# Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

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

A For the 2023 calendary year, or tax year beginning JUL 1, 2023 and ending JUN 30, 2024    Superior   Superio	Intern	al Reve	nue Service Go to www.irs.gov/Form990 for instructions and the	e latest in	iormation.	Inspection		
UNIVERSITY OF BALTIMORE FOUNDATION, INC.    Property   Doring business as   Number and street (or P.O. box if mail is not delivered to street address)   Room/suite   E telephone number   410 - 837 - 6170	A F	or the	lpha 2023 calendar year, or tax year beginning $$ JUL $$ $$ $$ JUL $$ $$ $$ $$ $$ 2 $$ $$ $$ and en	nding J	UN 30, 2024			
Contributions and grants (estimate of notividuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security of Total number of individuals employed in calendar year 2023 (Part VI, line 1a)   Security o	<b>B</b> c	heck if pplicabl	C Name of organization		D Employer identifie	cation number		
Doing Distribes 38		_]chang	UNIVERSITY OF BALTIMORE FOUNDATION, INC.					
Number and street (of P.D. too it flaulis and delivered to street aboriess)    Value		chang	Doing business as		23-70367	80		
1420 N. CHARLES STREET		Initial return	Number and street (or P.O. box if mail is not delivered to street address)	oom/suite	E Telephone numbe	 r		
City or town, state or province, country, and ziP or foreign postal code   BaLTITMORE, MD 21201   Holes in this a group return for subcrimates   Yes   X No Holes   SAME AS C ABOVE   Yes   No Holes   ABOVE   Yes   No Holes   ABOVE   Yes   No Holes   Yes   Yes   X No Holes   Yes		Final	1/20 N CUADIEC CODEED					
SALTITIORE, MD 21201		termin	_		G Gross receipts \$	41,315,728.		
SAME AS C ABOVE   Name and address of principal officer. JOAN WORTHINGTON   Holp)   Name and address of principal officer. JOAN WORTHINGTON   Holp)   Name and address of principal officer. JOAN WORTHINGTON   Name and address of the properties o					H(a) Is this a group re	eturn		
SAME AS C ABOVE		Application	F Name and address of principal officer: JOAN WORTHINGTON					
J Website: WWW.UBFOUNDATION.ORG K Form of organization: X Corporation Insulance Insula		pendir						
Part   Summary	ΙΤ	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		
Part   Summary	J۷	Vebsi	e: WWW.UBFOUNDATION.ORG		H(c) Group exemptio	n number		
Briefly describe the organization's mission or most significant activities:   ESTABLISHED TO RAISE, MANAGE FUNDS, AND PROVIDE FINANCIAL SUPPORT TO THE UNIVERSITY OF BAITTMORE.	K F	orm of	organization: X Corporation Trust Association Other	L Year o	of formation: 1969 N	M State of legal domicile: MD		
FUNDS   AND PROVIDE FINANCIAL SUPPORT TO THE UNIVERSITY OF BALITIMORE.	Pa	rt I	Summary					
FUNDS   AND PROVIDE FINANCIAL SUPPORT TO THE UNIVERSITY OF BALITIMORE.		1	Briefly describe the organization's mission or most significant activities: ESTABL	LISHE	D TO RAISE,	MANAGE		
5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue (more Part VIII, column (C), line 12 7 a Total unrelated business texable income from Form 990-T, Part I, line 11  8 Contributions and grants (Part VIII, line 1h) 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 1b) 9 Program service revenue (Part VIII, column (A), lines 3, 4, and 7d) 11 Olivestment income (Part VIII, column (N), lines 3, 4, and 7d) 11 Olive revenue (Part VIII, column (N), lines 3, 6, 6, 8e, 9c, 10c, and 11e) 12 Total revenue (Part VIII, column (N), lines 5, 6d, 8e, 9c, 10c, and 11e) 13 Grants and similar amounts paid (Part IX, column (A), line 12) 14 Benefits paid to or for members (Part IX, column (A), line 11) 15 Salaries, other compensation, employee benefits (Part IX, column (A), line 510) 16 Salaries, other compensation, employee benefits (Part IX, column (A), line 510) 17 Other expenses (Part IX, column (A), line 11e) 18 Total fundraising expenses (Part IX, column (A), line 25) 19 Revenue less expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 29 Total assets (Part X, line 16) 20 Total assets (Part X, line 16) 20 Total assets (Part X, line 16) 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 16) 22 Net assets or fund balances. Subtract line 21 from line 20 21 Total liabilities (Part X, line 26) 22 Total assets (Part X, line 16) 23 Form Additional Part (Part X) line 25 (Part X) line 25 (Part X) line 25 (Part X) line 26 (Part X)	nce		FUNDS, AND PROVIDE FINANCIAL SUPPORT TO THE	E UNI	VERSITY OF	BALTIMORE.		
5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue (more Part VIII, column (C), line 12 7 a Total unrelated business texable income from Form 990-T, Part I, line 11  8 Contributions and grants (Part VIII, line 1h) 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 1b) 9 Program service revenue (Part VIII, column (A), lines 3, 4, and 7d) 11 Olivestment income (Part VIII, column (N), lines 3, 4, and 7d) 11 Olive revenue (Part VIII, column (N), lines 3, 6, 6, 8e, 9c, 10c, and 11e) 12 Total revenue (Part VIII, column (N), lines 5, 6d, 8e, 9c, 10c, and 11e) 13 Grants and similar amounts paid (Part IX, column (A), line 12) 14 Benefits paid to or for members (Part IX, column (A), line 11) 15 Salaries, other compensation, employee benefits (Part IX, column (A), line 510) 16 Salaries, other compensation, employee benefits (Part IX, column (A), line 510) 17 Other expenses (Part IX, column (A), line 11e) 18 Total fundraising expenses (Part IX, column (A), line 25) 19 Revenue less expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 29 Total assets (Part X, line 16) 20 Total assets (Part X, line 16) 20 Total assets (Part X, line 16) 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 16) 22 Net assets or fund balances. Subtract line 21 from line 20 21 Total liabilities (Part X, line 26) 22 Total assets (Part X, line 16) 23 Form Additional Part (Part X) line 25 (Part X) line 25 (Part X) line 25 (Part X) line 26 (Part X)	rna	2	Check this box if the organization discontinued its operations or disposed	d of more	than 25% of its net ass	sets.		
5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue (more Part VIII, column (C), line 12 7 a Total unrelated business texable income from Form 990-T, Part I, line 11  8 Contributions and grants (Part VIII, line 1h) 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 1b) 9 Program service revenue (Part VIII, column (A), lines 3, 4, and 7d) 11 Olivestment income (Part VIII, column (N), lines 3, 4, and 7d) 11 Olive revenue (Part VIII, column (N), lines 3, 6, 6, 8e, 9c, 10c, and 11e) 12 Total revenue (Part VIII, column (N), lines 5, 6d, 8e, 9c, 10c, and 11e) 13 Grants and similar amounts paid (Part IX, column (A), line 12) 14 Benefits paid to or for members (Part IX, column (A), line 11) 15 Salaries, other compensation, employee benefits (Part IX, column (A), line 510) 16 Salaries, other compensation, employee benefits (Part IX, column (A), line 510) 17 Other expenses (Part IX, column (A), line 11e) 18 Total fundraising expenses (Part IX, column (A), line 25) 19 Revenue less expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 29 Total assets (Part X, line 16) 20 Total assets (Part X, line 16) 20 Total assets (Part X, line 16) 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 16) 22 Net assets or fund balances. Subtract line 21 from line 20 21 Total liabilities (Part X, line 26) 22 Total assets (Part X, line 16) 23 Form Additional Part (Part X) line 25 (Part X) line 25 (Part X) line 25 (Part X) line 26 (Part X)	ove.	3	Number of voting members of the governing body (Part VI, line 1a)		3			
B Net unrelated business taxable income from Form 990-T, Part I, line 11		4	Number of independent voting members of the governing body (Part VI, line 1b)		4	14		
B Net unrelated business taxable income from Form 990-T, Part I, line 11	S &	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)		5			
B Net unrelated business taxable income from Form 990-T, Part I, line 11	Ζţ	6	Total number of volunteers (estimate if necessary)					
B Net unrelated business taxable income from Form 990-T, Part I, line 11	Ċ	7 a	Total unrelated business revenue from Part VIII, column (C), line 12					
8   Contributions and grants (Part VIII, line 1h)   6,644,300. 9,029,822.	_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>				
9								
Total revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 1uc, and 11e)  12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)  13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)  14 Benefits paid to or for members (Part IX, column (A), lines 4)  15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  16 Professional fundraising fees (Part IX, column (A), line 25)  17 Other expenses (Part IX, column (A), line 25)  18 Total expenses (Part IX, column (A), line 25)  19 Total fundraising expenses (Part IX, column (A), line 25)  19 Total expenses (Part IX, column (A), line 25)  10 Total expenses (Part IX, column (A), line 25)  10 Total assets (Part IX, column (A), line 25)  11 Total expenses (Part IX, column (A), line 25)  12 Total assets (Part X, line 16)  13 Beginning of Current Year  14 Benefits paid to or for members (Part IX, column (A), line 25)  15 (240, 336 . 5, 628, 864 . 5, 701, 561 . 6, 140, 204 . 19, 100, 100, 100, 100, 100, 100, 100,	Ф	8	Contributions and grants (Part VIII, line 1h)					
Total revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 1uc, and 11e)  12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)  13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)  14 Benefits paid to or for members (Part IX, column (A), lines 4)  15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  16 Professional fundraising fees (Part IX, column (A), line 25)  17 Other expenses (Part IX, column (A), line 25)  18 Total expenses (Part IX, column (A), line 25)  19 Total fundraising expenses (Part IX, column (A), line 25)  19 Total expenses (Part IX, column (A), line 25)  10 Total expenses (Part IX, column (A), line 25)  10 Total assets (Part IX, column (A), line 25)  11 Total expenses (Part IX, column (A), line 25)  12 Total assets (Part X, line 16)  13 Beginning of Current Year  14 Benefits paid to or for members (Part IX, column (A), line 25)  15 (240, 336 . 5, 628, 864 . 5, 701, 561 . 6, 140, 204 . 19, 100, 100, 100, 100, 100, 100, 100,	nue	9	Program service revenue (Part VIII, line 2g)					
Total revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 1uc, and 11e)  12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)  13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)  14 Benefits paid to or for members (Part IX, column (A), lines 4)  15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  16 Professional fundraising fees (Part IX, column (A), line 25)  17 Other expenses (Part IX, column (A), line 25)  18 Total expenses (Part IX, column (A), line 25)  19 Total fundraising expenses (Part IX, column (A), line 25)  19 Total expenses (Part IX, column (A), line 25)  10 Total expenses (Part IX, column (A), line 25)  10 Total assets (Part IX, column (A), line 25)  11 Total expenses (Part IX, column (A), line 25)  12 Total assets (Part X, line 16)  13 Beginning of Current Year  14 Benefits paid to or for members (Part IX, column (A), line 25)  15 (240, 336 . 5, 628, 864 . 5, 701, 561 . 6, 140, 204 . 19, 100, 100, 100, 100, 100, 100, 100,	ě							
13   Grants and similar amounts paid (Part IX, column (A), lines 1:3)	<u> </u>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)					
14   Benefits paid to or for members (Part IX, column (A), line 4)   0 .		12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)					
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)   398, 813.   460, 137.   16a Professional fundraising fees (Part IX, column (A), line 11e)   62, 412.   51, 203.   17 Other expenses (Part IX, column (A), line 25)   292, 569.   18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)   5, 701, 561.   6, 140, 204.   19 Revenue less expenses. Subtract line 18 from line 12   2, 636, 122.   5, 665, 022.   20 Total assets (Part X, line 16)   95, 943, 538.   108, 077, 728.   21 Total liabilities (Part X, line 26)   94, 376, 304.   105, 891, 542.   22 Net assets or fund balances. Subtract line 21 from line 20   94, 376, 304.   105, 891, 542.   23 Signature Block  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.    Amy Shaver   Signature   Preparer's signatur		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)					
16a Professional fundraising fees (Part IX, column (A), line 11e)   62,412.   51,203.     b Total fundraising expenses (Part IX, column (D), line 25)   292,569.     17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)   5,240,336.   5,628,864.     18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)   2,701,561.   6,140,204.     19 Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     20 Total assets (Part X, line 16)   95,943,538.   108,077,728.     21 Total liabilities (Part X, line 26)   1,567,234.   2,186,186.     22 Net assets or fund balances. Subtract line 21 from line 20   94,376,304.   105,891,542.     Part II   Signature Block   Signature Block   Signature Good Frequence (other than officer) is based on all information of which preparer has any knowledge.     Amy Shaver   1/6/25     Signature of officer   Date   Susan Keller   Print/Type preparer's name   Preparer's signature of officer   Date   Print/Type preparer's name   Preparer's signature of officer   Po0245169     Preparer   Susan Keller   Susan Keller   Firm's aidress   400 East Pratt St. Suite 200   BaltTimore, MD 21202   Phone no. 410-727-5735								
18   Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)   5,701,561.   6,140,204.     19   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     19   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     19   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   2,636,136.   2,636,136.   2,636,136.   2,6	es							
18   Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)   5,701,561.   6,140,204.     19   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     19   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     19   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   2,636,136.   2,636,136.   2,636,136.   2,6	šuš			<u> </u>	62,412.	51,203.		
18   Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)   5,701,561.   6,140,204.     19   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     19   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     19   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   5,665,022.     10   Revenue less expenses. Subtract line 18 from line 12   2,636,122.   2,636,136.   2,636,136.   2,636,136.   2,6	ğ		* · · · · · · · · · · · · · · · · · · ·		E 040 226	F 600 064		
19 Revenue less expenses. Subtract line 18 from line 12  2,636,122. 5,665,022.  Beginning of Current Year End of Year  95,943,538. 108,077,728.  21 Total liabilities (Part X, line 26)  Net assets or fund balances. Subtract line 21 from line 20  Part II Signature Block  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.  Any Shaves  Signature of officer  AMY SHAVER, CFO  Type or print name and title  Print/Type preparer's name  SUSAN KELLER  Preparer's signature of the signa	ш	ı						
Beginning of Current Year   End of Year   95,943,538   108,077,728   1,567,234   2,186,186   1,567,234   2,186,186   1,567,234   2,186,186   1,567,234   1,567,2		l						
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.    Amy Shaver   1/6/25			Revenue less expenses. Subtract line 18 from line 12					
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.    Amy Shaver   1/6/25	ts or							
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.    Amy Shaver   1/6/25	sset 3ala	20						
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.    Amy Shaver   1/6/25	et A	21						
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.    Amy Shaver					34,370,304.	103,031,342.		
true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.    Amy Shaver   1/6/25				nd etatomo	nte, and to the heet of my	knowledge and helief it is		
Sign   Here   AMY SHAVER, CFO   Type or print name and title  Print/Type preparer's name   Preparer's signature   SUSAN KELLER   Preparer   SUSAN KELLER   Prim's name   ELLIN & TUCKER, CHARTERED   Firm's address   400 EAST PRATT ST. SUITE 200   BALTIMORE, MD 21202   Phone no. 410 - 727 - 5735						Kilowieuge aliu bellei, it is		
Sign Signature of officer  Here AMY SHAVER, CFO Type or print name and title  Print/Type preparer's name SUSAN KELLER Prim's name Firm's name Firm's name Firm's address  400 EAST PRATT ST. SUITE 200 BALTIMORE, MD 21202  Pote  Date  Print/Type Date 12/18/24  Firm's EIN 52-0959934  Phone no. 410-727-5735	uue,	COLLEC		ii preparer i	<del></del>			
Here AMY SHAVER, CFO Type or print name and title  Print/Type preparer's name SUSAN KELLER Prim's name Firm's name SUSAN KELLER SUSAN KELLER Prim's name Firm's name SUSAN KELLER Firm's name Firm's name SUSAN KELLER Firm's name Firm's name Firm's address 400 EAST PRATT ST. SUITE 200 BALTIMORE, MD 21202 Phone no. 410-727-5735	Cia.							
Type or print name and title  Print/Type preparer's name Print/Type preparer's name Preparer  SUSAN KELLER Prim's name ELLIN & TUCKER, CHARTERED Firm's address 400 EAST PRATT ST. SUITE 200 BALTIMORE, MD 21202 Phone no. 410-727-5735					2410			
Print/Type preparer's name SUSAN KELLER SUSAN KELLER 12/18/24  Firm's name SUSAN KELLER  Preparer's signature  12/18/24  Firm's name Firm's elin 52-0959934  Firm's address Firm's address Firm's address BALTIMORE, MD 21202  Phone no. 410-727-5735	пег	e						
Paid         SUSAN KELLER         SUSAN KELLER         12/18/24   self-employed         P00245169           Preparer         Firm's name         ELLIN & TUCKER, CHARTERED         Firm's EIN 52-0959934           Use Only         Firm's address         400 EAST PRATT ST. SUITE 200         Phone no. 410-727-5735			**	. O 0 . A D	Date Check	PTIN		
Preparer Use Only         Firm's name         ELLIN & TUCKER, CHARTERED         Firm's EIN 52-0959934           Use Only         Firm's address         400 EAST PRATT ST. SUITE 200         Phone no.410-727-5735	Paid	1	SIISAN KELLER SIGNAM KELLER	ا ا	40/40/04 if L			
Use Only Firm's address 400 EAST PRATT ST. SUITE 200 Phone no.410-727-5735								
BALTIMORE, MD 21202 Phone no. 410 - 727 - 5735					THIIIS EIN J	<u> </u>		
	030	Jy			Phone no 41	0-727-5735		
	May	the IF	-		I i none no. 22	X Yes No		

# UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Page 2 Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: TO RAISE AND MANAGE FUNDS AND TO PROVIDE FINANCIAL SUPPORT TO THE UNIVERSITY OF BALTIMORE. THE FOUNDATION PROVIDES LEADERSHIP, GUIDANCE, AND SUPPORT TO THE UNIVERSITY'S ADMINISTRATION IN ADVANCING THE MISSION AND VISION OF THE UNIVERSITY. 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. Did the organization cease conducting, or make significant changes in how it conducts, any program services? \_\_\_\_\_\_\_ Yes X No If "Yes," describe these changes on Schedule O. 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. 76,789. (Code: \_\_\_\_\_\_) (Expenses \$ \_\_\_\_\_\_4 , 908 , 487 • including grants of \$ \_\_\_\_\_ ) (Revenue \$ 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. (Code: ) (Expenses \$ (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$

including grants of \$

4,908,487.

Total program service expenses

Other program services (Describe on Schedule O.)

## Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
·	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	Ť		
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
′		7		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		v	
_	Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			7,7
	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?  f "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		Х
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	<u> </u>		
ızu	, , ,	12a		х
h	Schedule D, Parts XI and XII	IZa		
b		12b	Х	
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	13	- 41	Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		Х	
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b		
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			٦,
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
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	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	and the second s	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

	990 (2023) UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036	780	P	age <b>4</b>
Pai	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
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			
		25b		Х
26	Schedule L, Part I  Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	•	21		21
20	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?     F   Control   Control	00-		Х
	"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		Λ
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			v
	"Yes," complete Schedule L, Part IV	28c	Х	X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Λ	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
	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		Λ
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			37
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			7.7
	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	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
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	X	
Pai	Note: All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

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Form **990** (2023)

(gambling) winnings to prize winners?

Form 990 (2023)

UNIVERSITY OF BALTIMORE FOUNDATION, INC.

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 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		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		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
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		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
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	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
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		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? $\dots$	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
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	-		
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders Gross income from other sources. (Do not net amounts due or paid to other sources against	1		
b				
120	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	iza		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
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	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
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		Х
	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.			

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

	Charle if Cahadula O contains a response or pate to any line in this Bort VI			X					
Sec	Check if Schedule O contains a response or note to any line in this Part VI tion A. Governing Body and Management			Δ					
360	tion A. Governing body and Management		Vaa	N <sub>0</sub>					
10	Enter the number of voting members of the governing body at the end of the tax year 14		Yes	No					
ıa	Enter the number of voting members of the governing body at the end of the tax year 1a 15 there are material differences in voting rights among members of the governing body, or if the governing	4							
	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								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	┧							
2	officer director twister or less completes	2		х					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
Ū	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		х					
	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?									
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a		X					
	persons other than the governing body?	7b		x					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
a The governing body?									
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>b</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	X						
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	Х						
14	Did the organization have a written document retention and destruction policy?	14	Х						
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?								
	The organization's CEO, Executive Director, or top management official	15a	X						
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		X					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
	exempt status with respect to such arrangements?	16b							
	tion C. Disclosure		3677	101					
17	List the states with which a copy of this Form 990 is required to be filedMD , CO , MA , MI , NJ , NY , OH , WA , CA								
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)	availal	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, an	d finan	cial						
	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's books and records THE ORGANIZATION $-410-837-6170$								
	1420 N. CHARLES STREET, BALTIMORE, MD 21201								
332006	SEE SCHEDULE O FOR FULL LIST OF STATES	Forn	990	(2023)					

# 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	not cl	Pos	ition more	than o	one	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee		irecto		tee)	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) AMY D. SHAVER	40.00								_	
CFO (AS OF 7/5/23)				Х				63,354.	0.	16,019.
(2) NINA YUDELL	1.00	1								_
DIRECTOR/ IMMEDIATE PAST C		Х						0.	0.	0.
(3) JOAN WORTHINGTON CHAIR	5.00	x		Х				0.	0.	0.
(4) MICHAEL L. CURRY	1.00									
SECRETARY		Х		х				0.	0.	0.
(5) CYNTHIA H. JONES	1.00								-	
DIRECTOR		Х						0.	0.	0.
(6) BARNETT BROOKS	1.00									
DIRECTOR		Х						0.	0.	0.
(7) R. THOMAS CRAWFORD	1.00									
DIRECTOR		Х						0.	0.	0.
(8) JEFF GLOCK	1.00									
DIRECTOR		Х						0.	0.	0.
(9) CARMINE D'ALESSANDRO	1.00									
DIRECTOR		X						0.	0.	0.
(10) ARTHUR E. FLACH	5.00									
VICE-CHAIR		X		Х				0.	0.	0.
(11) PIERCE FLANIGAN, IV	1.00									
DIRECTOR		Х						0.	0.	0.
(12) RICHARD A. SNELLINGER	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								_	_
EXECUTIVE DIRECTOR				X				0.	0.	0.
(16) DAN MORRISON	1.00							_		_
DIRECTOR	4 22	Х				_		0.	0.	0.
(17) PHAEDRA STEWART	1.00	<b> </b>								_
DIRECTOR		X						0.	0.	<b>0.</b>

332007 12-21-23

Part VII   Section A. Officers, Directors, Trust	ees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)			(0	C)			(D)	(E)		(F)	
Name and title	Average	(da		Pos		<b>)</b> than o		Reportable	Reportable		Estimate	ed
	hours per	box	, unles	ss per	rson i	s both	n an	compensation	compensation		amount	of
	week	offi	cer an	id a di	irecto	r/trus	tee)	from	from related		other	
	(list any	ector						the	organizations		compensa	tion
	hours for	r dire				gg gg		organization	(W-2/1099-MISC/	/	from th	е
	related	steec	ruste			ensa		(W-2/1099-MISC/	1099-NEC)		organizat	
	organizations	al tru:	onal t		loyee	com g		1099-NEC)			and relat	
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				organizati	ons
	,	ы	ılıs	JJ0	Ke	ë, Ë	요			$\dashv$		
(18) STUART J. SILBERG	1.00								•			^
EX-OFFICIO / DIRECTOR EMERITUS		Х						0.	0	١.		0.
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4h Cubbabal			<u> </u>		<u> </u>			63,354.	0	١.	16,0	1 0
1b Subtotal	0						•	0.00,004.		).	10,0	0.
c Total from continuation sheets to Part VII								63,354.		).	16,0	
d Total (add lines 1b and 1c)										•	10,0	<u> </u>
2 Total number of individuals (including but no	ot ilmited to th	ose	liste	a ab	ove	) wn	o re	eceived more than \$100,	000 of reportable			0
compensation from the organization										—	Yes	No
										ſ	res	NO
3 Did the organization list any former officer,												
line 1a? If "Yes," complete Schedule J for so											3	Х
4 For any individual listed on line 1a, is the su												
and related organizations greater than \$150	,000? If "Yes,	" co	mple	ete S	Sche	edule	Jf	or such individual		.	4	Х
5 Did any person listed on line 1a receive or a	ccrue comper	ısati	on fr	om	any	unre	elate	ed organization or individ	lual for services			
rendered to the organization? If "Yes," com	plete Schedule	e J f	or su	ıch r	oers	on .					5	X
Section B. Independent Contractors												
1 Complete this table for your five highest cor	mpensated inc	lepe	nder	nt co	ontra	acto	rs th	nat received more than \$	100,000 of compen	ısat	ion from	
the organization. Report compensation for t	he calendar ye	ear e	ndir	ng w	ith c	or wi	thin	the organization's tax y	ear.			
(A)								(B)			(C)	
Name and business	address	NC	ONE	3				Description of s	ervices	C	ompensatio	n
							一					
							$\dashv$			_		
2 Total number of independent contractors (in	oluding but s	ot li-	nitos	1 + 2 +	than	o lic	+04	abovo) who received me	oro than			
2 Total number of independent contractors (ir		טנ וור	intec	וטו	tnos <b>1</b>		ieu	above) who received mo	חופווו די וו			

		Check if Schedule O contains a response	or note to any line	e in this Part VIII			
		Cricer in Correction C Correction	or more to arry min	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
S (0	1 2	Federated campaigns 1a					
ant	h	Membership dues 1b					
S S		Fundraising events 1c	28,750.				
fts,	-	Related organizations 1d	20,700.				
ig ig	•		102,015.				
Sin		Government grants (contributions)  All other contributions, gifts, grants, and					
e të	'		8,899,057.				
ē.	_		367,960.				
Contributions, Gifts, Grants and Other Similar Amounts	9	Noncash contributions included in lines 1a-1f 1g \$	307,300.	9,029,822.			
Oe	- "	Total. Add lines 1a-1f	Business Code	3,023,022.			
_	2 a	PROGRAM INCOME	900099	69,175.	69,175.		
/ice	2 a	•	300033	05,175.	05,175.		
er, ue	b						
m S	C	•					_
gra Re	d						
Program Service Revenue	e	All other program service revenue					
_		Total. Add lines 2a-2f		69,175.			
	3	Investment income (including dividends, inter		05,270			
	3			2,601,561.			2601561.
	4	other similar amounts) Income from investment of tax-exempt bond		2,002,002.			
	5	Royalties	Г				
	3	(i) Real	(ii) Personal				
	6 -		(.,,				
		Gross rents 6a 6b 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)					
		Gross amount from sales of (i) Securities	(ii) Other				
	, ,	assets other than inventory <b>7a</b> 29,588,806	<del>- ``</del>				
	h	Less: cost or other basis					
Φ		and sales expenses <b>7b</b> 29,473,024					
nu.	_	Gain or (loss) 7c 115,782	-				
her Revenue		Net gain or (loss)		115,782.			115,782.
푸		Gross income from fundraising events (not					
Oth	0 0	including \$ 28,750. of					
		contributions reported on line 1c). See					
		Part IV, line 18	18,750.				
	h	Less: direct expenses 8	<del>'                                    </del>				
		Net income or (loss) from fundraising events		-18,728.			-18,728.
		Gross income from gaming activities. See		,,			,
	0 0	Part IV, line 19 9a					
	h	Less: direct expenses					
		Net income or (loss) from gaming activities	,				
		Gross sales of inventory, less returns					
		and allowances10	a				
	b	Less: cost of goods sold 10					
		Net income or (loss) from sales of inventory	-				
			Business Code				
Miscellaneous Revenue	11 a	MISCELLANEOUS INCOME	611110	7,614.	7,614.		
nnec	b						
ella	c						
lisc	d	All other revenue					
2	е	Total. Add lines 11a-11d		7,614.			
		Total revenue See instructions		11 805 226.	76 789.	0.	2698615.

332009 12-21-23

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising (C) Management and general expenses Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ...... Benefits paid to or for members ..... Compensation of current officers, directors, 158,745. 158,745. trustees, and key employees ..... Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 218,674. 218,674. Other salaries and wages 7 Pension plan accruals and contributions (include 30,702. 30,702. section 401(k) and 403(b) employer contributions) 25,987. 25,987. Other employee benefits 9 26,029. 26,029. 10 Payroll taxes Fees for services (nonemployees): Management 6,159. 2,315. 1,589. 2,255. Legal 39,643. 39,643. Accounting Lobbying 51,203 51,203. Professional fundraising services. See Part IV, line 17 219,574. 219,574. Investment management fees ..... Other. (If line 11g amount exceeds 10% of line 25, 284,849. 127,659. 64,971 92,219. column (A), amount, list line 11g expenses on Sch O.) 116,580. 116,580. Advertising and promotion 12 21,475. 21,475. Office expenses 13 177,749. 56,522. 106,796. 14,431. Information technology 14 15 Royalties 16 Occupancy 167,177. 156,092. 10,043. 1,042. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 396,593. 372,744. 21,361. 2,488. 19 Conferences, conventions, and meetings 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 14,689. 14,689. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 2,863,306. 2,863,306. STUDENT/FACULTY SUPPORT OTHER PROGRAM SUPPORT 1,119,295. 1,119,295. 201,775. c MISCELLANEOUS 72,499. 345. 128,931. d All other expenses 6,140,204. 4,908,487. 939,148. 292,569. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined

Form **990** (2023)

Check here

educational campaign and fundraising solicitation.

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

# Form 990 (2023) Part X | Balance Sheet

<u>Par</u>	t X	Balance Sheet				
		Check if Schedule O contains a response or no	ote to any line in this Part X			
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		14,503,054.	1	19,182,327
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		5,991,717.	3	5,256,559
	4	Accounts receivable, net		17,970.	4	19
	5	Loans and other receivables from any current				
		trustee, key employee, creator or founder, sub	stantial contributor, or 35%			
		controlled entity or family member of any of the	ese persons		5	
	6	Loans and other receivables from other disqua	llified persons (as defined			
		under section 4958(f)(1)), and persons describe		6		
t2	7	Notes and loans receivable, net		7		
Assets	8	Inventories for sale or use		8		
۲	9	Prepaid expenses and deferred charges		82,413.	9	86,987
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation			10c	50 405 440
	11	Investments - publicly traded securities		52,499,141.	11	59,495,418 23,602,134
	12	Investments - other securities. See Part IV, line	22,394,959.		23,602,134	
	13	Investments - program-related. See Part IV, line		13		
	14	Intangible assets		454 204	14	454 204
	15	Other assets. See Part IV, line 11	454,284.	15	454,284	
	16	Total assets. Add lines 1 through 15 (must eq		95,943,538.	16	108,077,728
	17	Accounts payable and accrued expenses		597,492.	17	1,294,565
	18	Grants payable	969,742.	18	891,621	
	19	Deferred revenue		909,742.	19	091,021
	20	Tax-exempt bond liabilities	D 10/ (0 1 1 1 D		20	
	21	Escrow or custodial account liability. Complete			21	
Liabilities	22	Loans and other payables to any current or for				
≣		trustee, key employee, creator or founder, sub controlled entity or family member of any of th			22	
Lia	23	Secured mortgages and notes payable to unre			23	
	24	Unsecured notes and loans payable to unrelat			24	
	25	Other liabilities (including federal income tax, p				
		parties, and other liabilities not included on line	•			
					25	
	26	Total liabilities. Add lines 17 through 25		1,567,234.	26	2,186,186
		Organizations that follow FASB ASC 958, ch		,		
Ses		and complete lines 27, 28, 32, and 33.				
auc	27	Net assets without donor restrictions		8,489,053.	27	13,113,697
Bal	28	Net assets with donor restrictions		85,887,251.	28	92,777,845
ם		Organizations that do not follow FASB ASC				
<u>.</u>		and complete lines 29 through 33.				
S O	29	Capital stock or trust principal, or current fund	s		29	
set	30	Paid-in or capital surplus, or land, building, or			30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			31	
Se	32	Total net assets or fund balances		94,376,304.	32	105,891,542
	33	Total liabilities and net assets/fund balances		95,943,538.	33	108,077,728. Form <b>990</b> (2023

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	11,	80!	5,2	26.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,	14	0,2	04.
3	Revenue less expenses. Subtract line 2 from line 1	3	5,	66	5,0	22.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	94,	37	<del>6,3</del>	04.
5	Net unrealized gains (losses) on investments	5	5,	850	0,2	16.
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	105,	89:	1,5	42.
Pa	rt XII Financial Statements and Reporting		•			
	Check if Schedule O contains a response or note to any line in this Part XII					X
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		L	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	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?		L	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.				
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?		L	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit				
	an andita, analaia mbanaa Cabadula O and daaasiba annatana tahan ta madama andita			OI.		l

#### **SCHEDULE A**

(Form 990)

Total

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.

OMB No. 1545-0047

2023
Open to Public

Inspection

Name of the organization

UNIVERSITY OF BALTIMORE FOUNDATION, INC.

Employer identification number

23-7036780 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

(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) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	6162475.	9554106.	5566897.	6644300.	9029822.	36957600.
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	6162475.	9554106.	5566897.	6644300.	9029822.	36957600.
5	The portion of total contributions	02021731	33312331	333337	0011000	70270221	
3	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,						
	· ·						16027025
	column (f)						16027035.
	Public support. Subtract line 5 from line 4.						20930565.
	ction B. Total Support						T
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	6162475.	9554106.	5566897.	6644300.	9029822.	36957600.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	983,082.	1546623.	2274625.	1671955.	2601561.	9077846.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)				377.	7,614.	7,991.
11	Total support. Add lines 7 through 10						<u> 46043437.</u>
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	232,883.
13	First 5 years. If the Form 990 is for th	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 50	01(c)(3)	
	organization, check this box and stop						
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2023 (I	ine 6, column (f), di	vided by line 11, c	olumn (f))		14	<u>45.46 %</u>
15	Public support percentage from 2022	Schedule A, Part I	I, line 14			15	50.80 %
16a	33 1/3% support test - 2023. If the	organization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2022. If the o	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances test	•	• •				
	and if the organization meets the fact						
	meets the facts-and-circumstances te			=			
h	10% -facts-and-circumstances test	~		*			
	more, and if the organization meets the						10,001
	organization meets the facts-and-circu				•		
18	Private foundation. If the organization		-	•			
10	Trivate loundation. If the organization	and not oneck a l	JOA OIT III 10 10, 102	i, 100, 17a, 01 170	, origon triis box at		/Form 990\ 2023

### 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	etion A. Public Support	siow, picase comp	oloto i dit ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the 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.)						
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
		(a) 2013	(6) 2020	(6) 2021	(d) ZOZZ	(6) 2020	(i) rotai
	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  Net income from unrelated business activities not included on line 10b, whether or not the business is						
12	regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organizatio	on,
	check this box and stop here						
Sec	ction C. Computation of Publi	c Support Per	rcentage				
15	Public support percentage for 2023 (li	ne 8, column (f), c	divided by line 13,	column (f))		15	%
	Public support percentage from 2022					16	%
Sec	ction D. Computation of Inves	tment Income	e Percentage				
17	Investment income percentage for 20	23 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18	Investment income percentage from 2	<b>2022</b> Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2023. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd <b>stop here.</b> The	organization qual	ifies as a publicly s	supported organiza	ation	
b	<b>33 1/3% support tests - 2022.</b> 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?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 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.)

	Yes	No
1		
2		
_		
За		
3b		
3c		
4a		
4b		
4c		
5a		
5b 5c		
30		
6		
7		
8		
9a		
Ja		
9b		
9c		
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10b ule A (Forn	n 000)	2022
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Vas No

· u	Continued)		1	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		<u> </u>
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		<u> </u>
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	110
•	or trustees of each of the organization's supported organization(s)? If "No." describe in <b>Part VI</b> how control			
	· · · · · · · · · · · · · · · · · · ·			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	<u> </u>		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		162	INO
'				
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	_		
•	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
•	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
800	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instance).	struction	· .	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	_		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990) 2023

5

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

<u>4</u> 5

6

Enter greater of line 2 or line 3.

instructions).

Income tax imposed in prior year

emergency temporary reduction (see instructions)

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

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)								
Section D - Distributions								
1 Amounts paid to supported organizations to accomplish e	1							
2 Amounts paid to perform activity that directly furthers exe	mpt purposes of supported							
organizations, in excess of income from activity		2						
3 Administrative expenses paid to accomplish exempt purpo	oses of supported organizations	3						
4 Amounts paid to acquire exempt-use assets	4 Amounts paid to acquire exempt-use assets							
5 Qualified set-aside amounts (prior IRS approval required -	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	n the organization is responsive							
(provide details in Part VI). See instructions.	8							
9 Distributable amount for 2023 from Section C, line 6	9							
10 Line 8 amount divided by line 9 amount	10							
Section F. Distribution Allegations (see instructions)	(ii) Underdistributions	(iii) Distributable						

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reason-			
able cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2023			
<b>a</b> From 2018			
<b>b</b> From 2019			
<b>c</b> From 2020			
<b>d</b> From 2021			
<b>e</b> From 2022			
f Total of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D,			
line 7: \$			
Applied to underdistributions of prior years			
<b>b</b> Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h			
and 4b from line 1. For result greater than zero, explain in			
Part VI. See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j			
and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
<b>b</b> Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

Schedule A (Form 990) 2023

# Schedule B

(Form 990)

# **Schedule of Contributors**

OMB No. 1545-0047

**Employer identification number** 

2023

Schedule B (Form 990) (2023)

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

UNIVERSITY OF BALTIMORE FOUNDATION, INC.

23-7036780

Organization type (check one):								
Filers of:	Section:							
Form 990 or 990-	EZ X 501(c)( 3 ) (enter number) organization							
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation							
	527 political organization							
Form 990-PF	501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
501(c)(3) taxable private foundation								
Note: Only a sec	anization is covered by the <b>General Rule</b> or a <b>Special Rule</b> . tion 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.							
General Rule								
	rganization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or ) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.							
Special Rules								
sections contribu	rganization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one tor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; rm 990-EZ, line 1. Complete Parts I and II.							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.								
year, co is check purpose	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$							
answer "No" on F	unization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it <b>must</b> Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify set the filing requirements of Schedule B (Form 990).							

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

### **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

Par	t I Organizations Maintaining Donor Advised	Funds or Other Similar Funds or Ac	counts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6	5.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in wri	ting that the assets held in donor advised fund	ds
	are the organization's property, subject to the organization's exe	clusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor adv	isors in writing that grant funds can be used o	nly
	for charitable purposes and not for the benefit of the donor or d	onor advisor, or for any other purpose conferr	ing
_			
Par	t II Conservation Easements. Complete if the organ	nization 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	n or education) Preservation of a histo	orically important land area
	Protection of natural habitat	Preservation of a certi	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	d conservation contribution in the form of a co	
	day of the tax year.		Held at the End of the Tax Year
а			2a
b			2b
С	Number of conservation easements on a certified historic struct		2c
d	Number of conservation easements included on line 2c acquired		
	on a historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	sed, extinguished, or terminated by the organi	zation during the tax
	year		
4	Number of states where property subject to conservation easen	· · · · · · · · · · · · · · · · · · ·	
5	Does the organization have a written policy regarding the period		□ v □ v.
_	violations, and enforcement of the conservation easements it has starting inspecting inspection in the properties in the prope		
6	Staff and volunteer hours devoted to monitoring, inspecting, ha	riding of violations, and emorcing conservation	in easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handlin	a of violations, and enforcing conservation ea	sements during the year
•	Amount of expenses incurred in morntoning, inspecting, mandim	g of violations, and emoreing conservation can	sements during the year
8	Does each conservation easement reported on line 2d above sa	atisfy the requirements of section 170(h)(4)(R)(i	
Ŭ	·		
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footnot	•	
	organization's accounting for conservation easements.	3	
Pai		rt, Historical Treasures, or Other S	imilar Assets.
	Complete if the organization answered "Yes" on Form 99	90, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958,	not to report in its revenue statement and bala	ance sheet works
	of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furtherar	nce of public
	service, provide in Part XIII the text of the footnote to its financia	al 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 ex	khibition, education, or research in furtherance	e of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
			454 004
2	If the organization received or held works of art, historical treasu		
	the following amounts required to be reported under FASB ASC	958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions for		Schedule D (Form 990) 2023

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Pai	rt III   Organizations Maintaining C	ollections of Art	i, Historical Tre	asures, or Othe	er Simila	r Assets	(contin	ued)	_
3	Using the organization's acquisition, accessi	on, 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		hange program					
b	X Scholarly research	е	Other						_
С	X Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how they further th	e organization's exe	mpt purpo	se in Part	XIII.		
5	During the year, did the organization solicit of		•	•		_	_		
<b>D</b> -	to be sold to raise funds rather than to be ma						Yes	X N	0
Pai	rt IV Escrow and Custodial Arran		te if the organization	answered "Yes" on	Form 990	, Part IV, li	ne 9, or		
	reported an amount on Form 990, Pa								_
1a	Is the organization an agent, trustee, custodi						7		
	on Form 990, Part X?					L	<b>」Yes</b>	N	0
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing table:				A		_
							Amount		_
С	Beginning balance								_
d	Additions during the year								_
е	Distributions during the year								_
Ť	Ending balance				1f		٦,,		_
	Did the organization include an amount on Fo				ility?		Yes	N	٥
	If "Yes," explain the arrangement in Part XIII.  To The Transfer of the Indoormal Transfer of th	the experiences	planation has been j	m 000 Dort IV line:					_
· u	Endowment Funds Complete ii	(a) Current year	(b) Prior year	(c) Two years back		years back	(a) Four	years back	_
4.	Deginning of year belongs	67,037,841.	61,288,308.	68,720,950.		278,867.		877,557	
	Beginning of year balance	2,418,287.	4,154,334.	1,179,815.	<u> </u>	920,420.	2,813,658.		_
b	Contributions	7,036,305.	4,895,657.	-5,702,756.		154,401.	184,984.		
G	Net investment earnings, gains, and losses	7,030,303.	4,055,057.	3,702,730.	15,	134,401.			
u	Grants or scholarships Other expenditures for facilities								_
е		3,463,483.	3,300,458.	2,909,701.	2	532,738.	2	597,332	,
	and programs	3,103,103.	3,300,130.	2,303,701.	,	332,730.	. 2,337,3		·
f	Administrative expenses  End of year balance	73,028,950.	67,037,841.	61,288,308.	68 7	720,950.	50	278,867	<del>,</del>
g 2	Provide the estimated percentage of the curr				, ,	20,330.	30,	270,007	÷
	Board designated or quasi-endowment	22.0000	%	) Held as.					
b	Permanent endowment 78.0000	%							
		^%							
·	The percentages on lines 2a, 2b, and 2c sho								
3a	Are there endowment funds not in the posse	•	tion that are held an	nd administered for t	he				
-	organization by:	oolon or the organiza	tion that are note an	ia administrator a for a				Yes No	_
	(i) Unrelated organizations?						3a(i)	Х	_
	(ii) Related organizations?						3a(ii)	Х	
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R?				3b		_
4	Describe in Part XIII the intended uses of the								_
Pai	rt VI Land, Buildings, and Equipm								_
	Complete if the organization answere	d "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, Part X	, line 10.				
	Description of property	(a) Cost or o	ther (b) Cost	or other (c)	Accumulat	ed	(d) Book	value	_
		basis (investm	nent) basis	(other) de	epreciation	1			
1a	Land								_
b	Buildings								_
С	Leasehold improvements								
d	Equipment								
е	Other								
Total	I. Add lines 1a through 1e. (Column (d) must e	gual Form 990 Part	X line 10c column	(B))				0	

Schedule D (Form 990) 2023

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990. Part X. line 25. col. (B))	

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

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 UNIVERSITY OF BALTIMORE	FOUNDATI	ON, INC.	<u>∠</u> 3-	7036760 Page 4
Part XI Reconciliation of Revenue per Audited Financial Sta		Revenue per Re	turn	
Complete if the organization answered "Yes" on Form 990, Part IV, lin			T .	10 210 270
			1	18,318,378.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	2a	5,850,216.		
<ul><li>a Net unrealized gains (losses) on investments</li><li>b Donated services and use of facilities</li></ul>		3,030,210.		
c Recoveries of prior year grants			-	
d Other (Describe in Part XIII.)		845,032.		
e Add lines 2a through 2d			2e	6,695,248.
3 Subtract line 2e from line 1			3	11,623,130.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	219,574.		
<b>b</b> Other (Describe in Part XIII.)		219,574. -37,478.		
c Add lines 4a and 4b			4c	182,096.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.	.)		5	11,805,226.
Part XII Reconciliation of Expenses per Audited Financial St	atements Wit	h Expenses per l	Retur	n
Complete if the organization answered "Yes" on Form 990, Part IV, lin				
Total expenses and losses per audited financial statements			1	5,989,143.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1			
a Donated services and use of facilities	2a		_	
<b>b</b> Prior year adjustments				
c Other losses		21 025		
d Other (Describe in Part XIII.)		31,035.		21 025
e Add lines 2a through 2d			2e	31,035.
3 Subtract line 2e from line 1			3	5,958,108.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	010 574		
a Investment expenses not included on Form 990, Part VIII, line 7b		219,574. -37,478.	-	
<b>b</b> Other (Describe in Part XIII.)	·			100 006
c Add lines 4a and 4b			4c	182,096.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1  Part XIII Supplemental Information	8.)		5	6,140,204.
	4. D. + N/ P 41	and Obs. Death / Base	( D t	V. Para Or David VI
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4			i; Part	X, line 2; Part XI,
lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	ny additional infor	mation.		
PART III, LINE 4:				
ART AND HISTORICAL COLLECTIONS INCLUDE LI	BRARY COL	LECTIONS, P	OST	ERS,
PRINTS AND OTHER ARTIFACTS.				
DADM W ITNE A.				
PART V, LINE 4:				
THE FOUNDATION'S PERMANENT ENDOWMENT CONS	TSTS OF V	ARTOUS DONG	R R	ESTRICTED
THE TOOKSHITON & PENNINGH CONS	1010 01 1	IIIII DOD DOING	, 11 11	
FUNDS ESTABLISHED TO PROVIDE A SOURCE OF	INCOME FO	R ONGOING F	ROG	RAMS, AS
				•
WELL AS SCHOLARSHIPS AND PROFESSORSHIPS.				
PART X, LINE 2:				
MILE ODGANITATIONS BOLLOW MILE PROVINCES	E 3000:0:	TNO DOD TOTO		7 TATMS7 TAT
THE ORGANIZATIONS FOLLOW THE PROVISIONS OF	r ACCOUNT	ING FOR UNC	EKT	ATN.I.A TN
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INCOME TAXES UNDER THE INCOME TAXES TOPIC	OF THE C	ODIFICATION		
332054 09-28-23			ocne	dule D (Form 990) 2023

Schedule D (Form 990) 2023 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Page 5  Part XIII Supplemental Information (continued)
, · · · · · · · · · · · · · · · · · · ·
FORM 990, PART XI, LINE 10
THE AUDITED FINANCIAL STATEMENTS WERE PREPARED ON A CONSOLIDATED BASIS.
THE CONSOLIDATED NET INCOME(LOSS) EQUALS \$12,329,235. THE NET INCOME FOR
THIS ENTITY ON AN UNCONSOLIDATED BASIS IS \$11,515,238. THE DIFFERENCE IS
\$813,997, OR THE INCOME FOR UNIVERSITY PROPERTIES, INC.

#### SCHEDULE F (Form 990)

Department of the Treasury

## 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

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

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.) (e) If activity listed in (d) (b) Number of (c) Number of (d) Activities conducted in the region (f) Total (a) Region employees, agents, and expenditures offices (by type) (such as, fundraising, prois a program service, 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 0 INVESTMENTS ONLY 2,366,467. 0 0 2,366,467. 3 a Subtotal **b** Total from continuation 0 sheets to Part I ...... c Totals (add lines 3a

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

Schedule F (Form 990) 2023

2,366,467.

and 3b)

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

recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.									
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
			recognized as charities by the or counsel has provided a sec						

**3** Enter total number of other organizations or entities

	Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.							
Part III can be duplic		pace is needed Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

		Schedule F (Form 990) 202	
	"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)	Yes X No	
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If		
	Foreign Partnerships (see the Instructions for Form 8865)	X Yes No	
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain		
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 the Instructions for Form 8621)	X Yes	
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 the Instructions for Form 5471)	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 the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes X No	
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 the Instructions for Form 926)	Yes X No	

Schedule F (Form 990) 2023

#### **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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Name of the organization

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

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) fundraiser or entity (fundraiser) from activity organization listed in col. (i) WILSON-BENNETT TECHNOLOGY. Yes No INC - 2239 BILL FOSTER Х TELEMARKETING 17,648 51,203 -33,555.

3	List all state	es in w	nich t	ne org	anızat	ion is	regist	ered o	r licen	sed to	SOLICI	t conti	ributio	ns or I	nas be	en no	tified	it is ex	empt	from r	egistra	ition	
	or licensing																						
$\overline{MD}$	.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

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990) 2023

-33 555

Total

17 648

51 203

UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Page 2 Schedule G (Form 990) 2023 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events FANNIE NONE (add col. (a) through ANGELOS GALA col. (c)) (event type) (event type) (total number) 47,500. 47,500. 1 Gross receipts 28,750. 28,750. 2 Less: Contributions 18,750. 18,750. **3** Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6,159. 6,159. 6 Rent/facility costs 31,319. 31,319. 7 Food and beverages 8 Entertainment 9 Other direct expenses ..... 37,478. 10 Direct expense summary. Add lines 4 through 9 in column (d) -18,72811 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add

une			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)
Revenue	1	Gross revenue				
S	2	Cash prizes				
Direct Expenses		Noncash prizes				
irect E	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes %  No	Yes % No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
9	En	ter the state(s) in which the organization condu	cts gaming activities:			
		the organization licensed to conduct gaming ac No," explain:				Yes No
		ere any of the organization's gaming licenses re Yes," explain:	/ear?	Yes No		
	_					

Schedule G (Form 990) 2023

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Sch	university of baltimore foundation, inc. 23-7 university of baltimore foundation, inc. 23-7	036	780	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?	,	Yes	No
13	Indicate the percentage of gaming activity conducted in:			
á	a The organization's facility	13a		%
ŀ	o 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			
15	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	No
ŀ	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount			
	of gaming revenue retained by the third party \$			
•	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	No
t	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
Pa	organization's own exempt activities during the tax year \$ Irt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Par	t III. lin	20 0	h 10h
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	,	00 0, 0	5, 105,
SC	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS	<u>:</u>		
(I	) NAME OF FUNDRAISER: WILSON-BENNETT TECHNOLOGY, INC			
<u>\                                    </u>	/ NAME OF FUNDATION. WILDON DEMNETT TECHNOLOGY, INC			
<u>(I</u>	) ADDRESS OF FUNDRAISER:			
<u>22</u>	39 BILL FOSTER MEMORIAL HWY W, CABOT, AR 72023			
_				

Schedule G	G (Form 990)	UNIVERSITY	OF	BALTIMORE	FOUNDATION,	INC. 23-7036780	Page 4
Part IV	G (Form 990)  Supplemental Infor	mation (continued)					
	• •	(continued)					
							_
	<u> </u>						

## **SCHEDULE M** (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

Open to Public

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.

Inspection Employer identification number

	UNIVERSITY O	F BALT	IMORE FOU	NDATION, I	NC.	23-70	367	780	
Pai	t I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contrib amounts reporte Form 990, Part VIII	ed on	(d) Method of deta noncash contribut		_	S
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	Х	2	367,	960.				
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 organiz	zation durino	the tax vear for c	ontributions					
	for which the organization completed Form 82	•			29				
		oo,. a, _		<u>-</u>				Yes	No
30a	During the year, did the organization receive by	v contributio	n any property rep	orted in Part I lines	1 through 2	R that it			110
000	must hold for at least 3 years from the date of				_	o, triat it			
	exempt purposes for the entire holding period?			orristre required to			30a		Х
b	If "Yes," describe the arrangement in Part II.	•					554		
31	Does the organization have a gift acceptance	oolicy that re	equires the review of	of any nonstandard	contributions	s?	31	х	
	Does the organization hire or use third parties	-	•	•		···			
JŁU			•				32a		х
b	If "Yes," describe in Part II.						Jea		
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	for which column (	a) is checked	1.			
-	describe in Part II.	S.G. 111 (O) 101	. a type of property	willon column (	a, io oi looned	·'			

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

Schedule M (Form 990) 2023

Schedule M	(Form 990) 2023	UNIVERSITY	OF	BALTIMORE	FOUNDATION,	, INC.	23-7036780	Page 2
Part II	Supplemental	Information. Pro	vide tl	ne information requi	red by Part I, lines 30b	, 32b, and 33	3, and whether the organizabination of both. Also com	ation
	is reporting in Par	t I, column (b), the nur	nber c	f contributions, the	number of items receiv	ed, or a com	bination of both. Also com	plete
	this part for any a	dditional information.						
				<u> </u>				
	<u> </u>							

Schedule M (Form 990) 2023

332142 09-11-23

## **SCHEDULE O** (Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047 Inspection

Name of the organization

Employer identification number

UNIVERSITY OF BALTIMORE FOUNDATION, INC.   23-7036780
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, NV, 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.

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

Schedule O (Form 990) 2023

Scriedule O (Form 990) 2023	Page 2
Name 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)

Part I

## **Related Organizations and Unrelated Partnerships**

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

Department of the Treasury Internal Revenue Service

Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

Go to www.irs.gov/Form990 for instructions and the latest information. **Employer identification number** Name of the organization 23-7036780 UNIVERSITY OF BALTIMORE FOUNDATION, INC.

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

(a)  Name, address, and EIN (if applicable)  of disregarded entity	(b) Primary activity	(c) Legal domicile (state o foreign country)	r Total incol	me End-of-year	assets Direct of	(f) controlling ntity	)
Part II Identification of Related Tax-Exempt Organizations during the tax year.	tions. Complete if the organization a	Inswered "Yes" on Form 990	, Part IV, line 34, b	ecause it had one	or more related tax-exe	mpt	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity		512(b)(13) rolled ity?
UNIVERSITY PROPERTIES, INC 52-1040290				501(c)(3))		Yes	No
1420 N. CHARLES STREET BALTIMORE, MD 21201	SEE SCHEDULE O	MARYLAND	501(C)(2)		N/A		х
MILITORE, NO 21201	DEE SCHEBOLL C	FIRTHMO	301(0)(2)		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Λ
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2023

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.

1 3	, , ,	1				_		T	_		
(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)		(k)
Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disprop	ortionate	Code V-UBI	Gener	al or Per	rcentage
	(state or	entity	(related, unrelated, lexcluded from tax under	income		alloca	tions?	amount in box	partn	er? Ow	wnership
	country)		sections 512-514)		assets	Yes	No	K-1 (Form 1065)	Yes	No	
									+		
									$\vdash$		
	(b)	(b) (c) Primary activity Legal domicile (state or foreign	(b) (c) (d)	(b) (c) (d) (e)	(b) (c) (d) (e) (f)  Primary activity Legal domicile (state or foreign foreign foreign foreign foreign for the following for the following foreign for the following for the following foreign for the following foreign for the following for the following foreign for the following for the following foreign foreign for the following foreign foreign for the following foreign	(b) (c) (d) (e) (f) (g)	(b) (c) (d) (e) (f) (g) (l	(b) (c) (d) (e) (f) (g) (h)  Primary activity Legal Direct controlling Predominant income Share of total Share of	(b) (c) (d) (e) (f) (g) (h) (i)  Primary activity Legal Direct controlling Predominant income Share of total Share of Disconnections Code VI IBI	(b) (c) (d) (e) (f) (g) (h) (i) (j)  Primary activity (Legal Direct controlling Predominant income Share of total Share of Discontinuity (Code VI IBI General	(b) (c) (d) (e) (f) (g) (h) (i) (j)

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	entity:	
		,						Yes	No	

Schedule R (Form 990) 2023

Yes No

1a

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b		X
c Gift, grant, or capital contribution from related organization(s)				1c		X
				1d		X
e Loans or loan guarantees by related organization(s)				1e		X
f Dividends from related organization(s)				1f		X
g Sale of assets to related organization(s)				<b>1</b> g		X
h Purchase of assets from related organization(s)				1h		X
i Exchange of assets with related organization(s)				1i		X
j Lease of facilities, equipment, or other assets to related organization(s)				1j		X
k Lease of facilities, equipment, or other assets from related organization(s)				1k		X
I Performance of services or membership or fundraising solicitations for related or				11		Х
m Performance of services or membership or fundraising solicitations by related organizations	ganization(s)			1m		Х
n Sharing of facilities, equipment, mailing lists, or other assets with related organiz				1n	X	
Sharing of paid employees with related organization(s)				10	X	
p Reimbursement paid to related organization(s) for expenses				1p		X
q Reimbursement paid by related organization(s) for expenses				1q	X	
r Other transfer of cash or property to related organization(s)				1r		X
s Other transfer of cash or property from related organization(s)				1s		Х
2 If the answer to any of the above is "Yes," see the instructions for information on	who must complete th	is line, including covered relation	nships and transaction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount in	volved		
1) UNIVERSITY PROPERTIES, INC.	N	0.				
2)						
3)						
4)						
5)						
6)						
32163 09-28-23			Schedule	R (For	n 990	2023

Schedule R (Form 990) 2023

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

Page 4

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Dispretion allocat	opor- late tions?	General manage partner	(k) Percentage ownership
									000) 0000

Schedule R	(Form 990) 2023	UNIVERSITY	OF	BALTIMORE	FOUNDATION,	INC.	23-7036780	Page 5
Part VII	(Form 990) 2023  Supplemental Info	ormation						<u> </u>
	Provide additional infor	mation for responses to o	questi	ons on Schedule R.	See instructions.			

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

Attachment

OMB No. 1545-1002

► Go to www.irs.gov/Form8621 for instructions and the latest information. Sequence No. 69 Identifying number (see instructions) Name of shareholder UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Number, street, and room or suite no. If a P.O. box, see instructions. Shareholder tax year: calendar year or other tax year beginning 1420 N. CHARLES STREET 2023 and ending JUN 30, 2024 City or town, state, and ZIP code or country BALTIMORE, MD Individual X Corporation S Corporation Check type of shareholder filing the return: Partnership Check if any Excepted Specified Foreign Financial Assets are reported on this form. See instructions Qualifying Insurance Corporation Election-I, a shareholder of stock of a foreign corporation, elect to treat such stock as the stock of a Qualifying Insurance Corporation under the alternative facts and circumstances test within the meaning of section 1297(f)(2). See instructions Employer identification number (if any) Name of foreign corporation, passive foreign investment company (PFIC), or qualified electing fund (QEF) GOLDMAN SACHS US TREASURY LIQUID RESERVES FUND 86-2102690 Address (Enter number, street, city or town, and country.) Reference ID number (see instructions) MATSACK TRUST LIMITED 70 SIR JOHN Tax year of foreign corporation, PFIC, or QEF: Calendar year 2023 ROGERSON'S QUAY, DUBLIN, IRELAND EL 2 or other tax year beginning and ending Part I Summary of Annual Information (see instructions) Provide the following information with respect to all shares of the PFIC held by the shareholder: Description of each class of shares held by the shareholder: X CLASS SHARES Check if shares jointly owned with spouse. Date shares acquired during the tax year, if applicable: 12/31/231,051. Number of shares held at the end of the tax year: Value of shares held at the end of the tax year (check the appropriate box, if applicable): (a) X \$0-50.000 **(b)** \$50,001-100,000 (c) \$100,001-150,000 \$150,001-200,000 (e) If more than \$200,000, list value: Type of PFIC and amount of any excess distribution or gain treated as an excess distribution under section 1291, inclusion under section 1293, and inclusion or deduction under section 1296 (check all boxes that apply): | X | Section 1291 \$ (b) Section 1293 (Qualified Electing Fund) \$ Section 1296 (Mark to Market) \$ SEE STATEMENT 1 (c) Part II **Elections** (see instructions) Election To Treat the PFIC as a QEF. I, a shareholder of a PFIC, elect to treat the PFIC as a QEF. Complete lines 6a through 7c of Part III. Α В Election To Extend Time For Payment of Tax. I, a shareholder of a QEF, elect to extend the time for payment of tax on the undistributed earnings and profits of the QEF until this election is terminated. Complete lines 8a through 9c of Part III to calculate the tax that may be deferred. Note: If any portion of line 6a or line 7a of Part III is includible under section 951, you may not make this election. Also, see sections 1294(c) and 1294(f) and the related regulations for events that terminate this election. Election To Mark-to-Market PFIC Stock. I, a shareholder of a PFIC, elect to mark-to-market the PFIC stock that is marketable within the meaning of section 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 PFIC. Enter gain or loss on line 15f of Part V. ΕI Deemed Dividend Election. I, a shareholder on the first day of a PFIC's first tax year as a QEF that is a controlled foreign corporation (CFC), elect to treat an amount equal to my share of the post-1986 earnings and profits of the CFC as an excess distribution. Enter this amount on line 15e of Part V. If the excess distribution is greater than zero, also complete line 16 of Part V. Election To Recognize Gain on Deemed Sale of PFIC. I, a shareholder of a former PFIC or a PFIC to which section 1297(d) applies, elect to treat as an excess distribution the gain recognized on the deemed sale of my interest in the PFIC on the last day of its last tax year as a PFIC under section 1297(a). Enter gain on line 15f of Part V. Deemed Dividend Election With Respect to a Section 1297(e) PFIC. I. a shareholder of a section 1297(e) PFIC. within the meaning of Regulations section G 1.1297-3(a), elect to make a deemed dividend election with respect to the Section 1297(e) PFIC. My holding period in the stock of the Section 1297(e) PFIC includes the CFC qualification date, as defined in Regulations section 1.1297-3(d). Enter the excess distribution on line 15e, Part V. If the excess 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 PFIC, within the meaning of Regulations section 1.1298-3(a), н elect to make a deemed dividend election with respect to the former PFIC. My holding period in the stock of the former PFIC includes the termination date, as defined in Regulations section 1.1298-3(d). Enter the excess distribution on line 15e, Part V. If the excess distribution is greater than zero, also complete line 16, Part V.

orm	8621 (Rev. 12-2018)			Page :
Pa	art III Income From a Qualified Electing Fund (QEF). All QEF sha	areholders complete lines 6a through	n 7c. If you are mak	ing
	Election B, also complete lines 8a through 9c. See instructions.			
6 a	Enter your pro rata share of the ordinary earnings of the QEF	6a		
b	Enter the portion of line 6a that is included in income under section 951 or that may be			
	excluded under section 1293(g)	6b		
C	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	7a		
b	Enter the portion of line 7a that is included in income under section 951 or that may be			
	excluded under section 1293(g)	7b		
C	Subtract line 7b from line 7a. This amount is a net long-term capital gain. Enter this amou	nt in Part II of the Schedule D		
	used for your income tax return. See instructions		7c	
	Complete lines 8 and 9 only if you are making a section 1294 election (Election B) for the		•	
8 a	Add lines 6c and 7c		8a	
b	Enter the total amount of cash and the fair market value of other property distributed			
	or deemed distributed to you during the tax year of the QEF. See instructions	8b		
С	Enter the portion of line 8a not already included in line 8b that is attributable to shares			
_	in the QEF that you disposed of, pledged, or otherwise transferred during the tax year	8c		
d	Add lines 8b and 8c	· · · · · · · · · · · · · · · · · · ·	8d	
e	Subtract line 8d from line 8a, and enter the difference (if zero or less, enter amount in brac			
•	Important: If line 8e is greater than zero, and no portion of line 6a or 7a is includib			
	you may make Election B with respect to the amount on line 8e.	ne in income under section con,		
9 a	Enter the total tax for the tax year. See instructions	9a		
b	Enter the total tax for the tax year determined without regard to the amount entered			
·	on line 8e	9b		
r	Subtract line 9b from line 9a. This is the deferred tax, the time for payment of which is e			
·	Election B	Action by making	9c	
Pá	art IV Gain or (Loss) From Mark-to-Market Election (see in	structions)	1 00 1	
10a	Enter the fair market value of your PFIC stock at the end of the tax year		10a	
	Enter your adjusted basis in the stock at the end of the tax year			
	Subtract line 10b from line 10a. If a gain, do not complete lines 11 and 12. Include this amo		100	
·	on your tax return. If a loss, go to line 11	•	10c	
11	Enter any unreversed inclusions (as defined in section 1296(d))		11	
	Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Incl		· · ·	
-	loss on your tax return		12	
13	If you sold or otherwise disposed of any section 1296 stock (see instructions) during the		12	
	Enter the fair market value of the stock on the date of sale or disposition		13a	
			13b	
	Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as o	urdinary income on your	100	
U			130	
1/10	tax return. If a loss, go to line 14		13c	
	Enter any unreversed inclusions (as defined in section 1296(d))		148	
U	Enter the loss from line 13c, but only to the extent of unreversed inclusions on line 14a. Inc		145	
	loss on your tax return. If the loss on line 13c exceeds unreversed inclusions on line 14a, c	ompiete illie 140	14b	

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

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

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

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14c

#### 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 64. 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 22. 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 9. **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, 55. 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 **d** Foreign tax credit (see instructions) 16d e Subtract line 16d from line 16c. Enter this amount on your income tax return as "additional tax." See instructions 16e f Determine interest on each net increase in tax determined on line 16e using the rates and methods of section 6621.

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16f

Enter the aggregate amount of interest here. See instructions

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

	Complete a se	parate column for ea	ach outstanding elec	ction.			
	Complete lines 17 through						
	20 to report the status of						
	outstanding prior year						
	section 1294 elections.						
		(i)	(ii)	(iii)	(iv)	(v)	(vi)
17	Tax year of outstanding						
	election						
18	Undistributed earnings to						
	which the election relates						
19	Deferred tax						
20	Interest accrued on deferred						
	tax (line 19) as of the filing						
_	date						
	Complete lines 21 through						
	24 only if a section 1294						
	election is terminated in						
	the current year.						
04	Fuent terminating election						
	Event terminating election Earnings distributed or						
22	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)

# 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 , 2023 and ending JUN 30, 2024 .				
		n, state, and ZIP code or country  MORE, MD 21201					
		of shareholder filing the return: Individual X Corporation Partnershi	p S Corporation Nongrantor Trust Estate				
		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 tre					
		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) GE VII AIV OFFSHORE INVESTMETN HOLD	Employer identification number (if any) 98-1776722				
Addı	ess (Er	nter number, street, city or town, and country.)	Reference ID number (see instructions)				
		7368 TAX DEPT, 30 HUDSON STREET Y CITY, NJ 07302	Tax year of foreign corporation, PFIC, or QEF: Calendar year 2023 or other tax year beginning , and ending , .				
Р	art I	Summary of Annual Information (see instructions)					
Prov		following information with respect to all shares of the PFIC held by the shareholder:					
1	Desc	cription of each class of shares held by the shareholder:					
_		Check if shares jointly owned with spouse.					
2	Date	shares acquired during the tax year, if applicable:					
3	Num	ber of shares held at the end of the tax year:					
4	4 Value of shares held at the end of the tax year (check the appropriate box, if applicable):  (a) X \$0-50,000 (b) \$50,001-100,000 (c) \$100,001-150,000 (d) \$150,001-200,000 (e) 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):  Section 1291 \$  Section 1293 (Qualified Electing Fund) \$  X Section 1296 (Mark to Market) \$ 86.	der section 1291, inclusion under section 1293,				
Р	art II						
A B		Election To Treat the PFIC as a QEF. I, a shareholder of a PFIC, elect to treat the PFIC as Election To Extend Time For Payment of Tax. I, a shareholder of a QEF, elect to extend the QEF until this election is terminated. Complete lines 8a through 9c of Part III to Note: If any portion of line 6a or line 7a of Part III is includible under section 951, you may 1294(c) and 1294(f) and the related regulations for events that terminate this election.	ne time for payment of tax on the undistributed earnings and profits				
С	X	<b>Election To Mark-to-Market PFIC Stock</b> . I, a shareholder of a PFIC, elect to mark-to-mark 1296(e). <i>Complete Part IV</i> .	xet the PFIC stock that is marketable within the meaning of section				
D		<b>Deemed Sale Election.</b> I, a shareholder on the first day of a PFIC's first tax year as a QEF PFIC. Enter gain or loss on line 15f of Part V.	, elect to recognize gain on the deemed sale of my interest in the				
Ε		<b>Deemed Dividend Election.</b> I, a shareholder on the first day of a PFIC's first tax year as a amount equal to my share of the post-1986 earnings and profits of the CFC as an excess of the cFC as an					
		excess distribution is greater than zero, also complete line 16 of Part V.					
F		<b>Election To Recognize Gain on Deemed Sale of PFIC.</b> I, a shareholder of a former PFIC distribution the gain recognized on the deemed sale of my interest in the PFIC on the last gain on line 15f of Part V.	or a PFIC to which section 1297(d) applies, elect to treat as an excess day of its last tax year as a PFIC under section 1297(a). <i>Enter</i>				
G		<b>Deemed Dividend Election With Respect to a Section 1297(e) PFIC.</b> 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). Electric transfer and the section 1.1297-3(d).	) PFIC. My holding period in the stock of the Section 1297(e)				
Н		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 elect to make a deemed dividend election with respect to the former PFIC. My holding periodefined 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
	art III Income From a Qualified Electing Fund (QEF). All QEF sha	areholders complete lines 6a through	n 7c. If you are ma	
	Election B, also complete lines 8a through 9c. See instructions.		•	•
6 a	Enter your pro rata share of the ordinary earnings of the QEF	6a		
	Enter the portion of line 6a that is included in income under section 951 or that may be			
	excluded under section 1293(g)	6b		
C	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	7a		
b	Enter the portion of line 7a that is included in income under section 951 or that may be			
	excluded under section 1293(g)	7b		
C	Subtract line 7b from line 7a. This amount is a net long-term capital gain. Enter this amou	nt in Part II of the Schedule D		
	used for your income tax return. See instructions		7c	
	Complete lines 8 and 9 only if you are making a section 1294 election (Election B) for the	he current tax year.		
8 a	Add lines 6c and 7c		8a	
b				
	or deemed distributed to you during the tax year of the QEF. See instructions	8b		
C				
	in the QEF that you disposed of, pledged, or otherwise transferred during the tax year	8c		
d		•	8d	
е	Subtract line 8d from line 8a, and enter the difference (if zero or less, enter amount in brace		8e	
	Important: If line 8e is greater than zero, and no portion of line 6a or 7a is includib			
	you may make Election B with respect to the amount on line 8e.	,		
9 a	Enter the total tax for the tax year. See instructions	9a		
	Enter the total tax for the tax year determined without regard to the amount entered			
	on line 8e	9b		
C	Subtract line 9b from line 9a. This is the deferred tax, the time for payment of which is e	extended by making		
	Election B		9c	
P	art IV Gain or (Loss) From Mark-to-Market Election (see in	structions)		
10a	Enter the fair market value of your PFIC stock at the end of the tax year		10a	86.
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 amo	ount as ordinary income		
	on your tax return. If a loss, go to line 11		10c	86.
11	Enter any unreversed inclusions (as defined in section 1296(d))		11	
	Enter the loss from line 10c, but only to the extent of unreversed inclusions on line 11. Inclu			
	loss on your tax return		12	
13	If you sold or otherwise disposed of any section 1296 stock (see instructions) during the			
a	Enter the fair market value of the stock on the date of sale or disposition		13a	
			1 401	
C	Subtract line 13b from line 13a. If a gain, do not complete line 14. Include this amount as o			
	tax return. If a loss, go to line 14		13c	
14a	Enter any unreversed inclusions (as defined in section 1296(d))		14a	
	Enter the loss from line 13c, but only to the extent of unreversed inclusions on line 14a. Inc			
	loss on your tax return. If the loss on line 13c exceeds unreversed inclusions on line 14a, c	omplete line 14c	14b	

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

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

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

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

14c

#### Part V Distributions From and Dispositions of Stock of a Section 1291 Fund (see instructions) 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 d Foreign tax credit (see instructions) 16d e Subtract line 16d from line 16c. Enter this amount on your income tax return as "additional tax." See instructions 16e f Determine interest on each net increase in tax determined on line 16e using the rates and methods of section 6621. Enter the aggregate amount of interest here. See instructions 16f

Form 8621 (Rev. 12-2018)

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

	Complete a se	eparate column for ea	ach outstanding 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						
20	Interest accrued on deferred						
	tax (line 19) as of the filing						
_	date						
	Complete lines 21 through						
	24 only if a section 1294						
	election is terminated in						
	the current year.						
•							
	Event terminating election						
22	Earnings distributed or						
	deemed distributed during						
22	the tax year  Deferred tax due with this						
20	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)

## Form **8868**

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service File a separate application for each return.

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

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. 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 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. Part I - Identification Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number (TIN) Type or **Print** UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 1420 N. CHARLES STREET instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. 21201 BALTIMORE, MD Enter the Return Code for the return that this application is for (file a separate application for each return) 01 Application Is For Return | Application Is For Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 8870 12 Form 990-T (trust other than above) 06 Form 5330 (individual) 13 07 Form 5330 (other than individual) 14 Form 990-T (corporation) Form 1041-A 80 After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of THE ORGANIZATION 1420 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 . If it is for part of the group, check this box ..... and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until  $\overline{MAY}$  15 , 20 **25** , to file the exempt organization return for the organization named above. The extension is for the organization's return for: \_\_\_ calendar year 20 \_\_\_\_ or X tax year beginning JUL 1 , 20  $\,$   $\,$   $\,$   $\,$   $\,$   $\,$   $\,$   $\,$   $\,$  , and ending  $\,$   $\,$ JUN 30. If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 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. 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. Зс

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

Form 8868 (Rev. 1-2024)

FORM 8621 ADDITIONAL INFORMATION STATEMENT 1

### NAME OF PASSIVE FOREIGN INVESTMENT COMPANY OR QUALIFIED ELECTING FUND

GOLDMAN SACHS US TREASURY LIQUID RESERVES FUND

	NUMBER			NUMBER	VALUE OF
	OF SHARES	CHANGE		OF SHARES	SHARES HELD
	AT BEGINING	IN NUMBER	DATE OF	AT END	AT END
CLASS OF STOCK	OF YEAR	OF SHARES	CHANGE	OF YEAR	OF YEAR
X CLASS SHARES	419.000	632.000	12/31/23	1,051.000	1,051.00

For	Form 8886 Reportable Transaction Disclosure Statement								
	ev. December 2019) Attach to your tax	Attachment 127	,						
Inte	partment of the Treasury ernal Revenue Service Go to www.irs.gov/Form8886	Sequence No. 137							
Nai	ame(s) shown on return (individuals enter last name, first name, middle initial)	Identifying number							
UI	NIVERSITY OF BALTIMORE FOUNDATION,	23-7036780	J						
	imber, street, and room or suite no.		_						
	420 N. CHARLES STREET		BALTIMOF	ate, and ZIP code RE, MD 21201					
A	If you are filing more than one Form 8886 with your tax return, sequentially	number	each Form 8886 a	and enter the statement number					
			ment number _		_ of	_			
В	Enter the form number of the tax return to which this form is attached or rela				► 990	_			
	Enter the year of the tax return identified above				<b>▶</b> 06/30/2024	_			
_	Is this Form 8886 being filed with an amended tax return?				Yes X N	0			
<u>C</u>	Check the box(es) that apply. See instructions. Initial year file	r	Protective	disclosure		—			
	Name of reportable transaction  ECTION 988								
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 in:	struction	S.			_			
	a Listed c Contractual	protection	on e 🗀	Transaction of interest					
	b Confidential d $\overline{X}$ Loss								
3	If you checked box 2a or 2e, enter the published guidance number for the lis or transaction of interest								
4	Enter the number of "same as or substantially similar" transactions reported				<b>•</b>	_			
5	If you participated in this reportable transaction through a partnership, S cor					_			
	information below for the entity(ies). See instructions. (Attach additional sheets, if necessary.)								
		Trust	Partners	hip Trust					
		Foreign	S corpo	ration Foreign					
	<b>b</b> Name	<del></del>							
	► ACL ALTERNATIVE FUND SAC LIMITED								
c Employer identification number (EIN), if known									
	80-006658	81				_			
	d Date Schedule K-1 received from entity (enter	o 4							
	"none" if Schedule K-1 not received)  • 03/11/202		1			—			
6	Enter below the name and address of each individual or entity to whom you		=						
_	recommended your participation in the transaction, or provided tax advice re	elated to	the transaction. (A		T .	—			
а	Name			Identifying number (if known)	Fees paid \$				
	Number, street, and room or suite no.				ΙΦ				
_	City or town, State, and ZIP code					_			
					_	_			
b	Name			Identifying number (if known)	Fees paid \$				
	Number, street, and room or suite no.	Number, street, and room or suite no.							
	City or town, State, and ZIP code					_			
310 04-	0811 -01-23 LHA For Paperwork Reduction Act Notice, see separate instructio	ns.			Form <b>8886</b> (Rev. 12-20	19)			

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7	Facts	
	a Identify 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 cred	lits
	Capital loss Nonrecognition of gain Deferral	
	X Ordinary loss Adjustments to basis Other	<del></del>
	Enter the total dollar amount of your tax benefits identified in 7a. See instructions	\$
	Enter the anticipated number of years the transaction provides the tax benefits stated in 7b. See instructions	
	the Enter your total investment or basis in the transaction. See instructions  Further describe the amount and nature of the expected tax treatment and expected tax benefits generated by the transaction for	
	<ul> <li>Further describe the amount and nature of the expected tax treatment and expected tax benefits generated by the transaction for each step of the transaction that relate to the expected tax benefits including the amount and nature of your investment. Including the amount and nature of your investment.</li> </ul>	-
	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.	
STA	TEMENT PROVIDED BY THE PARTNERSHIP, ATTACHED TO THE SCHEDULE K-1 IS AVAILABLE UPON R	EQUEST. OWNERSHIP IN
THE	PARTNERSHIP BY THE UNIVERSITY OF BALTIMORE FOUNDATION, INC. IS .08%.	
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8	dentify all individuals and entities involved in the transaction that are tax-exempt, foreign, or related. Check the appropriate box(e	· ·
	name(s), identifying number(s), address(es), and a brief description of their involvement. For each foreign entity, identify its countries in dividual or related entity, explain how the individual or certify is related. Attach additional charts, if recessory	ry of incorporation or existence. For
	each individual or related entity, explain how the individual or entity is related. Attach additional sheets, if necessary.  Type of individual or entity: Tax-exempt Foreign Related	
Nam		Identifying number
ivaii	<b>,</b>	
Add		
Des	ription	
_		
	Type of individual or entity: Tax-exempt Foreign Related	
Nam		Identifying number
Nam	;	
Add		
7100		
Des	ription	
_		
3108		
04-0	-23	Form <b>8886</b> (Rev. 12-2019)