Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

<u>A F</u>	or the	e 2022 calendar year, or tax year beginning $$ JUL $1,$ 2022 and e	nding J	<u>UN 30, 2023</u>					
B c	heck if pplicabl	C Name of organization		D Employer identific	cation number				
X	Addre chang Name								
	_chang □Initial	Doing business as		23-70367					
	return Final return	1420 או פעאסו. ביפ פיייס ביבייי	Room/suite	E Telephone numbe $410-837-$					
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	17,404,887.				
	Ameno return	BALLIMOKE, MD ZIZUI		H(a) Is this a group re	eturn				
	Application			for subordinates? Yes X No					
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in	icluded? Yes No				
<u></u>	ax-ex	empt status: $\overline{\mathbf{X}}$ 501(c)(3) $\overline{}$ 501(c) () (insert no.) $\overline{}$ 4947(a)(1) or	527	If "No," attach a	list. See instructions				
	Vebsit			H(c) Group exemptio					
	orm of	organization: X Corporation Trust Association Other Summary	L Year	of formation: 1969 N	∕ State of legal domicile: M D				
		Briefly describe the organization's mission or most significant activities: ESTAB	LISHE	D TO RAISE,	MANAGE				
Activities & Governance		FUNDS, AND PROVIDE FINANCIAL SUPPORT TO TH							
nar		Check this box if the organization discontinued its operations or dispose							
Ver	3	Number of voting members of the governing body (Part VI, line 1a)		3	15				
ၓ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	15				
တ္		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			5				
Ĭ	6	Total number of volunteers (estimate if necessary)		6	24				
cţi	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.				
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.				
				Prior Year	Current Year				
Ð	8	Contributions and grants (Part VIII, line 1h)		5,590,421.	6,644,300.				
eun		Program service revenue (Part VIII, line 2g)		12,385.	76,173.				
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		4,935,514.	1,616,833.				
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	377.				
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		10,538,320.	8,337,683.				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.				
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		336,548.	398,813.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		25,690.	62,412.				
Ϋ́	b	Total fundraising expenses (Part IX, column (D), line 25) 349,09		4,754,914.	5,240,336.				
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,117,152.	5,701,561.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,421,168.	2,636,122.				
	19	Revenue less expenses. Subtract line 18 from line 12	Ra	ginning of Current Year	End of Year				
Net Assets or	200	Total accests (Dort V. line 16)		88,619,542.	95,943,538.				
Asse	20 21	Total assets (Part X, line 16) Total liabilities (Part X, line 26)		1,208,324.	1,567,234.				
Vet /	22	Net assets or fund balances. Subtract line 21 from line 20		87,411,218.	94,376,304.				
Pa	rt II	Signature Block		07,411,210.	J4,570,504 .				
		Ities of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	ents, and to the hest of my	knowledge and helief it is				
		t, and complete. Declaration of preparer (other than officer) is based on all information of whic			Milowiougo and bolloi, it is				
,	001100	Amy Shaver	on proparor	2/14/2	24				
Sigi	1	Signature of officer		Date	· ·				
Her		AMY SHAVER, CFO							
	_	Type or print name and title)						
Daid		Print/Type preparer's name SUSAN KELLER SUSAN KELLER	العا	Date Check Check if calls ample	PTIN P00245169				
Paid Prep		Firm's name ELLIN & TUCKER, CHARTERED		sen-employ	2-0959934				
Use		Firm's address 400 EAST PRATT ST. SUITE 200		FIIIISEIN J	<u> </u>				
	July	BALTIMORE, MD 21202		Phone no 41	0-727-5735				
May	the II	RS discuss this return with the preparer shown above? See instructions		I HOUGHO. 4.	X Yes No				
iviay	ri io II	to dicease this retain with the proparer shown above; oee instructions			163 180				

Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO RAISE AND MANAGE FUNDS AND TO PROVIDE FINANCIAL SUPPORT TO THE
	UNIVERSITY OF BALTIMORE. THE FOUNDATION PROVIDES LEADERSHIP, GUIDANCE,
	AND SUPPORT TO THE UNIVERSITY'S ADMINISTRATION IN ADVANCING THE
	MISSION AND VISION OF THE UNIVERSITY.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.
•	
3	
	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 \$ 4,396,017. including grants of \$) (Revenue \$ 76,555.
	ALL PROGRAM SERVICE EXPENSES AND DISTRIBUTIONS SUPPORT THE EDUCATIONAL
	ACTIVITIES OF THE UNIVERSITY OF BALTIMORE. THE FOUNDATION SUPPORTED
	INITIATIVES OF THE UNIVERSITY SUCH AS SCHOLARSHIPS, FACULTY SUPPORT,
	AND COMMUNITY OUTREACH PROGRAMS.
4b	(Code:) (Expenses \$) (Revenue \$
40	(Code:) (Expenses \$
4c	(Code:) (Expenses \$
4-1	Other program conjuge (Deceribe on Schodule O.)
4d	Other program services (Describe on Schedule O.)
<u>.</u>	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses 4,396,017.
<u>4e</u>	Total program service expenses 4,396,017.
	Form 990 (2022

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	Ť		
·	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	-		 ^
8			Х	
^	Schedule D, Part III	8	Λ	
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?			, v
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		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? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	12u		
b	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a		14a		X
		14a		 ^
D	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			
		445	Х	
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Λ	_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			 ₩
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			_{3,7}
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		77	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

Pa	t IV Checklist of Required Schedules (continued)	, 00		age 🕶
	· (SONEMASS)		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	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			١
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			3,7
	Schedule L, Part I	25b		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%	l		7,7
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			v
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00-		X
L-	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
C		28c		X
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25	-23	
30	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	<u> </u>		
02	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u></u>		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		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	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 27			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
232004	. 12-13-22	Form	990	(2022)

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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 2a 5								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b							
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?								
b	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х					
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit								
	any contributions that were not tax deductible as charitable contributions?	6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
	to file Form 8282?	7с		Х					
d	If "Yes," indicate the number of Forms 8282 filed during the year								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
_	sponsoring organization have excess business holdings at any time during the year?	8							
9	Sponsoring organizations maintaining donor advised funds.	0-							
a b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b							
10	Section 501(c)(7) organizations. Enter:	90							
а	Initiation fees and capital contributions included on Part VIII, line 12								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11	Section 501(c)(12) organizations. Enter:								
	Gross income from members or shareholders								
	Gross income from other sources. (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans								
С	Enter the amount of reserves on hand								
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		Х					
	If "Yes," see the instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X					
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17							
	If "Yes," complete Form 6069.								

232005 12-13-22

Form **990** (2022)

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 15			
	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 1b 15			
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on 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	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on 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?	16a		Х
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?	16b		
<u>Sec</u>	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed MD, CO, MA, MI, NJ, NY, OH, WA, CA	,LA	ME,	MN
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)	avai l al	ole
	for public inspection. Indicate how you made these available. Check all that apply			
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	THE ORGANIZATION - 410-837-6170			
	1420 N. CHARLES STREET, BALTIMORE, MD 21201			
232006	SEE SCHEDULE O FOR FULL LIST OF STATES	Form	990	(2022)

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- 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 the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	(do box	not c	(C Posi heck i	ition) than (one n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer Officer	Key employee	Highest compensated Employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) JANUS KURZMANN	40.00							02.050	•	4 004
CFO (THROUGH 6/2023)	F 00			Х				93,878.	0.	4,984.
(2) NINA YUDELL	5.00								•	•
CHAIR		Х		Х				0.	0.	0.
(3) JOAN WORTHINGTON	5.00	,,		,,						•
VICE-CHAIR	1 00	Х		Х				0.	0.	0.
(4) MICHAEL L. CURRY	1.00								•	•
SECRETARY	1 00	Х		Х				0.	0.	0.
(5) TRACEY A. DUBREE	1.00								•	•
TREASURER	1 00	Х		Х				0.	0.	0.
(6) BARNETT BROOKS	1.00	l							•	•
DIRECTOR	1 00	Х						0.	0.	0.
(7) R. THOMAS CRAWFORD	1.00	l								
DIRECTOR/ IMMEDIATE PAST C		Х						0.	0.	0.
(8) JEFF GLOCK	1.00									
DIRECTOR		Х						0.	0.	0.
(9) CARMINE D'ALESSANDRO	1.00									
DIRECTOR		Х						0.	0.	0.
(10) ARTHUR E. FLACH	1.00							_		
DIRECTOR		Х						0.	0.	0.
(11) PIERCE FLANIGAN, IV	1.00							_		
DIRECTOR		Х						0.	0.	0.
(12) STUART M. GOLDBERG	1.00									
DIRECTOR		Х						0.	0.	0.
(13) SAYRA MEYERHOFF	1.00									
DIRECTOR		Х						0.	0.	0.
(14) KURT L. SCHMOKE	1.00							_		
EX-OFFICIO		Х						0.	0.	0.
(15) THERESA SILANSKIS	40.00	l							_	_
EXECUTIVE DIRECTOR				Х	<u> </u>			0.	0.	0.
(16) DAN MORRISON	1.00								_	_
DIRECTOR		Х				_	_	0.	0.	0.
(17) PHAEDRA STEWART	1.00								_	_
DIRECTOR		Х						0.	0.	0 • Form 990 (2022)

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Part VII Section A. Officers, Directors, Trus	tees, Key Emp	loy	ees,	and	Hi9	ghes	st C	ompensated Employee	s (continued)	
(A)	(B)			-	C)			(D)	(E)	(F)
Name and title	Average	(do		Pos heck		າ than d	one	Reportab l e	Reportable	Estimated
	hours per	box,	box, unless person is both an officer and a director/trustee)		n an	compensation	compensation	amount of		
	week (list any					T	100,	from the	from related organizations	other compensation
	hours for	direct				- -			(W-2/1099-M I SC	'
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	trust	Institutional trustee		oyee	ompe		1099-NEC)		and related
	below line)	Individual trustee or director	organization (W-2/10) Individual funstee of the property of th							organizations
	line)	lnd	lus	ij	Ke	불.	For			
							-			
										+
							_			
								02.050		4 004
1b Subtotal								93,878.		4,984.
c Total from continuation sheets to Part VI								93,878.		0. 0. 0. 4,984.
d Total (add lines 1b and 1c)										4,304.
compensation from the organization	ot inflited to the	056	nste	ual	ove	;) WII	10 16	eceived more than \$100,	ooo or reportable	0
										Yes No
3 Did the organization list any former officer,	,	,	•		•		_		•	
line 1a? If "Yes," complete Schedule J for s										. з Х
4 For any individual listed on line 1a, is the su	•							•	•	
and related organizations greater than \$150										4 X
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes." com	•				•			•	iuai for services	. 5 X
Section B. Independent Contractors	piete Scheaule) J T	or su	icn į	<u>oers</u>	on .				. 5 21
Complete this table for your five highest contains the second secon	mpensated ind	epe	nder	nt co	ontra	acto	rs th	nat received more than \$	100.000 of comper	nsation from
the organization. Report compensation for t	-								· ·	
(A)	•							(B)		(C)
Name and business	address							Description of s	ervices	Compensation
BARKER & SCOTT CONSULTING	-						- 1	DATABASE & A	CCT	
2202 18TH ST, NW, WASHING							-	SERVICES		134,548.
CLEARVIEW CONSULTING, INC	•				RU.	N	- 1	OUTSOURCED A	CCT	100 650
BLVD, STE 410, OWINGS MIL	ц <mark>ъ, м</mark> р	<u> </u>	<u>T T</u>	/			_	SERVICES		129,650.
-							\dashv			

Form **990** (2022)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Part VIII Statement of Revenue

		Check if Schedule O contains a response of	or note to any line	e in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under
		1 1					sections 512 - 514
ts ts		Federated campaigns 1a					
ir our		Membership dues 1b					
S, G	c	Fundraising events					
# Ja	c	Related organizations 1d					
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants (contributions) 1e	88,111.				
is S	f	All other contributions, gifts, grants, and					
out He		similar amounts not included above 1f	6,556,189.				
ÖĔ	ç	Noncash contributions included in lines 1a-1f	25,818.				
Sog	ŀ	Total. Add lines 1a-1f		6,644,300.			
			Business Code				
as l	2 8	PROGRAM INCOME	900099	76,173.	76,173.		
Program Service Revenue	_ b			,	,		
Ser							
Z S							
gra Be							
ر ا	•	All other program service revenue					
_		·		76,173.			
-		Total. Add lines 2a-2f		70,175.			
	3	Investment income (including dividends, interes		1 671 055			1671955.
		other similar amounts)		1,671,955.			10/1933.
	4	Income from investment of tax-exempt bond pr	oceeas				
	5	Royalties	(ii) Davas and				
		(i) Real	(ii) Persona l				
		Gross rents 6a					
		Less: rental expenses 6b					
		Rental income or (loss)					
		Net rental income or (loss)					
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 9,012,082.					
	b	Less: cost or other basis					
ne		and sales expenses 7b 9,067,204.					
l en	c	Gain or (loss) 7c -55,122.					
ther Revenue		l Net gain or (loss)		-55,122.			-55,122.
Ē	8 a	Gross income from fundraising events (not					
₹		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18 8a					
	k	Less: direct expenses 8b					
		Net income or (loss) from fundraising events					
		Gross income from gaming activities. See					
		Part IV, line 199a					
	b	Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
		Gross sales of inventory, less returns					
	•	and allowances 10a					
	r	Less: cost of goods sold 10b					
		Net income or (loss) from sales of inventory					
\neg			Business Code				
ş	11 -	MISCELLANEOUS INCOME	611110	377.	377.		
er Tile				5.7.	<u> </u>		
llar	t c						
Miscellaneous Revenue							
Ξ	•	All other revenue		377.			
		Total Add lines 11a-11d		8,337,683.	76 550	0	1616022
	12	Total revenue. See instructions		0,33/,683.	76,550.	0.	1616833.

Pai	t IX Statement of Functional Expense	es			gc
Secti	on 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must con	nplete column (A).	
	Check if Schedule O contains a respon	se or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		·		·
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	91,346.		91,346.	
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	233,186.		233,186.	
8	Pension plan accruals and contributions (include	45 600		15 600	
	section 401(k) and 403(b) employer contributions)	17,602.		17,602.	
9	Other employee benefits	33,545.		33,545.	
10	Payroll taxes	23,134.		23,134.	
11	Fees for services (nonemployees):				
а	Management	0 656		6 504	2 070
b	Legal	9,656.		6,584.	3,072.
С	Accounting	37,222.		37,222.	
d	Lobbying	62 412			60 410
e	Professional fundraising services. See Part IV, line 17	62,412. 174,938.		174,938.	62,412.
f	Investment management fees	1/4,530.		1/4,930.	_
g	` '	507,431.	178,900.	202,263.	126,268.
40	column (A), amount, list line 11g expenses on Sch O.)	14,961.	14,961.	202,203.	120,200.
12	Advertising and promotion	60,288.	60,288.		
13	Office expenses	128,900.	33,494.	95,406.	
14	Information technology	120,900.	33,494.	93,400.	
15	Royalties				
16	Occupancy	19,418.	16,337.	36.	3,045.
17	Travel	17,410.	10,337.	30.	3,043.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	408,008.	390,158.	17,600.	250.
20	Interest	100,000.	330,1300	17,0000	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	12,726.		12,726.	
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 0.)				
а	STUDENT/FACULTY SUPPORT	2,729,435.	2,729,435.		
b	OTHER PROGRAM SUPPORT	832,643.	832,643.		
С	MISCELLANEOUS	304,710.	139,801.	10,859.	154,050.
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	5,701,561.	4,396,017.	956,447.	349,097.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Chack hara Circulation and as a reason are zero				

Form **990** (2022)

Check here

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

Form 990 (2022) Part X Balance Sheet

I a	IL A	Balance Sheet				
		Check if Schedule O contains a response or	note to any line in this Part X	T		
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		15,755,571.	1	14,503,054.
	2	Savings and temporary cash investments		2		
	3	Pledges and grants receivable, net		5,837,351.	3	5,991,717.
	4	Accounts receivable, net		67,387.	4	17,970.
	5	Loans and other receivables from any current				
		trustee, key employee, creator or founder, su				
		controlled entity or family member of any of the	nese persons		5	
	6	Loans and other receivables from other disqu	alified persons (as defined			
		under section 4958(f)(1)), and persons describ	oed in section 4958(c)(3)(B)		6	
γ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
As	9			80,923.	9	82,413.
	10a	Land, buildings, and equipment: cost or othe				
		basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation			10c	
	11	Investments - publicly traded securities		43,219,331.	11	52,499,141.
	12	Investments - other securities. See Part IV, lin	23,204,695.	12	22,394,959.	
	13	Investments - program-related. See Part IV, lir		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11	454,284.	15	454,284.	
	16	Total assets. Add lines 1 through 15 (must e		88,619,542.	16	95,943,538.
	17	Accounts payable and accrued expenses	1,054,206.	17	597,492.	
	18	Grants payable		18		
	19	Deferred revenue		154,118.	19	969,742.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Comple			21	
S	22	Loans and other payables to any current or fo	ormer officer, director,			
Liabilities		trustee, key employee, creator or founder, su	ostantial contributor, or 35%			
abil		controlled entity or family member of any of the	nese persons		22	
Ξ	23	Secured mortgages and notes payable to uni	elated third parties		23	
	24	Unsecured notes and loans payable to unrela	ted third parties		24	
	25	Other liabilities (including federal income tax,	payables to related third			
		parties, and other liabilities not included on lin	nes 17-24). Complete Part X			
		of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		1,208,324.	26	1,567,234.
		Organizations that follow FASB ASC 958, o	heck here X			
ses		and complete lines 27, 28, 32, and 33.				
<u>a</u>	27	Net assets without donor restrictions		7,185,864.	27	8,489,053.
Ba	28	Net assets with donor restrictions		80,225,354.	28	85,887,251.
pu		Organizations that do not follow FASB ASC	958, check here			
Ę		and complete lines 29 through 33.				
S O	29	Capital stock or trust principal, or current fun	ds		29	
Net Assets or Fund Balances	30	Paid-in or capital surplus, or land, building, or	equipment fund		30	
As	31	Retained earnings, endowment, accumulated	income, or other funds		31	
Net	32	Total net assets or fund balances		87,411,218.	32	94,376,304.
	33	Total liabilities and net assets/fund balances		88,619,542.	33	95,943,538.

Form **990** (2022)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,33		
2	Total expenses (must equal Part IX, column (A), line 25)	2	5	,70	1,5	61.
3	Revenue less expenses. Subtract line 2 from line 1	3	2	,63	6,1	22.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	87	, 41	1,2	18.
5	Net unrealized gains (losses) on investments	5	4	,32	8,9	64.
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				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	94	,37	6,3	04.
Pa	rt XIII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	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:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edu l e C).			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed aud	dit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

Employer identification number

23-7036780

Name of the organization

UNIVERSITY OF BALTIMORE FOUNDATION, INC.

Pa	irt i	Reason for Public C	onarity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.		
The	orgar	nization is not a private found	ation because it is: (I	For lines 1 through 12, c	heck only	one box.)			
1		A church, convention of ch	urches, or associatio	n of churches described	l in section	n 170(b)(I)(A)(i).		
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)							
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).							
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,	
		city, and state:							
5		An organization operated for		llege or university owned	l or operat	ed by a go	vernmental unit describe	ed in	
		section 170(b)(1)(A)(iv). (C							
6		A federal, state, or local government	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7	X	An organization that norma	lly receives a substa	ntial part of its support f	rom a gove	ernmenta l	unit or from the genera l ر	oublic described in	
		section 170(b)(1)(A)(vi). (C	omp l ete Part II.)						
8	Ш	A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	ınction with a land-grant	college	
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of the college	or	
		university:							
10		An organization that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	ns, membership fees, and	d gross receipts from	
		activities related to its exen	npt functions, subjec	t to certain exceptions;	and (2) no	more than	33 1/3% of its support f	rom gross investment	
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the organization a	fter June 30, 1975.	
		See section 509(a)(2). (Con	mplete Part III.)						
11		An organization organized a	and operated exc l usi	vely to test for public sa	fety. See	section 50	09(a)(4).		
12		An organization organized a						purposes of one or	
		more publicly supported or	ganizations describe	d in section 509(a)(1) d	r section	509(a)(2)	See section 509(a)(3). (Check the box on	
		lines 12a through 12d that	describes the type o	f supporting organization	n and com	plete lines	12e, 12f, and 12g.		
a		Type I. A supporting orga						giving	
		the supported organization	on(s) the power to rec	gularly appoint or elect a	majority c	of the direc	tors or trustees of the su	pporting	
		organization. You must o						•	
k	, [Type II. A supporting org			tion with its	s supporte	ed organization(s), by hav	rina	
		control or management o							
		organization(s). You mus							
c	. [Type III functionally inte			in connect	tion with, a	and functionally integrate	d with.	
		its supported organization	-					····,	
c	. [Type III non-functionally		•				ration(s)	
		that is not functionally int					• • • • • •		
		requirement (see instructi							
e		Check this box if the orga	·	- ·					
•		functionally integrated, or					Typo I, Typo II, Typo III		
1	Ente	er the number of supported of		nany intogratod dapporti	ng organiz	ation.			
		vide the following information	•	d organization(s)			•••••		
		(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	anization listed	(v) Amount of monetary	(vi) Amount of other	
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)	
				above (see instructions))					
_									
Tot	al								

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

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

Sec	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
	Gifts, grants, contributions, and		•			• •			
	membership fees received. (Do not								
	include any "unusual grants.")	3038492.	6162475.	9554106.	5566897.	6644300.	30966270.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
-	furnished by a governmental unit to								
	the organization without charge								
4	Total. Add lines 1 through 3	3038492.	6162475.	9554106.	5566897.	6644300.	30966270.		
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)						11260077.		
6	Public support. Subtract line 5 from line 4.						19706193.		
	ction B. Total Support								
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
	Amounts from line 4	3038492.	6162475.	9554106.	5566897.	6644300.	30966270.		
8	Gross income from interest,	0000121	0_0	7001200	000000				
Ŭ	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources	1010757.	983,082.	1546623.	2274625.	1671955.	7487042.		
9	Net income from unrelated business	10107370	30370021	13100231	22710231	1071333	7 20 7 0 12 1		
Э	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
10	or loss from the sale of capital								
	assets (Explain in Part VI.)	178,091.	58,844.	16,306.	12,385.	76 173	341,799.		
44		170,051.	30,044.	10,500.	12,303	70,175	38795111.		
	Total support. Add lines 7 through 10	ete (eee inetructie	.no)			12	D0773111.		
12	Gross receipts from related activities, First 5 years. If the Form 990 is for the			fourth or fifth town					
13		=		=					
Sec	organization, check this box and stop ction C. Computation of Publi				•••••				
	Public support percentage for 2022 (I			column (fl)		14	50.80 %		
	Public support percentage from 2021					15	56.30 %		
	33 1/3% support test - 2022. If the c								
104	stop here. The organization qualifies	=					77		
L	33 1/3% support test - 2021. If the		-		lino 15 is 33 1/30/				
L	and stop here. The organization qual								
47-	10% -facts-and-circumstances test								
17 8		•							
	and if the organization meets the fact			•	•	•			
L	meets the facts-and-circumstances te	•	•			70 and line 15 in			
C	10% -facts-and-circumstances test	•					10/0 UI		
	more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the								
40	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization								
IQ	rivate ioundation. If the organization	л ан постреска в	JOX ON HITE 13, 168	a, 100, 17a, 01 1/D	, check this box at		(Form 990) 2022		
						Juliedule A	(1 01111 990) 2022		

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.)

Sec	ction A. Public Support	siow, picase comp	nete i art ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
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						
	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		1				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
_	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						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on 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.)	_		-	-	1	
	Total support. (Add lines 9, 10c, 11, and 12.)	<u> </u>		<u> </u>		<u> </u>	<u> </u>
14	First 5 years. If the Form 990 is for th	J		*	•	(,(,	
S0/	check this box and stop here	c Support Per	centage				
	Public support percentage for 2022 (li			actume (fl)		15	
	Public support percentage from 2021			.,,		16	
	ction D. Computation of Inves					1 10 1	
	Investment income percentage for 20			ine 13, column (fl)		17	%
	Investment income percentage from 2			10, 00101111 (1))		18	%
	33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box ar						
b	33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 1/3%, che	•					
20	Private foundation. If the organization						

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of 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

- 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?
- 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 on 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 on 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.)

	Ι	
	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
40		
_		
5a		
_		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
100		
106		
10b	000	
ule A (Forr	11 990)	2022

Par	τιν	Supporting Organizations (continued)			
				Yes	No
11	Has t	the organization accepted a gift or contribution from any of the following persons?			
а	A per	rson who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c k	pelow, the governing body of a supported organization?	11a		
b	A fan	nily member of a person described on line 11a above?	11b		
С	A 359	% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detai	il in Part VI.	11c		
Sect	ion	B. Type I Supporting Organizations			
				Yes	No
		he governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
		e supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		tors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) tively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
		nization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
		orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
		he organization operate for the benefit of any supported organization other than the supported			
	orgar	nization(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,			
		rvised, or controlled the supporting organization.	2		
Sect	ion	C. Type II Supporting Organizations			
				Yes	No
		e a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or tru	ustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or ma	anagement of the supporting organization was vested in the same persons that controlled or managed			
<u> </u>	the s	upported organization(s).	1		
Seci	ion i	D. All Type III Supporting Organizations			
				Yes	No
		he organization provide to each of its supported organizations, by the last day of the fifth month of the			
	-	nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	_		
	-	nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
		e any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
		nization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2		
		organization maintained a close and continuous working relationship with the supported organization(s). Deason of the relationship described on line 2, above, did the organization's supported organizations have a			
		ficant voice in the organization's investment policies and in directing the use of the organization's			
		me or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		orted organizations played in this regard	3		
Sect		E. Type III Functionally Integrated Supporting Organizations			
1	Chec	ck the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а		The organization satisfied the Activities Test. Complete line 2 below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.			
С		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	struction	s).	
2	Activ	rities Test. Answer lines 2a and 2b below.		Yes	No
а	Did s	substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the s	supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those	e supported organizations and explain how these activities directly furthered their exempt purposes,			
	how i	the organization was responsive to those supported organizations, and how the organization determined			
	that t	these activities constituted substantially all of its activities.	2 a		
		he activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
		or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
		VI the reasons for the organization's position that its supported organization(s) would have engaged in			
		e activities but for the organization's involvement.	2b		
		nt of Supported Organizations. Answer lines 3a and 3b below.			
		he organization have the power to regularly appoint or elect a majority of the officers, directors, or	_		
		ees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
		he organization exercise a substantial degree of direction over the policies, programs, and activities of each	OI-		
	OF ITS	supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990) 2022

5

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

5

Income tax imposed in prior year

instructions).

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

Pa	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)	
Sect	on D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exe	mpt purposes	1	
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity	2		
3	Administrative expenses paid to accomplish exempt purpose	3		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required - pro	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	ne organization is responsive		
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2022 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
		(i)	(ii)	(iii) Distributable

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reason-			
able cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D,			
line 7:			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h			
and 4b from line 1. For result greater than zero, explain in			
Part VI. See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j			
and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Schedule A (Form 990) 2022

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 Inspection

Name of the organization

UNIVERSITY OF BALTIMORE FOUNDATION, INC.

Employer identification number 23-7036780

Total number at end of year Captroparts from (during year)	Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		r Si	milar Funds	or Ac	coun	t s. Comp	lete if the	•
1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of or contributions to (during year) 4 Aggregate value of of systems from (during year) 4 Aggregate value of of systems from (during year) 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are 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 bandli of the donor or donor advisor, or for any other purpose conterning impermisable private basenfer? Part		organization anowords from only occupy factor, in		vised	I funds	(b) Fund	ls and othe	r accoun	 ts
2 Aggregate value of contributions to (cluring year) 4 Aggregate value of prants from (during year) 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advisor funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charatslep purposes and not for the benefit of the donor of nonor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization informal grantees, donors, and donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(e) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of spon space 2 Complete lines 2 at through 2 off the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 1 Total number of conservation easements 2 b Total acreage restricted by conservation easements 2 c Number of conservation easements included in (a) 2 c d. Number of conservation easements included in (a) 2 c d. Number of conservation easements included in (b) acquired after July 25,2006, and not on a historic structure included in (a) 4 c d. Number of conservation easements included in (a) 2 c d. Number of conservation easements included in (b) acquired after July 25,2006, and not on a historic structure included in (a) 4 c d. Number of states where property subject to conservation easement in located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforc	1	Total number at end of year	(-)			•				
4 Aggregate value of grants from (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization in property, subject to the organization's exclusive legal control? No										
4 Aggregate value at end of year 5 Did the organization in property, subject to the organization's exclusive legal contro? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charidable purposes and not for the benefit of the donor or donor advisors in writing that grant funds can be used only for charidable purposes and not for the benefit of the donor or donor advisors or for any other purpose conferring impermissible private benefit? 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). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of poen space 2 Complete line 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. 3 Total number of conservation easements 4 Total acreage restricted by conservation easements 5 Total acreage restricted by conservation easements 6 Number of conservation easements in cludded in (c) acquired after July 25,2005, and not on a historic structure included in (c) acquired after July 25,2005, and not on a historic structure included in (c) acquired after July 25,2005, and not on a historic structure devoted to monitoring, inspection, handling of violations, and enforcing conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easement reports conservation easements in its revenue and expenses statement and balance sheet, and include, if applicable, the text of the foothore to the organization in familiar assessment in the familiar as										
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization in property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant tunds 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? Part II Conservation Easements. Complete if the organization answered "Ves" on Form 990, Part IV, line 7. 1 Purposely of consension assements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of natural habitat Preservation of natural habitat Preservation of natural habitat Preservation of a conservation easement on the last day of the tax year. 2 Complete lines 2 at 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. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register 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 poker regarding the periodic monitoring, inspection, 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)(h) 9 In Part XIII describe how the organiza										
are the organization's property, subject to the organization's exclusive legal control?	5	· · · · · · · · · · · · · · · · · · ·	writing that the assets	s he	d in donor advise	ed fund	s			
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 impermissable private benefit? Part III Conservation Easements held by the organization answered "Yes" on Form 990, Part IV, line 7.		_	_						Yes	☐ No
mpsmissible 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). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of Jens pace Preservation of open space Preservation of a certified historic structure Preservation of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a Total number of conservation easements Preservation easement Preservation Pr	6									
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). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of natural habitat Preservation of open space Preservation easements on the last day of the tax year. Preservation easements Preservation Preservati		for charitable purposes and not for the benefit of the donor or	r donor advisor, or fo	r any	other purpose o	onferri	ng			
1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Proservation 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. 2 Total number of conservation easements 2a Held at the End of the Tax Year 3 Total number of conservation easements 2b Total acroage restricted by conservation easements 2b 5 Total acroage restricted by conservation easements 2b Value Value									Yes	No_
Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Protection of natural habitat Preservation of open space Proservation of open space Complete lines 2 at 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 Total acreage restricted by conservation easements 2a Held at the End of the Tax Year 2a Total acreage restricted by conservation easements 2b Protection Prote	Pai	t II Conservation Easements. Complete if the org	ganization answered	"Yes	" on Form 990, F	art IV,	line 7.			
Protection of natural habitat	1	Purpose(s) of conservation easements held by the organization	on (check all that app	ly).						
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. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register 1 Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register 2 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 easements is located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year and section 170(h)(4)(B)(iii) and section 170(h)(4)(B)(iii) Part IIII Organization who whe 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. 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 the following amounts relating		Preservation of land for public use (for example, recreat	tion or education)		Preservation of	a histo	rically i	mportant la	and area	
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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 \$ 454,284. 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	1а	-	•							
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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 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 \$		• •					-1			
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 \$	D	• •	•							
(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 \$		•	exhibition, education	ı, or	research in turth	erance	or pub	lic service,		
(ii) Assets included in Form 990, Part X \$ 454,284. 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 \$							4			
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 \$								`	151	284
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	•								404	, 404.
a Revenue included on Form 990, Part VIII, line 1	2	_				gain, p	noviae			
	_						đ	•		
								·		

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

Schedule D (Form 990) 2022

	dule D (Form 990) 2022 UNIVERS	TY OF BALT	'IMORE FOUN	IDATION, IN	NC .	23-70	36780) P	age 2
Par	t III Organizations Maintaining Co						(contir	nued)	
3	Using the organization's acquisition, accession	n, and other records	s, check any of the f	ollowing that make s	significant	use of its			
	collection items (check all that apply):								
а	X Public exhibition	d		nange program					
b	X Scholarly research	е	Other						
С	X Preservation for future generations								
4	Provide a description of the organization's co	•	•	•		ose in Part	XIII.		
5	During the year, did the organization solicit or						7	_ 	П
D	to be sold to raise funds rather than to be ma						_ Yes		. No
Par	t IV Escrow and Custodial Arrang reported an amount on Form 990, Part		ete if the organization	n answered "Yes" oi	n Form 99	0, Part IV, I	line 9, or		
1a	Is the organization an agent, trustee, custodia	n or other intermedi	ary for contributions	or other assets not	included				
	on Form 990, Part X?						Yes		No
b	If "Yes," explain the arrangement in Part XIII a								
							Amoun	t	
С	Beginning balance				1c				
d	Additions during the year				1d				
е	Distributions during the year								
f	Ending balance				1f				
2a	Did the organization include an amount on Fo				ility?	\square	Yes		No
b	If "Yes," explain the arrangement in Part XIII.								
Par	t V Endowment Funds. Complete if	the organization ans	swered "Yes" on Fo	rm 990, Part IV, line	10.				
		(a) Current year	(b) Prior year	(c) Two years back		years back			
1a	Beginning of year balance	61,288,308.	68,720,950.	50,278,867.		49,877,557.			471.
b	Contributions	4,154,334.	1,179,815.	5,920,420.		813,658.			278.
С	Net investment earnings, gains, and losses	4,895,657.	-5,702,756.	15,154,401.		184,984.		,375 <u>,</u>	812.
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	3,300,458.	2,909,701.	2,632,738.	2,	597,332.	2,483,004.		004.
f	Administrative expenses								
g	End of year balance	67,037,841.			50,	278,867.	49,	877,	557.
2	Provide the estimated percentage of the curre	•	(line 1g, column (a)) he l d as:					
а	Board designated or quasi-endowment	19.0000	_%						
b	Permanent endowment 81.0000	%							
С		6							
	The percentages on lines 2a, 2b, and 2c should	-							
За	Are there endowment funds not in the posses	sion of the organizat	tion that are he l d an	d administered for t	he		ſ		
	organization by:							Yes	No
	(i) Unrelated organizations						3a(i)		X
	(ii) Related organizations						3a(ii)		X
	If "Yes" on line 3a(ii), are the related organizat						3b		Ь
4 Do:	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipme		vment funds.						
Pai	t VI Land, Buildings, and Equipmed Complete if the organization answered		Dort IV line 11e C	oo Form 000 Dort V	line 10				
	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			T			
	Description of property	(a) Cost or ot basis (investm		1	Accumu l a epreciatio		(d) Boo	k valu	е
	Land	- '	ioni) Dasis ((Ourier) de	-preciatio	1		—	
	Land							—	
	Buildings					- 			
	Leasehold improvements								
	Equipment					- 			
	Other Add lines 1a through 1e (Column (d) must on		V ookumn (D) line 10	<u> </u>					0.

Schedule D (Form 990) 2022

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 ... X

Schedule D (Form 990) 2022

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.)

CODIFICATION REQUIRES THE ORGANIZATIONS' EVALUATION OF TAX POSITIONS, WHICH INCLUDES MAINTAINING THEIR TAX-EXEMPT STATUS AND THE TAXABILITY OF ANY UNRELATED BUSINESS INCOME, AND DOES NOT ALLOW RECOGNITION OF TAX POSITIONS WHICH DO NOT MEET A "MORE-LIKELY-THAN-NOT" THRESHOLD OF BEING SUSTAINED BY THE APPLICABLE TAX AUTHORITY. MANAGEMENT DOES NOT BELIEVE IT TOOK ANY TAX POSITIONS THAT WOULD NOT MEET THIS THRESHOLD.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

REVENUE FROM UNIVERSITY PROPERTIES, INC. 44,995.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

26,741. EXPENSES FROM UNIVERSITY PROPERTIES, INC.

PART XI, LINE 2D

REVENUE OF \$44,995 FROM UNIVERSITY PROPERTIES, INC., AN AFFILIATE, IS INCLUDED IN THE AUDITED FINANCIAL STATEMENTS, BUT NOT INCLUDED IN THE FORM 990.

PART XII, LINE 2D

EXPENSES OF \$26,741 FROM UNIVERSITY PROPERTIES, INC., AN AFFILIATE, ARE INCLUDED IN THE AUDITED FINANCIAL STATEMENTS, BUT NOT INCLUDED IN THE FORM 990.

FORM 990, PART XI, LINE 10

THE AUDITED FINANCIAL STATEMENTS WERE PREPARED ON A CONSOLIDATED BASIS. THE CONSOLIDATED NET INCOME(LOSS) EQUALS \$6,983,340. THE NET INCOME FOR THIS ENTITY ON AN UNCONSOLIDATED BASIS IS \$6,965,086. THE DIFFERENCE IS \$18,254, OR THE INCOME FOR UNIVERSITY PROPERTIES, INC.

Schedule D (Form 990) 2022

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

OMB No. 1545-0047

Name of the organization **Employer identification number** UNIVERSITY OF BALTIMORE FOUNDATION, 23-7036780 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? 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.) (b) Number of (e) If activity listed in (d) (f) Total (c) Number of (d) Activities conducted in the region (a) Region employees, expenditures offices (by type) (such as, fundraising, prois a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region CENTRAL AMERICA AND THE CARIBBEAN -ANTIGUA & BARBUDA, ARUBA, BAHAMAS INVESTMENTS ONLY 6,417,653. 0 6,417,653. 3 a Subtotal **b** Total from continuation 0 sheets to Part I Totals (add lines 3a

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Schedule F (Form 990) 2022

6,417,653.

and 3b)

Schedule F (Form 990) 2022

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.

(i) Method of valuation (book, FMV, appraisal, other)						!
(h) Description of noncash assistance						,
(g) Amount of noncash assistance					A	•
(f) Manner of cash disbursement					ecognized as a tax ivalency letter	
(e) Amount of cash grant					oreign country, r ion 501(c)(3) equ	
(d) Purpose of grant					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	
(c) Region					is listed above that are re r for which the grantee o	r entities
(b) IRS code section and EIN (if applicable)					recipient organization nization by the IRS, o	other organizations o
1 (a) Name of organization					2 Enter total number of a exempt 501(c)(3) organ	3 Enter total number of other organizations or entities

Schedule F (Form 990) 2022

23-7036780

Page 3

UNIVERSITY OF BALTIMORE FOUNDATION, INC.

Schedule F (Form 990) 2022

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

(h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance (f) Amount of noncash assistance (e) Manner of cash disbursement (c) Number of recipients cash grant Part III can be duplicated if additional space is needed. (b) Region (a) Type of grant or assistance

Schedule F (Form 990) 2022

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to 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	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)		X No
		Schedule F (Forn	n 990) 2022

232074 10-17-22

Schedule F (Form 990) 2022

SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization Employer identification number 23-7036780 UNIVERSITY OF BALTIMORE FOUNDATION, INC. Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations e X Solicitation of non-government grants X Internet and email solicitations Solicitation of government grants X Phone solicitations Special fundraising events X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) or entity (fundraiser) from activity fundraiser organization listed in col. (i) EAB GLOBAL, INC. - 2445 M ST Yes No Х NW, WASHINGTON, DC 20037 DIRECT MAIL 85,199 94,082 -8,883. WILSON-BENNETT TECHNOLOGY, INC - 2239 BILL FOSTER TELEMARKETING Х 7,534 62,761 -55,227. 92 733 156 843 -64 110. Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. MD, CA, CO, CT, FL, GA, IL, KY, MA, MI, MO, NJ, NY, OH, PA, TN, VA, WA, WV, AL, HI, MS, DC, AK, AR LA, ME, MN, NV, NH, NC, ND, OR, SC, UT

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SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990) 2022

		of fundraising event contributions and gro	oss income on Form 990- (a) Event #1	EZ, lines 1 and 6b. List e (b) Event #2	vents with gross receipt (c) Other events	
				(=)	(-,	(d) Total events (add col. (a) through
			(2002)	(a) (a) (b) (a)	(4-4-1)	col. (c))
ne			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts				
ď						
	2	Less: Contributions				
		Gross income (line 1 minus line 2)				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
"	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
xpe	ľ	Heritracinty costs				
SC E	7	Food and beverages				
Dire						
	8	Entertainment				
	9	Other direct expenses				
	10 11					
Pa	rt I			990, Part IV, line 19, or r	eported more than	l
		\$15,000 on Form 990-EZ, line 6a.				
Φ			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(*, 5	bingo/progressive bingo		col. (a) through col. (c))
Rev		Oraca valuation				
	1	Gross revenue				
"	2	Cash prizes				
nsea						
Expenses	3	Noncash prizes				
SC E	١.	Dest/fordity and				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	Ť		Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1. column (d)			
		riot garming moome carminary: east act into r	nomina i, column (a)			l .
9	En	ter the state(s) in which the organization condu	ıcts gaming activities:			
		he organization licensed to conduct gaming ac		states?		Yes No
b	I f "	No," explain:				
	_					
10a		ere any of the organization's gaming licenses re	evoked suspended orte	rminated during the tax v	rear?	Yes No
		Yes," explain:				
	_					
2320	32 10	D-27-22			Sche	dule G (Form 990) 2022

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Schedule G (Form 990) 2022 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780	Page 3
11 Does the organization conduct gaming activities with nonmembers? Yes	☐ No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	
to administer charitable gaming?	O No
13 Indicate the percentage of gaming activity conducted in:	
a The organization's facility	%
b An outside facility 13b	%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:	
Name	
Address	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes	☐ No
b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount	
of gaming revenue retained by the third party \$	
c If "Yes," enter name and address of the third party:	
Name	
Address	
16 Gaming manager information:	
Name	
Gaming manager compensation \$	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	☐ No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	
organization's own exempt activities during the tax year \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9,	9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:	
(I) NAME OF FUNDRAISER: WILSON-BENNETT TECHNOLOGY, INC	
(1) MEED OF TONDICTION. WILDON DEMNETT TECHNOLOGY, INC.	
(I) ADDRESS OF FUNDRAISER:	
2239 BILL FOSTER MEMORIAL HWY W, CABOT, AR 72023	

Schedule G	(Form 990)	UNIVERSITY	OF	BALTIMORE	FOUNDATION,	INC.	23-7036780	Page 4
Part IV	(Form 990) Supplemental Info	rmation (continued)						
		(ochtinaca)						
-								

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Employer identification number 23-7036780

		F BALT	IMORE FOUR	NDATION, INC.		23-7	036	<u> 780</u>	
Pai	t 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 de noncash contribu	termin	_	S
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	X	2	25,818	3.				
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 organi	zation during	the tax year for co	ontributions					
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29					
								Yes	No
30a	During the year, did the organization receive b	y contributio	n any property rep	orted in Part I, lines 1 thr	ough 28,	that it			
	must hold for at least 3 years from the date of	the initial co	ntribution, and whi	ch isn't required to be us	ed for				
	exempt purposes for the entire holding period	?					30a		Х
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance	policy that re	equires the review of	of any nonstandard contri	butions?	,	31	Х	
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell nonca	sh				
	contributions?		_	•			32a		Х
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in c	co l umn (c) fo	r a type of property	for which column (a) is c	hecked,				
	describe in Part II.								

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Schedule M	(Form 990) 2022	UNIVERSITY	OF BALTIMOR	E FOUNDATION,	, INC.	23-7036780	Page 2
Part II	Supplemental	Information Pro	ovide the information red	uired by Part I, lines 30b ne number of items receiv	, 32b, and 33,	and whether the organiza	ation
	is reporting in Part	I, column (b), the nur Iditional information.	mber of contributions, th	ie number of items receiv	ed, or a combi	ination of both. Also com	plete
	this part for any ac	iditional information.					
1							

Schedule M (Form 990) 2022

232142 09-09-22

SCHEDULE O (Form 990)

Department of the Treasury

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 Form 990-EZ.

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

2022
Open to Public Inspection

Internal Revenue Service

Name of the organization

UNIVERSITY OF BALTIMORE FOUNDATION, INC.

Employer identification number 23-7036780

ONLY DISCUSSION OF THE PROPERTY OF THE PROPERT
FORM 990, PART VI, SECTION B, LINE 11B:
THE AUDIT AND EXECUTIVE COMMITTEES OF THE BOARD ARE AUTHORIZED TO REVIEW
AND APPROVE THE FORM 990 PRIOR TO FILING. A COPY OF THE RETURN IS MADE
AVAILABLE TO ALL BOARD MEMBERS.
FORM 990, PART VI, SECTION B, LINE 12C:
THE CONFLICT OF INTEREST FORMS ARE REQUIRED TO BE COMPLETED AT THE
BEGINNING OF THE FISCAL YEAR.
FORM 990, PART VI, SECTION B, LINE 15:
THE COMPENSATION OF THE CFO WAS DETERMINED BASED ON MARKET FACTORS AND IN
CONSULTATION WITH AN INDEPENDENT RECRUITING FIRM. THE EXECUTIVE DIRECTOR
IS PAID BY THE UNIVERSITY AND AS SUCH IS SUBJECT TO THE UNIVERSITY'S
COMPENSATION STRUCTURE.
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
MD, CO, MA, MI, NJ, NY, OH, WA, CA, LA, ME, MN, NH, NC, ND, SC, UT, WA, AK, AR, OR
FORM 990, PART VI, SECTION C, LINE 19:
THESE DOCUMENTS ARE AVAILABLE UPON REQUEST.
PART XI, LINE 2C
THE AUDIT PROCESS WAS UNCHANGED, AND IS OVERSEEN BY THE AUDIT
COMMITTEE.

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

Schedule O (Form 990) 2022

scriedule O (Form 990) 2022	Page 2
lame of the organization UNIVERSITY OF BALTIMORE FOUNDATION, INC.	Employer identification number 23-7036780
SCHEDULE R, PART II:	
PURCHASES, LEASES, AND HOLDS TITLE TO BOTH REAL AND PERSON	AL PROPERTY
FOR THE BENEFIT OF THE FOUNDATION.	
	_
	_
	_

SCHEDULE R (Form 990) Name of the organization

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.

Open to Public Inspection

Employer identification number 23-7036780

2022

OMB No. 1545-0047

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

UNIVERSITY OF BALTIMORE FOUNDATION, INC.

Direct controlling 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. End-of-year assets **e** Total income ੁ Legal domicile (state or Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity PartII Part I

organizations during the tax year			,				
	(q)	(0)	(p)	(e)	(f)	(g)	(4.0)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 5 12(b)(15) controlled	(c) (n) ed
		ioreign country)		501(c)(3))		Yes	<u> </u> 2
UNIVERSITY PROPERTIES, INC 52-1040290							
01	SEE SCHEDULE O	MARYLAND	501(C)(2)		N/A		×

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

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Schedule R (Form 990) 2022

INC. UNIVERSITY OF BALTIMORE FOUNDATION, Schedule R (Form 990) 2022

Page 2

23-7036780

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

(j) (k) General or Percentage managing ownership partner?			
General or managing partner?			
Gene mana part			
(i) Code V-UBI amount in box Cod Schedule CO of Schedule K-1 (Form 1065)			
n) intionate			
(h) Disproportionate allocations?	8		
(g) Share of end-of-year assets			
(f) Share of total income			
(e) Predominant income (related, unrelated, excluded from tau under sections 512-514)	,		
(d) Direct controlling entity			
(c) Legal domicile (state or foreign			
(b) Primary activity			
(a) Name, address, and EIN of related organization			

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. Part IV

)(13) 0)(13) olled ty? No			
Section 512(b)(13) controlled entity?			
age hip			
(h) Percentage ownership			
(g) Share of end-of-year assets			
Sh: end-			
ta <u>l</u>			
(f) e of to come			
(f) Share of total income			
(e) Type of entity (C corp., S corp, or trust)			
(e) e of en rp, S o r trust)			
Type (C co			
(d) Direct controlling entity			
(d) contro entity			
Direct			
micile or gn try)			
(c) Legal domicile (state or foreign country)			
tivity			
(b) Primary activity			
Prim			
Z			
and EII			
(a) Iress, a organ			
(a) Name, address, and EIN of related organization			
Nam of n			

Schedule R (Form 990) 2022

Page 3

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

					ш	
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	ž
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?	is with one or more re	ated organizations listed i	in Parts II-IV?		-	ı,
a Receipt of (ii) interest, (iii) annuities, (iii) royalties, or (iv) rent from a controlled entity	λ ₁			1 a	1	◁
b Gift, grant, or capital contribution to related organization(s)				£		×
c Gift, grant, or capital contribution from related organization(s)				<u>ئ</u>		×
				7	ľ	þ
d Loans of Ioan guarantees to of for related organization(s)				Б	1	ا ۱
e Loans or loan guarantees by related organization(s)				1 e	`	×I
f Dividends from related organization(s)				#	. ,	×
a Sale of assets to related organization(s)				5		×
				5 5		l×
				=		،
i Exchange of assets with related organization(s)				=	+	₄¦⊳
j Lease of facilities, equipment, or other assets to related organization(s)				=	Ì	۷l
						,
k Lease of facilities, equipment, or other assets from related organization(s)				¥	_	×
l Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			=		×
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			Ē		×
Sharing of facilities equipment mailing lists or other assets with relati	ion(s)			Ę	×	
				Ş		
				2	:	
Doimhureamont paid to related organization(s) for avenueses				ţ	ľ	×
				₽ .	+	4
q Reimbursement paid by related organization(s) for expenses				ē	×	-
						:
				÷		×
s Other transfer of cash or property from related organization(s)				18		×I
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.	who must complete th	is line, including covered r	elationships and transaction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	nolved volved		
(1) UNIVERSITY PROPERTIES, INC.	N.	0				
(2)						
(4)						
(5)						
(9)						
232163 09-14-22			Schedule B (Form 990) 2022	R (Form	990) 2(020

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Schedule R (Form 990) 2022

Part VI

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

(k) Percentage ownership				
(j) General or managing partner? Yes No				
(h) (i) (j) (k) Disproportional propertional allocations 2 Code V-UBI ceneral or Percentage amount in box 20 partner? of Schedule K-1 partner? of Schedule K-1 (Form 1065) Pes No				
(h) Disproportionate allocations?				
(g) Share of end-of-year assets Ye				
(f) Share of total income				
(e) Are all partners sec. 501(c)(3) 0195.7 Yes No				
domicile Predominant income program (related, unrelated, unrelated, unrelated, sections 512-514)				
(c) Legal domicile (state or foreign country)				
(b) Primary activity				
(a) Name, address, and EIN of entity				

Schedule R	R (Form 990) 2022	UNIVERSITY	OF	BALTIMORE	FOUNDATION,	INC.	23-7036780	Page 5
Part VII	(Form 990) 2022 Supplemental Info	ormation						<u> </u>
	Provide additional infor	mation for responses to o	questi	ons on Schedule R.	See instructions.			

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

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

► Go to www.irs.gov/Form8621 for instructions and the latest information.

OMB No. 1545-1002

Attachment Sequence No. 69

Nam	e of sh	areholder	Identifying number (see instructions)
UN	IVE	RSITY OF BALTIMORE FOUNDATION, INC.	23-7036780
		reet, and room or suite no. If a P.O. box, see instructions. N. CHARLES STREET	Shareholder tax year: calendar year or other tax year beginning JUL 1 , 2022 and ending JUN 30, 2023 .
		n, state, and ZIP code or country MORE, MD 21201	
			p S Corporation Nongrantor Trust Estate
Che	ck if an	y Excepted Specified Foreign Financial Assets are reported on this form. See instructions .	
		nsurance Corporation Election-I, a shareholder of stock of a foreign corporation, elect to tro	
		Corporation under the alternative facts and circumstances test within the meaning of section gn corporation, passive foreign investment company (PFIC), or qualified electing fund (QEF)	Employer identification number (if any)
GO	LDM	AN SACHS US TREASURY LIQUID VES FUND	Employer dentinoation number (ii dity)
Addı	ress (Ei	nter number, street, city or town, and country.)	Reference ID number (see instructions) GS981351727
		CK TRUST LIMITED 70 SIR JOHN	Tax year of foreign corporation, PFIC, or QEF: Calendar year 2022
RO	GER	SON'S QUAY, DUBLIN, IRELAND EL 2	or other tax year beginning ,
	art I	Summary of Annual Information (see instructions)	and ending , .
_		following information with respect to all shares of the PFIC held by the shareholder:	
1		cription of each class of shares held by the shareholder: X CLASS SHARES	
		Check if shares jointly owned with spouse.	
2	Date	shares acquired during the tax year, if applicable:	
3	Num	ober of shares held at the end of the tax year:419 .	
4	Valu	e of shares held at the end of the tax year (check the appropriate box, if applicable):	
		X \$0-50,000 (b) \$50,001-100,000 (c) \$100,001-150,000	(d) \$150,001-200,000
	٠,	If more than \$200,000, list value:	
	_		
5		of PFIC and amount of any excess distribution or gain treated as an excess distribution un inclusion or deduction under section 1296 (check all boxes that apply):	der section 1291, inclusion under section 1293,
	(a)	Section 1291 \$	
	(b)	Section 1293 (Qualified Electing Fund) \$	
	(c)	Section 1296 (Mark to Market) \$	SEE STATEMENT 1
Р	art II		
A		Election To Treat the PFIC as a QEF. I, a shareholder of a PFIC, elect to treat the PFIC as	
В		Election To Extend Time For Payment of Tax. I, a shareholder of a QEF, elect to extend to of the QEF until this election is terminated. <i>Complete lines 8a through 9c of Part III to</i> Note: If any portion of line 6a or line 7a of Part III is includible under section 951, you ma 1294(o) and 1294(f) and the related regulations for events that terminate this election.	ne time for payment of tax on the undistributed earnings and profits of calculate the tax that may be deferred. y not make this election. Also, see sections
С		Election To Mark-to-Market PFIC Stock. I, a shareholder of a PFIC, elect to mark-to-mark	ket the PFIC stock that is marketable within the meaning of section
D		1296(e). Complete Part IV. Deemed Sale Election. I, a shareholder on the first day of a PFIC's first tax year as a QEF	, elect to recognize gain on the deemed sale of my interest in the
Е		PFIC. Enter gain or loss on line 15f of Part V. Deemed Dividend Election. I. a shareholder on the first day of a PFIC's first tax year as a	OFF that is a controlled foreign cornoration (CFC), elect to treat an
_		amount equal to my share of the post-1986 earnings and profits of the CFC as an excess	
F		excess distribution is greater than zero, also complete line 16 of Part V.	or a DELC to which coation 1907/d\ applica, cleat to treat as an every
•		Election To Recognize Gain on Deemed Sale of PFIC. I, a shareholder of a former PFIC distribution the gain recognized on the deemed sale of my interest in the PFIC on the last <i>gain on line 15f of Part V.</i>	
G		Deemed Dividend Election With Respect to a Section 1297(e) PFIC. I, a shareholder of 1.1297-3(a), elect to make a deemed dividend election with respect to the Section 1297(e) PFIC includes the CFC qualification date, as defined in Regulations section 1.1297-3(d).) PFIC. My holding period in the stock of the Section 1297(e)
		distribution is greater than zero, also complete line 16, Part V. Deemed Dividend Election With Respect to a Former PFIC. I, a shareholder of a former	
Н		elect to make a deemed dividend election with respect to the former PFIC. My holding per defined in Regulations section 1.1298-3(d). Enter the excess distribution on line 15e, complete line 16, Part V.	iod in the stock of the former PFIC includes the termination date, as

Form 8621 (Rev. 12-2018) Page 2 Income From a Qualified Electing Fund (QEF). All QEF shareholders complete lines 6a through 7c. If you are making Part III Election B, also complete lines 8a through 9c. See instructions. **6 a** Enter your pro rata share of the ordinary earnings of the QEF **b** Enter the portion of line 6a that is included in income under section 951 or that may be excluded under section 1293(a) 6h Subtract line 6b from line 6a. Enter this amount on your tax return as ordinary income 6c 7 a Enter your pro rata share of the total net capital gain of the QEF **b** Enter the portion of line 7a that is included in income under section 951 or that may be excluded under section 1293(a) Subtract line 7b from line 7a. This amount is a net long-term capital gain. Enter this amount in Part II of the Schedule D used for your income tax return. See instructions 7с Complete lines 8 and 9 only if you are making a section 1294 election (Election B) for the current tax year. 8 a Add lines 6c and 7c 8a Enter the total amount of cash and the fair market value of other property distributed or deemed distributed to you during the tax year of the QEF. See instructions 8b Enter the portion of line 8a not already included in line 8b that is attributable to shares in the QEF that you disposed of, pledged, or otherwise transferred during the tax year d Add lines 8b and 8c Subtract line 8d from line 8a, and enter the difference (if zero or less, enter amount in brackets) 8e Important: If line 8e is greater than zero, and no portion of line 6a or 7a is includible in income under section 951, you may make Election B with respect to the amount on line 8e. 9 a Enter the total tax for the tax year. See instructions **b** Enter the total tax for the tax year determined without regard to the amount entered on line 8e Subtract line 9b from line 9a. This is the deferred tax, the time for payment of which is extended by making Election B 9с Part IV Gain or (Loss) From Mark-to-Market Election (see instructions) 10a Enter the fair market value of your PFIC stock at the end of the tax year 10a **b** Enter your adjusted basis in the stock at the end of the tax year 10b c Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amount as ordinary income on your tax return. If a loss, go to line 11 10c 11 Enter any unreversed inclusions (as defined in section 1296(d)) 11 12 Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Include this amount as an ordinary loss on your tax return 12 13 If you sold or otherwise disposed of any section 1296 stock (see instructions) during the tax year: a Enter the fair market value of the stock on the date of sale or disposition 13a **b** Enter the adjusted basis of the stock on the date of sale or disposition c Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as ordinary income on your tax return. If a loss, go to line 14

14a Enter any unreversed inclusions (as defined in section 1296(d))

b Enter the loss from line 13c, but only to the extent of unreversed inclusions on line 14a. Include this amount as an ordinary loss on your tax return. If the loss on line 13c exceeds unreversed inclusions on line 14a, complete line 14c

c Enter the amount by which the loss on line 13c exceeds unreversed inclusions on line 14a. Include this amount on your tax

return according to the rules generally applicable for losses provided elsewhere in the Code and regulations

Note: See instructions in case of multiple sales or dispositions.

Form **8621** (Rev. 12-2018)

14a

14b

14c

Form 8621 (Rev. 12-2018) Page **3**

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

Form 8621 (Rev. 12-2018)

Form 8621 (Rev. 12-2018) Page 4

Part VI Status of Prior Year Section 1294 Elections and Termination of Section 1294 Elections

	Complete a se	eparate column for ea	ach outstandina elec	tion.			
	Complete lines 17 through						
	20 to report the status of						
	outstanding prior year						
	section 1294 elections.						
		(i)	(ii)	(iii)	(iv)	(v)	(vi)
17	Tax year of outstanding						
	election						
18	Undistributed earnings to						
	which the election relates						
19	Deferred tax						
	Interest accrued on deferred						
	tax (line 19) as of the filing						
	date						
	Complete lines 21 through						
	24 only if a section 1294						
	election is terminated in						
	the current year.						
21	Event terminating election						
22	Earnings distributed or						
	deemed distributed during						
	the tax year						
23	Deferred tax due with this						
	return						
24	Accrued interest due with						
_	this return						
	Complete lines 25 and 26						
	only if there is a partial						
	termination of a section						
	1294 election in the						
	current tax year.						
25	Deferred tax outstanding						
	after partial termination of						
	election. Subtract line 23						
	from line 19						
26	Interest accrued after partial						
	termination of election.						
	Subtract line 24 from line 20						

Form **8621** (Rev. 12-2018)

Return of U.S. Persons With Respect to Certain Foreign Partnerships Attach to your tax return. Go to www.irs.gov/Form8865 for instructions and the latest information.

OMB No. 1545-1668

Department of the Treasury Internal Revenue Service

Information furnished for the foreign partnership's tax year

beginning JAN 1, 2022, and ending DEC31 , 2022 Attachment Sequence No. 865

Name of person filing this return					s identifica		i		
				2	3-703	6780			
UNIVERSITY OF BALTIMORE	·	INC.							
Filer's address (if you aren't filing this form with your tax re	turn)	A Category o	f filer (see Categories	_		and check app	licable box(es)):		
		1	2	_	X	4			
		B Filer's tax y	лот т	,202	2 , and end	_{ing} JUN	30,2023		
<u>C</u> Filer's share of liabilities: Nonrecourse \$ 1	, 118 . Qualified nonr	ecourse financii	ng \$		Other	\$			
D If filer is a member of a consolidated group but not the	parent, enter the following	information abo	out the parent:						
Name Name				EIN					
Address									
E Check if any excepted specified foreign financial assets		See instructions	3						
F Information about certain other partners (see instruction	is)				1 40	0 1 1			
(1) Name	(2) Address		(3) Identification	number	<u> </u>	Check applica			
-					Category 1	Category 2	Constructive owner		
Od Name and address of familian newtoning					2(a) EIN	(if any)			
G1 Name and address of foreign partnership ACL ALTERNATIVE FUND SAC Li	TMTTED					-0066	5Ω1		
ACH ABIERMATIVE FOND SAC II.	IMITED					rence ID nu			
VICTORIA PLACE, 31 VICTORIA	A SABEEA				2(0) 11010	101100 10 110	THEO		
HAMILTON HM, BERMUDA	I DIKELI				3 Country	under who	se laws organized		
mand on mi, bandobii					BERMU		oo larro organizoa		
4 Date of 5 Principal place 5 of business	6 Principal business activity code number	7 Principal business activity 8a Functional currency 8b Exchange rate (see instruction							
01/04/2002BERMUDA		SECURITY TRADINUSD							
H Provide the following information for the foreign partner									
1 Name, address, and identification number of agent (if ar		2 Check if th	ne foreign partners	hip must fil	e:				
, , ,	• /		orm 1042	Form 88		Form 106	35		
		Service Ce	enter where Form 1	065 is filed	i:				
		E-FI							
3 Name and address of foreign partnership's agent in cou	ntry of organization, if any	/ 4 Name and a partnership,	ddress of person(s) wi and the location of su	th custody of ch books and	the books and I records, if dif	d records of th ferent	e foreign		
M. Q. SERVICES LIMITED			RIBAS BA						
VICTORIA PLACE, 31 VICTORIA	A ST		GHAM SQ,						
HAMILTON, HM BERMUDA			CAYMAN,		AN IS	LANDS	KY1-110		
5 During the tax year, did the foreign partnership pay or	accrue any interest or ro	alty for which t	he deduction is no	•					
						Yes	X No		
If "Yes," enter the total amount of the disallowed dedu						\$			
6 Is the partnership a section 721(c) partnership, as det		n 1.721(c)-1(b)	(14)?			Yes Yes	X No		
7 Were any special allocations made by the foreign part						Yes	X No		
8 Enter the number of Forms 8858, Information Return									
(FDEs) and Foreign Branches (FBs), attached to this r						D M M T O			
9 How is this partnership classified under the law of the					CORPO	KAIIO	IN .		
10 a Does the filer have an interest in the foreign partnersh									
separate unit under Regulations section 1.1503(d)-1(l	* * * * * * * * * * * * * * * * * * * *	·	-			Yes	X No		
	unit have a dual capaciida					res	A NO		
b If "Yes," does the separate unit or combined separate section 1.1503(d)-1(b)(5)(ii)?						Yes	No		
	iramente?					res	L NO		
Does this partnership meet both of the following requThe partnership's total receipts for the tax year we									
2. The value of the partnership's total assets at the er		than \$1 million	>			Yes	No		
If "Yes," don't complete Schedules L, M-1, and M-2.	ia oi tiio tax year was 1655	man wr minion	•]			168	NU		
LHA For Privacy Act and Paperwork Reduction Act Noti	an ena tha canarata inct	ruotione					Form 8865 (2022		

Form 886	orm 8865 (2022) UNIVERSITY OF							LTIM	ORE	FOUN	DATIC	N,	INC.				2	3-7	036	78	0	Page 2
b	resp Ente	ect to any r the amo	y transa ount of (ction wit gross red	th the fo	oreign p Ierived f	artner rom al	ship? If " I sales o	'Yes," co f genera	omplete lin al property	es 12b, 12 to the fore	c, and	under secti d 12d. See eartnership	instructior that the fil	ns Ier			_	Yes			No
	inclu	ıded in its	s compi	utation o	f FDDEI	l							n partnersh					_				
u		omputatio	-		•				•									_				
				foreign p	artners	subject	t to se	ction 864	4(c)(8) a	as a result	of transfer	ring a	all or a port	ion of an i	intere	est in						
14	At ar	ny time d	uring th	ie tax yea	ar were	any trai	nsfers	between	the par	tnership a	nd its partr	ners s	subject to t	he disclosi	ure				Yes] No
Sign Here if You're F This Form Separately Not With Y	i l ing	correct, a	and comp	olete. Decl	aration o	f prepare	r (other	than gener	ral partne				s and stateme ember) is bas									
Tax Return	n.	Signat/Type		of general p	oartner o	r limited l	liability		member arer's sigr	nature			1 (Date		_			PTIN	Date		
Paid			o proparo	· o namo												Che se l f	ck emp l oye	_l if [
Prepa Use	irer	Firm's n	ame										1		Fi	rm's E	IN					
Only		Firm's a	ddress												Р	hone r	0.					
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																					\dashv	
Sched	dule	A-1	Cer	tain Pa	artnei	s of F	oreig	ı gn Pari	tnersh	nip (see	instruct	tions	s)							I	!	
			Nar	ne							Address					Ident	ification	numbe	er (if any)			Check if foreign person
Sobor	ماريام	A 2	For	oian D	ortno	ro of G	20 oti	n 701	(a) Da	rtnorobi	in (222	inati	ruotiono)									
Sched Name o			Fore	eign P			Section	011 721	(C) Pa	rtnershi Country o	of		ructions) U.S. taxpa	yer	Chi	eck if re	lated to		Percer	ntage i	nteres	t
	tner	9"			Add	lress				organizati (if any)	on	id	dentification r (if any)	umber		l.S. tran		C	Capital		Pre	ofits
																				%		%
									<u></u>								<u> </u>			%		%
Sched	<u> </u>	nership h			<u> </u>					ine (forei	an or do		stic) in w	hich the	fore	ian r	L		es			No
Geriet	Juie	7-0								% interes		11168	suoj III W	inon the	1016	, igi i þ	ai ii ie	13111	JOWII	J		
			Nar	ne							Address					EIN (if any						Check ir foreign partner- ship
								 										+				+-

Form **8865** (2022)

SCHEDULE O (Form 8865)

Transfer of Property to a Foreign Partnership (Under Section 6038B)

(Rev. October 2021)
Department of the Treasury
Internal Revenue Service

► Attach to Form 8865. See the Instructions for Form 8865.

OMB No. 1545-1668

epartment of the Treasury ternal Revenue Service Go to www.irs.gov/Form8865 for instructions and the latest information.

Name of transfero		a = m = .	0 D. D. T. M		=0::3:5	3.037	T376	~	Filer's identi			
Name of foreign p			OF BALT ERNATIV					EIN (if any)	23-7	036780 Reference ID) number (see instr)
varne or foreign p	artificianip AC	ь Арт	CKNAIIV	E FOND	BAC	TIMITI		80-006	6581	Meletelloe IL	, iluliibei (acc man
1a Is the partr	nership a section 7:	21(c) partne	rship (as define	ed in Regulation	ons section	1.721(c)-1(l		•	•		Yes	No
	s the gain deferral									·	Yes	No
2 Was any in	tangible property t	ransferred c	onsidered or a	nticipated to b	e, at the tim	ne of the tran	isfer or at	any				_
	fter, a platform co			gulations secti	on 1.482-7((c)(1)?					Yes	No
Part I Tr	ansfers Reportabl	e Under Se	ction 6038B									
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market on date of tr		(d) Cost or o basis			(e) ry period	(f) Section 704 allocation me		(g) Gain recogn on transf	
Cash	12/31/22		497,	847.								
Stock, notes												
eceivable and payable,												
and other												
securities												
nventory												
Trivolition y												
angible												
oroperty used in trade						-						
or business												
ntangible												
property												
described in section												
197(f)(9)												
ntangible												
oroperty, other han intangible												
oroperty described in												
section 197(f)(9)												
Other												
property												
Fota l s			107	847.		-						
	I ansferor's percent	ago interest			the transfe)r 0	730	<u>L</u>	(b) After	the transfer	ΛQ	00 %
	ormation Required				tile transie	0	750	/0	(D) Altel	uic uansici	• 0 2	00 /8
арріошента іш			(000									
Part II D	ispositions Report	able Under	Section 6038B	}	_							
(a)	(b) Date of		(c) Date of	(d) Manner of		(e) Gain	Dei	(f) preciation	(g) Gain alloca	atod .	(h)	
Type of property	original		position	disposition	recog	nized by	re	ecapture cognized	to partne		Depreciati ecapture allo	
	transfer				parti	nership	by p	partnership	ļ		to partne	er
		_			-		-					
					1							
		-										
Part III Is	any transfer repor	ted on this o	schedule subjec	nt to gain reco	I Ignition und	er section Of	1 14(f)(3) ^	r section QN1/	<u> </u> 'f\(5\(F\?		Yes	X No
	any nanoni ropul	tou on tino t	JOHNOUGH SUDJE	or to gaill 1000	ginavii uilu	טו טטטנוטוו טע	, 1(1)(U) U	. 30000011 304(・ハンハ・ノ・		1 100	-7 IAO

210661 04-01-22

Schedule O (Form 8865) 10-2021

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 8865.

Return of U.S. Persons With Respect to Certain Foreign Partnerships

Attach to your tax return.

Go to www.irs.gov/Form8865 for instructions and the latest information.

OMB No. 1545-1668

Department of the Treasury Internal Revenue Service

Information furnished for the foreign partnership's tax year

31,2022

beginning JAN 1 , 2022, and ending DEC Name of person filing this return Filer's identification number 23-7036780 UNIVERSITY OF BALTIMORE FOUNDATION, INC. Filer's address (if you aren't filing this form with your tax return) Category of filer (see Categories of Filers in the instructions and check applicable box(es)): 3 **X** 2022 , and ending JUN В 30,202 JUL beginning Filer's share of liabilities: Nonrecourse \$ Qualified nonrecourse financing \$ Other \$ D If filer is a member of a consolidated group but not the parent, enter the following information about the parent: EIN Address Check if any excepted specified foreign financial assets are reported on this form. See instructions Information about certain other partners (see instructions) (4) Check applicable box(es) (1) Name (2) Address (3) Identification number Category 2 2(a) EIN (if any) **G1** Name and address of foreign partnership VINTAGE VII AIV OFFSHORE SCSP 98-1351727 2(b) Reference ID number 30 HUDSON ST JERSEY CITY, NJ 07302 3 Country under whose laws organized LUXEMBOURG 6 Principal business activity code number 4 Date of organization 5 Principal place of business Principal business activity 8a Functional currency <u>INV</u>ESTING 12/28/2017 LUXEMBOURG 523900 USD H Provide the following information for the foreign partnership's tax year: 1 Name, address, and identification number of agent (if any) in the United States 2 Check if the foreign partnership must file: Form 1042 Form 8804 X Form 1065 47 AVE J.F. KENNEDY Service Center where Form 1065 is filed: LUXEMBOURG L-1855 E-FILE Name and address of person(s) with custody of the books and records of the foreign 3 Name and address of foreign partnership's agent in country of organization, if any Name and address of person of such books and records, if differen
 partnership, and the location of such books and records, if differen During the tax year, did the foreign partnership pay or accrue any interest or royalty for which the deduction is not X No allowed under section 267A? See instructions Yes If "Yes," enter the total amount of the disallowed deductions Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)? Yes X No X No 7 Were any special allocations made by the foreign partnership? Enter the number of Forms 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), attached to this return. See instructions CORPORATION **9** How is this partnership classified under the law of the country in which it's organized? 10 a Does the filer have an interest in the foreign partnership, or an interest indirectly through the foreign partnership, that's a separate unit under Regulations section 1.1503(d)-1(b)(4) or part of a combined separate unit under Regulations section X No 1.1503(d)-1(b)(4)(ii)? If "No," skip question 10b Ves b If "Yes," does the separate unit or combined separate unit have a dual consolidated loss, as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? No 11 Does this partnership meet **both** of the following requirements? 1. The partnership's total receipts for the tax year were less than \$250,000. 2. The value of the partnership's total assets at the end of the tax year was less than \$1 million. No

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

Form 8865 (2022)

If "Yes," don't complete Schedules L, M-1, and M-2.

Form 886	65 (2	022)	UNI	VERS	ITY	OF	BA	LTIM	ORE	FOUN	DATIO	ON,	INC.				2	3-7	036	78	0	Page 2
b	resp Ente	ect to any r the amo	y transa ount of (ction wit gross red	th the fo	oreign p derived i	oartner from al	ship? If ' II sales o	"Yes," co of genera	omplete lin al property	to the fore	c, and	under secti d 12d. See eartnership	instructior that the fil	ns er			_	Yes] No
	inclu	ıded in its	s compi	utation o	f FDDEI	l							n partnersh					_				
u	Enter the amount of gross receipts derived from all services provided to the foreign partnership that the filer included in its computation of FDDEI																					
	Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in																					
the partnership or of receiving a distribution from the partnership At any time during the tax year were any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8? Yes] No													
Sign Here if You're F This Form Separately Not With Y	i l ing	correct, a	and comp	olete. Decl	aration o	of prepare	er (other	than gene	ral partne				s and stateme ember) is bas									
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								 													-	
Sched	dule	A-1	Cer	tain P	artnei	rs of F	orei	gn Par	tnersh	nip (see	instruc	tions	s)	<u> </u>								
			Nar	ne							Address					Ident	ification	numbe	er (if any)			Check if foreign person
Sched	مابيام	Λ2	For	oian D	ortno	rc of	Sooti	on 721	I/o\ Do	rtnorchi	in (600	inct	ructions)									
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partner Address		dress				organization (if any)		iden	dentification r (if any)	umber		Check if related to U.S. transferor			Capital F		Pro	ofits				
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Form **8865** (2022)

SCHEDULE O (Form 8865)

Transfer of Property to a Foreign Partnership (Under Section 6038B)

(Rev. October 2021) Department of the Treasury Internal Revenue Service

Attach to Form 8865. See the Instructions for Form 8865.

OMB No. 1545-1668

► Go to www.irs.gov/Form8865 for instructions and the latest information. Name of transferor Filer's identifying number 23-7036780 UNIVERSITY OF BALTIMORE FOUNDATION, Name of foreign partnership VINTAGE VII AIV OFFSHORE EIN (if any) Reference ID number (see instr) 98-1351727 1a Is the partnership a section 721(c) partnership (as defined in Regulations section 1.721(c)-1(b)(14))? See instructions No Yes **b** If "Yes," was the gain deferral method applied to avoid the recognition of gain upon the contribution of property? Yes No Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)? Yes Nο Transfers Reportable Under Section 6038B Part I (b) (d) (e) (f) (g) Date of Description Fair market value Cost or other Section 704(c) Gain recognized Type of property Recovery period transfer of property on date of transfer basis allocation method on transfer 12/31/22 421 Cash Stock, notes receivable and payable, and other securities Inventory Tangible property used in trade or business Intangible property described in section 197(f)(9) Intangible property, other than intangible property described in section 197(f)(9) Other property Totals 1,421. Enter the transferor's percentage interest in the partnership: (a) Before the transfer .0500 % (b) After the transfer .0500 Supplemental Information Required To Be Reported (see instructions): Dispositions Reportable Under Section 6038B Part II (f) Depreciation (a) (b) (d) (g) Date of Date of Manner of Gain Type of Gain allocated Depreciation recapture recognized by partnership recognized by partnership property original disposition disposition to partner recapture allocated transfer to partner Is any transfer reported on this schedule subject to gain recognition under section 904(f)(3) or section 904(f)(5)(F)?

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 8865.

Yes Schedule 0 (Form 8865) 10-2021

X

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

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 anv 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 filling 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. Taxpayer identification number (TIN) Type or Name of exempt organization or other filer, see instructions. print UNIVERSITY OF BALTIMORE FOUNDATION, 23-7036780 File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your 1130 N. CHARLES STREET return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. BALTIMORE, MD 21201 Enter the Return Code for the return that this application is for (file a separate application for each return) Application Return **Application** Return Is For Code Is For Code Form 990 or Form 990-EZ Form 1041-A 01 80 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 Form 990-T (corporation) THE ORGANIZATION • The books are in the care of ▶ 1130 N. CHARLES STREET - BALTIMORE, MD 21201 Telephone No. ► 410-837-6170 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 \blacktriangleright . If it is for part of the group, check this box \blacktriangleright and attach a list with the names and TINs of all members the extension is for. MAY 15, 2024 , to file the exempt organization return for I request an automatic 6-month extension of time until the organization named above. The extension is for the organization's return for: calendar year or $_{---}$, and ending $\,$ JUN $\,$ 30 , $\,$ 2023 ► X tax year beginning JUL 1, 2022 Final return Initial return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. 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 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. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions. LHA Form 8868 (Rev. 1-2022) For Privacy Act and Paperwork Reduction Act Notice, see instructions.

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FORM 8621 ADDITIONAL INFORMATION STATEMENT 1

NAME OF PASSIVE FOREIGN INVESTMENT COMPANY OR QUALIFIED ELECTING FUND

GOLDMAN SACHS US TREASURY LIQUID RESERVES FUND

	NUMBER OF SHARES	CHANGE	NUMBER OF SHARES	VALUE OF SHARES HELD
CLASS OF STOCK	AT BEGINING OF YEAR	IN NUMBER DATE COF SHARES CHANGE	F AT END	AT END OF YEAR
X CLASS SHARES	1,195.000	-776 . 000 12/31/2	2 419.000	971.00

For	Reportable Transaction	Disclosure \$	Statement	OMB No. 1545-1800			
(Re	Attachment Sequence No. 137						
nte	partment of the Treasury ernal Revenue Service Go to www.irs.gov/Form8886 for in	structions and the	latest information.	_			
Na	ame(s) shown on return (individuals enter last name, first name, middle initial)			Identifying number			
U.	NIVERSITY OF BALTIMORE FOUNDATION, INC	C.		23-7036780			
	ımber, street, and room or suite no.	City or town, s	tate, and ZIP code				
1	420 N. CHARLES STREET	BALTIMO	RE, MD 21201				
A	If you are filing more than one Form 8886 with your tax return, sequentially number for this Form 8886	er each Form 8886 atement number	and enter the statement number	of			
В	Enter the form number of the tax return to which this form is attached or related			▶ 990			
	Enter the year of the tax return identified above			▶ 06/30/2023			
				Yes X No			
<u>C</u>	Check the box(es) that apply. See instructions. Initial year filer	Protectiv	e disclosure				
1a	Name of reportable transaction						
1b	Initial year participated in transaction		1c Reportable transaction or	tax shelter registration number			
2	Identify the type of reportable transaction. Check all boxes that apply. See instruct	ions.					
-	a Listed c Contractual protein		Transaction of interest				
	b Confidential d X Loss		_				
3	If you checked box 2a or 2e, enter the published guidance number for the listed transaction of interest						
4	Enter the number of "same as or substantially similar" transactions reported on thi			<u> </u>			
5	If you participated in this reportable transaction through a partnership, S corporati						
	information below for the entity(ies). See instructions. (Attach additional sheets, if	necessary.)					
	a Type of entity Partnership Trust Partnership Trust						
S corporation Foreign S corporation Foreign							
	b Name						
	ACL ALTERNATIVE FUND SAC LIMITED						
	c Employer identification number (EIN), if known 80−0066581						
	d Date Schedule K-1 received from entity (enter						
	"none" if Schedule K-1 not received) • 09/10/2023						
6	Enter below the name and address of each individual or entity to whom you paid a	fee with regard to	the transaction if that individual o	r entity promoted, solicited, or			
	recommended your participation in the transaction, or provided tax advice related						
a	Name		Identifying number (if known)	Fees paid \$			
	Number, street, and room or suite no.			Φ			
	City or town, State, and ZIP code						
b	Name		Identifying number (if known)	Fees paid			
			, , ,	\$			
	Number, street, and room or suite no.						
_	City or town, State, and ZIP code						
210 04	DB11 -01-22 LHA For Paperwork Reduction Act Notice, see separate instructions.			Form 8886 (Rev. 12-2019)			

For Paperwork Reduction Act Notice, see separate instructions.

Form 8886 (Rev. 12-2019)	Page 2
7 Facts	
ldentify the type of tax benefit generated by the transaction. Check all the boxes that apply. See instructions. Deductions Exclusions from gross income Absence of adjustments to basis Tax cree Capital loss Nonrecognition of gain Deferral X Ordinary loss Adjustments to basis Other b Enter the total dollar amount of your tax benefits identified in 7a. See instructions c Enter the anticipated number of years the transaction provides the tax benefits stated in 7b. See instructions d Enter your total investment or basis in the transaction. See instructions	\$ \$
e Further describe the amount and nature of the expected tax treatment and expected tax benefits generated by the transaction each step of the transaction that relate to the expected tax benefits including the amount and nature of your investment. Inclu participation in the transaction and all related transactions regardless of the year in which they were entered into. Also, include protection with respect to the transaction.	de in your description your
STATEMENT PROVIDED BY THE PARTNERSHIP, ATTACHED TO THE SCHEDULE K-1 IS AVAILABLE UPON I	REQUEST. OWNERSHIP IN
THE PARTNERSHIP BY THE UNIVERSITY OF BALTIMORE FOUNDATION, INC. IS .09%.	
Identify all individuals and entities involved in the transaction that are tax-exempt, foreign, or related. Check the appropriate box(name(s), identifying number(s), address(es), and a brief description of their involvement. For each foreign entity, identify its coul each individual or related entity, explain how the individual or entity is related. Attach additional sheets, if necessary. a Type of individual or entity: Tax-exempt Foreign Related	•
Name	Identifying number
Address	
Description	
b Type of individual or entity: Tax-exempt Foreign Related	
Name	Identifying number
Address	
Description	
210812 04-01-22	Form 8886 (Rev. 12 - 2019)