATION SUPPORT, UNRESTRICTED
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)	30,884.	0.			UNRESTRICTED

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**THE COMMUNITY FOUNDATION OF FREDERICK
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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CARE NET PREGNANCY CENTER OF FREDERICK COUNTY - 707 NORTH MARKET ST. - FREDERICK, MD 21701	52-1322581	501(C)(3)	7,000.	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)	11,657.	0.			UNRESTRICTED
CENTRO HISPANO DE FREDERICK, INC 5 WILLOWDALE DR FREDERICK, MD 21702	30-0430736	501(C)(3)	43,954.	0.			GOLDEN YEARS PROGRAM VAN RENTAL, PROGRAMS FOR LIMITED ENGLISH PROFICIENCY YOUNG MOTHERS
CHILDREN OF INCARCERATED PARENTS PARTNERSHIP INC. - PO BOX 791 - FREDERICK, MD 21705	27-3552072	501(C)(3)	32,500.	0.			RESOURCES FOR WOMEN AND CAREGIVERS OF IMPACTED CHILDREN, CONTINUING EDUCATION FOR FAMILY
CHILDREN'S HOSPITAL FOUNDATION 801 ROEDER RD. #3 SILVER SPRING, MD 20910	52-1640402	501(C)(3)	90,000.	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)	253,036.	0.			UNRESTRICTED
CITIZENS CARE & REHABILITATION CENTER AND MONTEVUE HOME - 1920 ROSEMONT AVE. - FREDERICK, MD 21702	52-6000943	FREDERICK COUNTY	17,869.	0.			TO PROVIDE EQUIPMENT FOR ELDERLY
CITY YOUTH MATRIX 5710 KENT DR NEW MARKET, MD 21774	82-3087890	501(C)(3)	21,022.	0.			EXTRACURRICULARS AND EDUCATION, TRANSPORTATION, ALICE FAMILIES WITH HOME
COMMUNITY OPTIONS, INC 174 THOMAS JOHNSON DR SUITE 202 FREDERICK, MD 21702	22-2964056	501(C)(3)	9,000.	0.			SUPPORT FAMILIES IN NEED WITH SCHOLARSHIPS AND TRANSPORTATION TO YOUTH EXTRA-CURRICULAR

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COUNCIL ON FOUNDATIONS 1255 23RD ST NW SUITE 200 WASHINGTON, DC 20037	13-6068327	501(C)(3)	8,750.	0.			UNRESTRICTED
DAYBREAK ADULT DAY SERVICES 7819 ROCKY SPRINGS RD FREDERICK, MD 21702	52-1598993	501(C)(3)	9,000.	0.			RESPIRE SERVICES
DELAPLAINE VISUAL ARTS EDUCATION CENTER - 40 S. CARROLL STREET - FREDERICK, MD 21701	52-1481592	501(C)(3)	36,454.	0.			ART CLASSES FOR CHILDREN, SCHOLARSHIPS TO ELEMENTARY AGE CHILDREN TAKING ART INSTRUCTION, FLOWERS OVER FREDERICK PROJECT AND DOWNTOWN HOLIDAY LIGHTS, FEEDING FRONTLINE WORKERS DURING
DOWNTOWN FREDERICK PARTNERSHIP, INC. - 19 E. CHURCH ST. - FREDERICK, MD 21701	52-1682341	501(C)(3)	103,973.	0.			SCHOLARSHIPS FOR STUDENTS IN MIDDLETOWN, MD VALLEY PURSUING CAREERS IN MEDICAL/HEALTH FIELDS
DR. J. ELMER HARP MEDICAL CENTER, INC. - 400 EAST MAIN ST - MIDDLETOWN, MD 21769	52-1076100	501(C)(3)	11,579.	0.			UNRESTRICTED
ENDANGERED SPECIES THEATRE PROJECT 511 GRANT PL FREDERICK, MD 21702	84-2025864	501(C)(3)	7,000.	0.			MAINTENANCE & PRESERVATION OF BUILDINGS, UNRESTRICTED
EVANGELICAL LUTHERAN CHURCH 35 EAST CHURCH ST. FREDERICK, MD 21701	52-0627772	501(C)(3)	47,990.	0.			PRODUCTION COSTS FOR A DOCUMENTARY
FACTORY FARMING AWARENESS COALITION - 1569 SOLANO AVE. #518 - BERKELEY, CA 94707	82-4594246	501(C)(3)	10,500.	0.			SENIOR LIVING CAPITAL CAMPAIGN
FAHRNEY-KEEDY MEMORIAL HOME, INC. 8507 MAPLEVILLE RD BOONSBORO, MD 21713	52-0610464	501(C)(3)	5,000.	0.			

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FAMILY PARTNERSHIP OF FREDERICK COUNTY - 8420 GAS HOUSE PIKE STE. EE - FREDERICK, MD 21701	52-6000943	FREDERICK COUNTY	45,533.	0.			FAMILY RESILIENCE PROGRAM, CHILDREN'S GROWTH AND DEVELOPMENT PROJECT, CHILD AND FAMILY
FEBRUARY STAR SANCTUARY 3910 AUSHERMAN RD KNOXVILLE, MD 21758	45-3941793	501(C)(3)	6,167.	0.			CARING FOR CATS OF THE HOMELESS AND WOMEN FACING DOMESTIC VIOLENCE OR HOUSING CRISIS, TRAP
FREDERICK CHURCH OF THE BRETHREN 201 FAIRVIEW AVENUE FREDERICK, MD 21701	52-0651674	501(C)(3)	14,129.	0.			GENERAL FUND, BUILDING FUND, DEACON FUND, SCHOLARSHIPS FOR CHILDREN ATTENDING THE LEARNING
FREDERICK COMMUNITY ACTION AGENCY 100 SOUTH MARKET ST. FREDERICK, MD 21701	52-1036628	FREDERICK COUNTY	16,059.	0.			SCHOOL BASED HEALTH CENTER, COMMUNITY ACTION HEALTH CENTER, FOOD BANK AND BACKPACKS
FREDERICK COMMUNITY COLLEGE FOUNDATION, INC. - 7932 OPOSSUMTOWN PIKE - FREDERICK, MD 21702	52-1231768	501(C)(3)	60,110.	0.			STUDENT SUCCESS PROGRAM, SCHOLARSHIPS, PROJECT FORWARD STEP, UNRESTRICTED
FREDERICK COUNTY 4-H CAMP CENTER 3702 BASFORD RD FREDERICK, MD 21703	47-2371933	501(C)(3)	6,791.	0.			MAINTENANCE OF THE CAMP AND FOR PROGRAMS AT THE CAMP, UNRESTRICTED
FREDERICK COUNTY DEPARTMENT OF SOCIAL SERVICES - 1888 NORTH MARKET ST - FREDERICK, MD 21701	52-6000943	GOVT	17,500.	0.			HOLIDAY SUPPORT FOR FOSTER CHILDREN AND FRAGILE SENIORS
FREDERICK COUNTY LANDMARKS FOUNDATION, INC. - 1110 ROSEMONT AVE. - FREDERICK, MD 21701	23-7241926	501(C)(3)	18,197.	0.			HISTORIC PRESERVATION THURMONT LIBRARY, BOOKS, CHILDREN'S PROGRAM, TRAINING, MATERIALS AND ACTIVITIES FOR THE
FREDERICK COUNTY PUBLIC LIBRARIES 110 EAST PATRICK ST. FREDERICK, MD 21701	52-0591537	501(C)(3)	94,398.	0.			

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FREDERICK COUNTY PUBLIC SCHOOLS 191 SOUTH EAST ST. FREDERICK, MD 21701	52-6000941	501(C)(3)	18,630.	0.			MUSIC EQUIPMENT AND MATERIALS, CONSTRUCTION TRADES SCHOLARSHIPS, SUPPLIES, TOOLS AND
FREDERICK COUNTY SENIOR SERVICES DIVISION - 1440 TANEY AVE. - FREDERICK, MD 21702	52-6000943	FREDERICK COUNTY	9,323.	0.			MEALS ON WHEELS
FREDERICK COUNTY, MD GOVERNMENT 12 EAST CHURCH ST. FREDERICK, MD 21701	52-6000943	GOVT	241,721.	0.			SWIMMING, SUMMER AND/OR SOCCER PROGRAMS FOR LOW-INCOME HOUSEHOLDS, MIDDLETOWN PARK PAVILION,
FREDERICK HEALTH HOSPICE 1 FREDERICK HEALTH WAY FREDERICK, MD 21701	52-0591612	501(C)(3)	61,610.	0.			UNRESTRICTED, CAMP JAMIE EXPENSES, KLINE HOSPICE HOUSE
FREDERICK HEALTH HOSPITAL, INC. 400 WEST SEVENTH ST. FREDERICK, MD 21701-4593	52-0591612	501(C)(3)	1,872,023.	0.			GOOD SAMARITAN, EMERGENCY SERVICES, HURWITZ BREAST CANCER FUND, YOUTH APPRENTICESHIP PROGRAM,
FREDERICK RESCUE MISSION, INC. 419 WEST SOUTH ST. PO BOX 3389 FREDERICK, MD 21701	52-0813371	501(C)(3)	127,772.	0.			FAITH HOUSE, FOOD COORDINATOR, CHANGED LIFE RECOVERY PROGRAM CASE MANAGER, EDUCATIONAL
FRIENDS FOR NEIGHBORHOOD PROGRESS, INC. - 100 S. MARKET ST. - FREDERICK, MD 21701	52-1036628	501(C)(3)	5,533.	0.			PROVIDE MEALS AND FOOD TO ANYONE IN NEED, FOOD BANK
FRIENDS OF BAKER PARK, INC. PO BOX 4146 FREDERICK, MD 21705	52-1759639	501(C)(3)	12,000.	0.			CULLER LAKE PROJECT
FRIENDS OF CATHOLIC EDUCATION INC 116 E 2ND STREET FREDERICK, MD 21701	52-1659600	501(C)(3)	8,680.	0.			SCHOLARSHIPS

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GIRL SCOUT COUNCIL OF THE NATION'S CAPITAL - 4301 CONNECTICUT AVE., NW SUITE M-2 - WASHINGTON, DC 20008	54-0732966	501(C)(3)	11,214.	0.			GIRL SCOUTS IN FREDERICK COUNTY
GLADE UNITED CHURCH OF CHRIST REV. PHILIP N. CURRAN 21 FULTON AVENUE, P.O. BOX 236 - WALKERSVILLE, MD 2179	52-0679615	501(C)(3)	10,960.	0.			UNRESTRICTED AND CEMETERY
GLADE VALLEY COMMUNITY SERVICES, INC. - P.O. BOX 655 - WALKERSVILLE, MD 21793	20-1946411	501(C)(3)	6,275.	0.			EDUCATIONAL SUPPORT FOR RESIDENTS, WALKERSVILLE FOOD BANK, UNRESTRICTED
GOOD SHEPHERD EVANGELICAL LUTHERAN CHURCH - 1415 W. 7TH ST. - FREDERICK, MD 21701	52-6019540	501(C)(3)	7,000.	0.			ELICA WORLD HUNGER, UNRESTRICTED
GOODWILL INDUSTRIES OF THE MONOCACY VALLEY, INC. - 400 EAST CHURCH STREET - FREDERICK, MD 21701	23-7047548	501(C)(3)	9,724.	0.			CAPITAL IMPROVEMENT FUND, PROGRAMS THAT TRAIN & EDUCATION PERSONS WITH DISABILITIES,
GRACE UNITED CHURCH OF CHRIST 25 EAST SECOND STREET FREDERICK, MD 21701	52-0607994	501(C)(3)	8,669.	0.			UNRESTRICTED
GRACEHAM MORAVIAN CHURCH 8231-A ROCKY RIDGE RD THURMONT, MD 21788	52-0607996	501(C)(3)	61,765.	0.			UNRESTRICTED AND CEMETERY
HABITAT FOR HUMANITY OF FREDERICK COUNTY - 117 E CHURCH ST - FREDERICK, MD 21701	52-1820647	501(C)(3)	18,855.	0.			HOME REPAIRS AND MODIFICATIONS FOR THOSE IN NEED, UNRESTRICTED
HEARTLY HOUSE, INC. P.O. BOX 857 FREDERICK, MD 21705	52-1186250	501(C)(3)	47,265.	0.			CHILDREN'S SERVICES AND PROGRAMS, SERVICE COORDINATION EXPANSION, DIRECT SUPPORT FOR WOMEN,

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HELPER INTERNATIONAL P.O. BOX 8058 LITTLE ROCK, AR 72003-8058	35-1019477	501(C)(3)	5,000.	0.			UNRESTRICTED
HISTORICAL SOCIETY OF FREDERICK COUNTY, INC. - 24 EAST CHURCH ST. - FREDERICK, MD 21701	52-6050333	501(C)(3)	51,095.	0.			MAINTENANCE & PRESERVATION OF BUILDINGS, MATERIALS, TRAINING AND ACTIVITIES
HOMWOOD FOUNDATION, INC. P.O. BOX 250 WILLIAMSPORT, MD 21795	52-1892689	501(C)(3)	31,738.	0.			UNRESTRICTED FOR CROMLAND FARMS, THE BENEVOLENCE FUND, ALZHEIMER UNIT FOR SERVICES TO PERSONS WITH SCHOLARSHIPS AND
HOOD COLLEGE 401 ROSEMONT AV FREDERICK, MD 21701	52-0591608	501(C)(3)	59,504.	0.			FINANCIAL AID, CAMPUS GROUNDS BEAUTIFICATION, GEORGE DELAPLAINE SCHOOL
HOUSING AUTHORITY OF THE CITY OF FREDERICK - 209 MADISON ST. - FREDERICK, MD 21701	52-6001395	501(C)(3)	52,572.	0.			ASSISTANCE WITH TRANSPORTATION, PROGRAMS FOR WOMEN, EARLY CHILDHOOD PROGRAMS,
HOWARD CHAPEL RIDGEVILLE UNITED METHODIST CHURCH - 1970 LONG CORNER RD. - MOUNT AIRY, MD 21771	52-1079627	501(C)(3)	292,059.	0.			CHURCH PROGRAMS
I BELIEVE IN ME, INC. PO BOX 4255 FREDERICK, MD 21705	82-2072961	501(C)(3)	12,391.	0.			EDUCATIONAL SUPPORT FOR AT RISK YOUTH, UNRESTRICTED
JUSTICE JOBS OF MARYLAND, INC 22 S. MARKET ST., STE 210 FREDERICK, MD 21701	82-2051054	501(C)(3)	20,000.	0.			PROGRAM MANAGER FOR EMPLOYMENT PROGRAM TO BENEFIT SUD AFFECTED PERSONS
LITERACY COUNCIL OF FREDERICK COUNTY, INC. - 110 EAST PATRICK ST. - FREDERICK, MD 21701	52-1100228	501(C)(3)	18,416.	0.			MATERIALS FOR WOMEN AND FAMILIES WITH CHILDREN LITERACY PROGRAMS, ENGLISH CLASSES FOR

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LOCUST VALLEY FIRST CHURCH OF GOD 8305 HOLLOW ROAD MIDDLETOWN, MD 21769	52-1686940	501(C)(3)	23,373.	0.			IMPROVEMENT AND MAINTENANCE TO PARKING AREA AND BUILDINGS
MARYLAND 4-H CLUB FOUNDATION, INC. 8020 GREENMEAD DR. COLLEGE PARK, MD 20815	52-6056016	501(C)(3)	29,677.	0.			UNRESTRICTED FOR MONTGOMERY COUNTY 4-H CLUB
MARYLAND PFA FOUNDATION, INC. P.O. BOX 3241 SILVER SPRING, MD 20918-3241	52-1354382	501(C)(3)	31,342.	0.			UNRESTRICTED AND FOR CHAPTER CLOSEST TO POOLESVILLE, MD
MARYLAND FOOD BANK 2200 HALETHORPE FARMS RD BALTIMORE, MD 21227	52-1135690	501(C)(3)	6,000.	0.			SENIOR PANTRY PROGRAM
MCDANIEL COLLEGE 2 COLLEGE HILL WESTMINSTER, MD 21157-4390	52-0591694	501(C)(3)	5,704.	0.			UNRESTRICTED AND SCHOLARSHIP FUND
MENTAL HEALTH ASSOCIATION OF FREDERICK COUNTY, INC. - 226 SOUTH JEFFERSON ST - FREDERICK, MD 21701	52-0968521	501(C)(3)	87,095.	0.			PARENT COACHING EXPENSES, FAMILY SUPPORT CASA OF FREDERICK COUNTY, CRISIS SERVICES, EMPLOYEE
MISSION OF MERCY, INC. 22 S. MARKET ST SUITE 6D FREDERICK, MD 21701	86-0704883	501(C)(3)	77,164.	0.			DENTAL CARE, MEDICATIONS AND MEDICAL CARE FOR WOMEN AND VETERANS, SUD PATIENT CARE,
MONTGOMERY COUNTY PUBLIC SCHOOLS 8501 HUNGERFORD DR., #149 ROCKVILLE, MD 20850	52-1804509	501(C)(3)	59,354.	0.			SCHOLARSHIP FOR NEEDY STUDENTS AT POOLESVILLE HS
MONTGOMERY UNITED METHODIST CHURCH 28325 KEMP TOWN RD. DAMASCUS, MD 20872	52-1320691	501(C)(3)	12,500.	0.			UNRESTRICTED

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MOUNTAIN VIEW UNITED METHODIST CHURCH - 11501 MOUNTAIN VIEW RD - DAMASCUS, MD 20872	52-1200821	501(C)(3)	19,286.	0.			UNRESTRICTED
NATIONAL LUTHERAN HOME FOR THE AGED - 9701 VIERS DR - ROCKVILLE, MD 20850	53-0196624	501(C)(3)	16,760.	0.			UNRESTRICTED
NATIONAL OPERA ASSOCIATION, INC. P.O. BOX 60869 CANYON, TX 79016-0869	38-6089684	501(C)(3)	5,000.	0.			UNRESTRICTED
NET ZERO 4627 VERPLANCK PLACE NW WASHINGTON, DC 20016	84-3583947	501(C)(3)	9,106.	0.			UNRESTRICTED
NEW HOPE UNITED METHODIST CHURCH OF GREATER BRUNSWICK - 7 SOUTH MARYLAND AVENUE P.O. BOX 217 - BRUNSWICK, MD 21716	52-0683373	501(C)(3)	5,786.	0.			UNRESTRICTED
OTHER VOICES, INC 244 S. JEFFERSON ST. SUITE B FREDERICK, MD 21701	52-2046378	501(C)(3)	5,000.	0.			UNRESTRICTED
PARTNERS IN CARE, INC 8151 RICHIE HIGHWAY, STE C PASADENA, MD 21122	52-1911806	501(C)(3)	23,500.	0.			SERVICES FOR ELDERLY IN FREDERICK COUNTY
PEOPLE FOR THE ETHICAL TREATMENT OF ANIMALS (PETA) - 501 FRONT ST - NORFOLK, VA 23510	52-1218336	501(C)(3)	32,200.	0.			UNRESTRICTED
PHOENIX FOUNDATION OF MARYLAND PO BOX 4193 FREDERICK, MD 21705	83-0874099	501(C)(3)	36,473.	0.			RECOVERY HS FOR YOUTH WITH SUDS, SECURITY & TECHNOLOGY FOR THE ACADEMY

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PHYSICIANS COMMITTEE FOR RESPONSIBLE MEDICINE - 5100 WISCONSIN AVE NW SUITE 400 - WASHINGTON, DC 20016	52-1394893	501(C)(3)	19,950.	0.			UNRESTRICTED
PLANNED PARENTHOOD OF MARYLAND, INC. - 330 N. HOWARD ST. - BALTIMORE, MD 21201	52-0607930	501(C)(3)	6,250.	0.			STI SCREENING AND TREATMENT SERVICES PROGRAM AND OPERATING OF FREDERICK COUNTY CLINIC
PLEASANT VIEW CHURCH OF THE BRETHREN - 6213 PICNIC WOODS RD. P.O. BOX 154 - JEFFERSON, MD 21755	36-2167026	501(C)(3)	5,471.	0.			UNRESTRICTED
PRESERVATION AND ENHANCEMENT FUND OF MOUNT OLIVET CEMETERY - 515 S MARKET ST - FREDERICK, MD 21701	47-4247955	501(C)(3)	20,471.	0.			UNRESTRICTED
REBUILDING TOGETHER FREDERICK COUNTY - 26 E 2ND ST - FREDERICK, MD 21701	52-1892763	501(C)(3)	20,667.	0.			SAFE & HEALTHY AGING IN PLACE
RELIGIOUS COALITION FOR EMERGENCY HUMAN NEEDS - 27 DEGRANGE ST. - FREDERICK, MD 21701	52-1449375	501(C)(3)	132,796.	0.			HOUSING STABILIZATION EXPENSES, HOMELESS SHELTER EXPENSES, HOMELESSNESS PREVENTION
SAINT JOHN'S CATHOLIC PREP PO BOX 909 BUCKEYSTOWN, MD 21717	52-0954961	501(C)(3)	11,203.	0.			SCHOLARSHIP FUNDS AND UNRESTRICTED
SALVATION ARMY 223 W FIFTH ST P.O. BOX 1003 FREDERICK, MD 21702	22-2406433	501(C)(3)	54,067.	0.			EMERGENCY FOOD AND SHELTER PROGRAMS PROVIDED IN FREDERICK COUNTY MD, DAY SHELTER PROGRAM,
SAMARITAN'S PURSE P.O. BOX 3000 BOONE, NC 28607	58-1437002	501(C)(3)	5,000.	0.			UNRESTRICTED

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SECOND CHANCES GARAGE, INC. 528 N MARKET ST. FREDERICK, MD 21701	27-1336325	501(C)(3)	23,000.	0.			SUBSIDIZED CAR REPAIRS FOR WOMEN PROGRAM AND ALICE HOUSEHOLDS, REFURBISHED PROGRAM FOR
SETON CENTER, INC. 16840 S. SETON AVE. EMMITSBURG, MD 21727	52-1182284	501(C)(3)	18,000.	0.			DEPAUL DENTAL PROGRAM AND DENTAL SERVICES, BUILDING A BRIDGE FOR ALICE FAMILIES PROGRAM AND
SHIP OF FREDERICK COUNTY P.O. BOX 1629 FREDERICK, MD 21702	47-2272768	501(C)(3)	37,549.	0.			NEW HORIZONS FREDERICK SUMMER PROGRAM EXPENSES AND ACADEMY LIFE SKILLS CURRICULUM, EMERGENCY
SPANISH SPEAKING COMMUNITY OF MD, INC. - 329 S JEFFERSON ST - FREDERICK, MD 21701	52-0889386	501(C)(3)	18,607.	0.			CASE MGR, TRANSPORTATION, CRITICAL SERVICES PARTNERSHIP WITH FREDERICK COUNTY PUBLIC
ST LABRE INDIAN SCHOOL 1000 TONGUE RIVER ROAD P.O. BOX 216 ASHLAND, MT 59003	81-0244542	501(C)(3)	6,175.	0.			UNRESTRICTED
ST PAUL'S EVANGELICAL LUTHERAN CHURCH - 19 W. PENNSYLVANIA AVE. - WALKERSVILLE, MD 21793	52-6041763	501(C)(3)	50,126.	0.			HEATING FUEL AND ELECTRICITY EXPENSES, UNRESTRICTED
ST. JOHN'S CEMETERY, INC. 116 EAST 2ND ST FREDERICK, MD 21701	52-1746331	501(C)(3)	25,218.	0.			PRESERVATION & MAINTENANCE
SUPPORTING OLDER ADULTS THROUGH RESOURCES, INC. - P.O. BOX 1603 - FREDERICK, MD 21702	46-3716967	501(C)(3)	20,000.	0.			SENIORS IN NEED
TEAM H.O.P.E., INC. P.O. BOX 3825 FREDERICK, MD 21705	32-0347591	501(C)(3)	41,615.	0.			TO PROVIDE FREE 3-D MAMMOGRAMS, SONOGRAMS, CLINICAL BREAST EXAMS, PET/CT SCANS, AND

Schedule I (Form 990)

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

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE AARCH SOCIETY OF FREDERICK COUNTY - P.O. BOX 3903 - FREDERICK, MD 21705	32-0213170	501(C)(3)	13,805.	0.			UPGRADE WEBSITE AND ENHANCE SOCIAL MEDIA PRESENCE, GREAT NEW LOGO AND WINDOW GRAPHICS,
THE CITY OF FREDERICK 101 N. COURT STREET FREDERICK, MD 21701	52-6000789	FREDERICK COUNTY	33,505.	0.			FREDERICK BOCCIE BALL COURTS
THE FREDERICK CENTER, INC. PO BOX 3231 FREDERICK, MD 21705-3231	46-1705400	501(C)(3)	11,479.	0.			YOUTH PROGRAMS, SUPPORT FOR FREDERICK COUNTY RESIDENTS LIVING WITH HIV; HOME TESTING,
THE MONOCACY FOUNDATION INC. 620-B RESEARCH CT FREDERICK, MD 21703	52-1953383	501(C)(3)	9,342.	0.			TO PROVIDE FUNDS TO 20 ELIGIBLE SINGLE MOTHERS AND SINGLE WOMEN IN FREDERICK COUNTY FOR
THE RANCH 7902 FINGERBOARD RD FREDERICK, MD 21704	52-1055741	501(C)(3)	6,095.	0.			UNRESTRICTED
UNITED WAY OF FREDERICK COUNTY, INC. - 629 NORTH MARKET ST - FREDERICK, MD 21701	52-0607973	501(C)(3)	70,320.	0.			UNITY CAMPAIGN, BOYS & GIRLS CLUB TO CREATE STEM LAB AT NEW FACILITY, UNRESTRICTED
UNIVERSITY OF MARYLAND COLLEGE PARK FOUNDATION INC. - 1221 SYMONS HALL - COLLEGE PARK, MD 20742	52-2197313	501(C)(3)	29,677.	0.			UNIVERSITY OF MD COLLEGE OF AGRICULTURE
WALKERSVILLE UNITED METHODIST CHURCH - 22 MAIN ST. - WALKERSVILLE, MD 21793	52-6043801	501(C)(3)	8,425.	0.			UNRESTRICTED
WALKERSVILLE VOLUNTEER RESCUE COMPANY, INC. - 73 FREDERICK STREET P.O BOX 202 - WALKERSVILLE, MD 21793	52-1136388	501(C)(3)	50,000.	0.			DEBT REDUCTION OR PURCHASE OF NEW EQUIPMENT

Schedule I (Form 990)

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Schedule I (Form 990)

Page 2Page 2

(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	334	1,973,679.	0.		

100

100

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Schedule I (Form 990)

52-1488711 Page 2

Part IV Supplemental Information

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

NAME OF ORGANIZATION OR GOVERNMENT:

ADVOCATES FOR THE AGING OF FREDERICK COUNTY MD INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SERVICE COORDINATION MODEL FOR
LOW-INCOME SENIORS IN SINGLE-UNIT HOUSING, PROGRAMS TO HELP SENIORS AGE
IN PLACE, GRAB BAR PROGRAM, 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: SOUTH ASIAN SENIOR SERVICES,
CITIZENSHIP INTEGRATED SERVICES, MEDICAL, HOUSING & TRANSPORTATION
SUPPORT FOR CLIENTS UNDERGOING CANCER TREATMENTS, LUNCHES

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

(H) PURPOSE OF GRANT OR ASSISTANCE: GOLDEN YEARS PROGRAM VAN RENTAL,
PROGRAMS FOR LIMITED ENGLISH PROFICIENCY YOUNG MOTHERS AND CHILDREN,

032291
04-01-20

Schedule I (Form 990)

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Schedule I (Form 990)

52-1488711 Page 2

Part IV Supplemental Information

BASIC NEEDS SUPPORT, LATINO TARGETED SENIOR PROGRAMS, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

CHILDREN OF INCARCERATED PARENTS PARTNERSHIP INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: RESOURCES FOR WOMEN AND CAREGIVERS
OF IMPACTED CHILDREN, CONTINUING EDUCATION FOR FAMILY INDEPENDENCE,
UNRESTRICTED

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: 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: SUPPORT FAMILIES IN NEED WITH
SCHOLARSHIPS AND TRANSPORTATION TO YOUTH EXTRA-CURRICULAR ACTIVITIES,
ACTIVITY BUCKETS FOR KIDS, EXPANSION OF PROGRAM, CLASSES, SNOW PLOW

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, SUBSIDIZE CLASSES OR TO PRODUCE EXHIBITS

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: DOWNTOWN FREDERICK PARTNERSHIP, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: FLOWERS OVER FREDERICK PROJECT AND
DOWNTOWN HOLIDAY LIGHTS, FEEDING FRONTLINE WORKERS DURING COVID, WEBSITE
DOMAIN

NAME OF ORGANIZATION OR GOVERNMENT:

FAMILY PARTNERSHIP OF FREDERICK COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: FAMILY RESILIENCE PROGRAM,
CHILDREN'S GROWTH AND DEVELOPMENT PROJECT, CHILD AND FAMILY LEARNING
PROJECT

NAME OF ORGANIZATION OR GOVERNMENT: FEBRUARY STAR SANCTUARY

(H) PURPOSE OF GRANT OR ASSISTANCE: CARING FOR CATS OF THE HOMELESS AND
WOMEN FACING DOMESTIC VIOLENCE OR HOUSING CRISIS, TRAP NEUTER AND
RETURN/REHOME PROGRAM, CAPACITY BUILDING

NAME OF ORGANIZATION OR GOVERNMENT: FREDERICK CHURCH OF THE BRETHREN

(H) PURPOSE OF GRANT OR ASSISTANCE: GENERAL FUND, BUILDING FUND, DEACON
FUND, SCHOLARSHIPS FOR CHILDREN ATTENDING THE LEARNING CENTER

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, MATERIALS FOR C BURR ARTZ LIBRARY, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: FREDERICK COUNTY PUBLIC SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: MUSIC EQUIPMENT AND MATERIALS,
CONSTRUCTION TRADES SCHOLARSHIPS, SUPPLIES, TOOLS AND CERTIFICATION EXAMS

Part IV Supplemental Information

IN CULINARY ARTS PROGRAM, ACADEMIC AND EXTRA-CURRICULAR PROGRAMS AT CATOCTIN HS, ENRICHMENT AND ENHANCEMENT PROGRAMS AT HILLCREST ELEMENTARY, WALKERSVILLE HS, UPDATE TO PLANETARIUM AND AQUARIUM EXHIBITS AT EARTH SPACE AND SCIENCE LAB, VARIOUS HS KEY CLUBS, MIDDLETOWN MS BUILDERS CLUB, READING PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: FREDERICK COUNTY, MD GOVERNMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: SWIMMING, SUMMER AND/OR SOCCER PROGRAMS FOR LOW-INCOME HOUSEHOLDS, MIDDLETOWN PARK PAVILION, DENTAL CARE, MORTGAGE, RENT, UTILITY PAYMENTS, EDUCATIONAL/TRAINING EXPENSES, PLAYGROUND, MATERNAL CHILD HEALTH PROGRAM, COVID-19 TESTING FOR STAFF, MARKETING/EDUCATION FOR FOOD INSECURITY, TUITION REIMBURSEMENTS FOR CAREER ADVANCEMENT PROGRAMS

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

(H) PURPOSE OF GRANT OR ASSISTANCE: GOOD SAMARITAN, EMERGENCY SERVICES, HURWITZ BREAST CANCER FUND, YOUTH APPRENTICESHIP PROGRAM, LUNCHES FOR STAFF DURING COVID, UNRESTRICTED

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

(H) PURPOSE OF GRANT OR ASSISTANCE: FAITH HOUSE, FOOD COORDINATOR, CHANGED LIFE RECOVERY PROGRAM CASE MANAGER, EDUCATIONAL COSTS FOR CLIENTS, KITCHEN SUPPLIES, FOOD INSECURITY ISSUES, FOOD SHELTER AND REHOUSING PROGRAM, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

GOODWILL INDUSTRIES OF THE MONOCACY VALLEY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: CAPITAL IMPROVEMENT FUND, PROGRAMS

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Schedule I (Form 990)

52-1488711 Page 2

Part IV Supplemental Information

THAT TRAIN & EDUCATION PERSONS WITH DISABILITIES, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: HEARTLY HOUSE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: CHILDREN'S SERVICES AND PROGRAMS,
SERVICE COORDINATION EXPANSION, DIRECT SUPPORT FOR WOMEN, DRIVEWAY
REPAIRS, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

HISTORICAL SOCIETY OF FREDERICK COUNTY, INC.

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

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,
CAMPUS GROUNDS BEAUTIFICATION, GEORGE DELAPLAINE SCHOOL OF BUSINESS,
UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

HOUSING AUTHORITY OF THE CITY OF FREDERICK

(H) PURPOSE OF GRANT OR ASSISTANCE: ASSISTANCE WITH TRANSPORTATION,
PROGRAMS FOR WOMEN, EARLY CHILDHOOD PROGRAMS, SPECIAL LEARNERS PROGRAM,
UNRESTRICTED

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT:

LITERACY COUNCIL OF FREDERICK COUNTY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: MATERIALS FOR WOMEN AND FAMILIES
WITH CHILDREN LITERACY PROGRAMS, ENGLISH CLASSES FOR LOW-WAGE WOMEN IN
HOSPITALITY & HEALTH ASSISTANCE INDUSTRIES, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

MENTAL HEALTH ASSOCIATION OF FREDERICK COUNTY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: PARENT COACHING EXPENSES, FAMILY
SUPPORT CASA OF FREDERICK COUNTY, CRISIS SERVICES, 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 AND VETERANS, SUD PATIENT CARE, 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, DENTAL CARE FOR HOMELESS & LOW-INCOME SENIORS, AND
UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: SALVATION ARMY

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

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

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Schedule I (Form 990)

52-1488711 Page 2

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: SUBSIDIZED CAR REPAIRS FOR WOMEN
PROGRAM AND ALICE HOUSEHOLDS, REFURBISHED PROGRAM FOR WOMEN, YOUTH
APPRENTICESHIP PROGRAM

NAME OF ORGANIZATION OR GOVERNMENT: SETON CENTER, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: DEPAUL DENTAL PROGRAM AND DENTAL
SERVICES, BUILDING A BRIDGE FOR ALICE FAMILIES PROGRAM AND UNRESTRICTED

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 TEENS, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT:

SPANISH SPEAKING COMMUNITY OF MD, INC.

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

NAME OF ORGANIZATION OR GOVERNMENT: TEAM H.O.P.E., INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE FREE 3-D MAMMOGRAMS,
SONOGRAMS, CLINICAL BREAST EXAMS, PET/CT SCANS, AND ULTRASOUND GUIDED
BIOPSY TO FREDERICK COUNTY RESIDENTS WHO ARE UNINSURED OR UNDER-INSURED.

NAME OF ORGANIZATION OR GOVERNMENT: THE AARCH SOCIETY OF FREDERICK COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: UPGRADE WEBSITE AND ENHANCE SOCIAL
MEDIA PRESENCE, GREAT NEW LOGO AND WINDOW GRAPHICS, MUSEUM MANAGEMENT

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Schedule I (Form 990)

52-1488711 Page 2

Part IV Supplemental Information

SOFTWARE RENEWAL, UNRESTRICTED

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

(H) PURPOSE OF GRANT OR ASSISTANCE: YOUTH PROGRAMS, SUPPORT FOR
FREDERICK COUNTY RESIDENTS LIVING WITH HIV; HOME TESTING, UNRESTRICTED

NAME OF ORGANIZATION OR GOVERNMENT: THE MONOCACY FOUNDATION INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE FUNDS TO 20 ELIGIBLE
SINGLE MOTHERS AND SINGLE WOMEN IN FREDERICK COUNTY FOR EDUCATION, HEALTH
AND WELLNESS IN THEIR COMMUNITY AND WITH THEIR CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WOMAN TO WOMAN MENTORING, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: 6 WOMEN WHO ARE ASSET LIMITED,
INCOME CONSTRAINED, EMPLOYED (ALICE) TO BE MATCHED WITH A MENTOR AND
PARTICIPATE IN CORE PROGRAM

NAME OF ORGANIZATION OR GOVERNMENT: YMCA OF FREDERICK COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: PARKINSON'S HEALTH PROGRAM FOR
ACTIVE OLDER ADULTS, Y ARTS CENTER INSTRUMENTS, RUNNING CLUB,
SCHOLARSHIPS, UNRESTRICTED

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization

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

Employer identification number

52-1488711

Part I Questions Regarding Compensation

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

☐ First-class or charter travel

☐ Travel for companions

☐ Tax indemnification and gross-up payments

☐ Discretionary spending account

☐ Housing allowance or residence for personal use

☐ Payments for business use of personal residence

☐ Health or social club dues or initiation fees

☐ Personal services (such as maid, chauffeur, chef)

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

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

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

☒ Compensation committee

☒ Independent compensation consultant

☐ Form 990 of other organizations

☐ Written employment contract

☒ Compensation survey or study

☒ Approval by the board or compensation committee

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

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

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

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

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

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

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

a The organization?

b Any related organization?

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

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

a The organization?

b Any related organization?

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

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

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

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

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

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

Schedule J (Form 990) 2020

es, Key Employees, and Highest Compe

s 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)-(iii) for each listed individual must equal the total amount of Form 990, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

[illegible]

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.

[illegible]

(Form 990 or 990-EZ)

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

▶ Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

2020

Open To Public Inspection

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

Employer identification number	52-1488711
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Part I	Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).
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Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

[illegible]

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

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

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

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

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
Total						\$						

Total

▶ \$

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

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

[illegible]

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

Schedule L (Form 990 or 990-EZ) 2020

THE COMMUNITY FOUNDATION OF FREDERICK

Schedule L (Form 990 or 990-EZ) 2020 COUNTY MARYLAND, INC.

52-1488711 Page 2

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
ELIZABETH Y DAY	PRESIDENT & CEO	20,946.	HUSBAND IS		X

Part V Supplemental Information.

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

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: ELIZABETH Y DAY

(D) DESCRIPTION OF TRANSACTION: HUSBAND IS THE PRESIDENT AND MAJORITY OWNER OF THE FAMILY HERITAGE TRUST COMPANY, ONE OF THE COMMUNITY FOUNDATION'S INVESTMENT MANAGERS. THE AMOUNT OF THE TRANSACTION ARE THE MANAGEMENT FEES CHARGED BY THE INVESTMENT MANAGER. THESE FEES ARE COMPARABLE WITH THE OTHER INVESTMENT MANAGERS OF THE COMMUNITY FOUNDATION.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2020

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

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

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

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	26	1,476,574.	FAIR MARKET VALUE
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 organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** **1**

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

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

Schedule M (Form 990) 2020

THE COMMUNITY FOUNDATION OF FREDERICK

Schedule M (Form 990) 2020

COUNTY MARYLAND, INC.

52-1488711

Page 2

Part II

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

SCHEDULE M, LINE 32B:

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Employer identification number
52-1488711

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

SCHOLARSHIPS. IN FY2021, GRANTS TOTALING \$5,717,761 BENEFITED 259
NONPROFITS SERVING THE COMMUNITY, SUPPORTING THEIR CRITICAL PROGRAMS
AND PROVIDING SERVICES TO THOUSANDS OF RESIDENTS. SCHOLARSHIPS FOR
POST-SECONDARY STUDY (INCLUDING CAREER TRAINING) TOTALING \$1,973,679
WERE AWARDED TO 334 STUDENTS. AS A RESULT, THE WELL-BEING, GROWTH, AND
SUCCESS OF FREDERICK COUNTY CITIZENS AND OUR COMMUNITY -AT-LARGE WERE
IMPROVED, AND COMMUNITY MEMBERS WERE MOTIVATED TO PARTICIPATE IN
COMMUNITY FOUNDATION INITIATIVES.

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

ALMOST 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 III, LINE 4C, 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 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) 2020

032211 11-20-20

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

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

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

COPIES ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE AS WELL AS UPON REQUEST.
ALL DONORS FOUNDED 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	777,921.
CHANGE IN CASH SURRENDER VALUE OF LIFE INSURANCE	9,107.
FUNDS HELD FOR OTHERS	-2,148,074.
TOTAL TO FORM 990, PART XI, LINE 9	-1,361,046.

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

PART XII, LINE 2C

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

SCHEDULE I

NOTE THAT THE GRANT INFORMATION REPORTED ON SCHEDULE I IS ON THE CASH
BASIS, AS SUCH THERE IS A TIMING DIFFERENCE BETWEEN THE TOTAL GRANTS
PAID ON SCHEDULE I AND THE AMOUNT REPORTED ON THE FORM 990, PART IX.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

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

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

Employer identification number
52-1488711

OMB No. 1545-0047

2020

Open to Public
Inspection

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
THE COMMUNITY FOUNDATION HOLDING COMPANY INC. - 52-2028247, 312 EAST CHURCH STREET, FREDERICK, MD 21701	PROVIDE FINANCIAL SUPPORT TO THE COMMUNITY FOUNDATION OF FREDERICK	MARYLAND	501(C)(3)	LINE 12A, I			X
THE AUSHERMAN FAMILY TRUST - 52-7165889 7420 HAYWARD ROAD FREDERICK, MD 21702	PROVIDE SUPPORT TO THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MD	MARYLAND	501(C)(3)	LINE 12A, I			X
THE PLEASANTS SUPPORTING CHARITABLE TRUST - 82-3576661, 24012 FREDERICK ROAD, CLARKSBURG, MD 20871	PROVIDE FINANCIAL SUPPORT TO THE COMMUNITY FOUNDATION OF FREDERICK	MARYLAND	501(C)(3)	LINE 12A, I			X

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

SEE PART VII FOR CONTINUATIONS

Schedule R (Form 990) 2020

Part III

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

32162 10-28-20 **73** **Schedule R (Form 990) 2020**

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

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

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?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
THE COMMUNITY FOUNDATION HOLDING COMPANY	Q	29,609	CASH AMOUNT
(1) INC.			
(2)			
(3)			
(4)			
(5)			
(6)			

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)

[illegible]

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Schedule R (Form 990) 2020

52-1488711 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 FOUNDATION OF
FREDERICK COUNTY MD

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

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

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

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

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

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

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

GAIL FITZGERALD

- The books are in the care of ► **312 EAST CHURCH STREET - FREDERICK, MD 21701**

Telephone No. ► **301-695-7660**

Fax No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and TINs of all members the extension is for.

- 1 I request an automatic 6-month extension of time until **MAY 16, 2022**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☐ calendar year _____ or
- ☒ tax year beginning **JUL 1, 2020**, and ending **JUN 30, 2021**

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

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

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

ext efiled 11-8-21