EXTENDED TO MAY 17, 2021

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

Open to Public

OMB No. 1545-0047

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

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

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

A F	or the	2019 calendar year, or tax year beginning JU	L 1, 2019 and	ending J	UN 30, 202	0
B c	heck if	C Name of organization			D Employer ident	ification number
ap		•				
	Address change	$^{\circ}$ UNIVERSITY OF BALTIMORE	FOUNDATION, I	NC.		
	Name change	Doing business as			23-7036	780
	Initial return	Number and street (or P.O. box if mail is not delive	ered to street address)	Room/suite	E Telephone numb	per
	Final return/	1130 N. CHARLES STREET	,		410-837	
	termin- ated	City or town, state or province, country, and Z	IP or foreign postal code		G Gross receipts \$	18,831,014.
	Amende		o. io.o.g poota. oodo		H(a) Is this a group	
	Applica tion		HOMAS CRAWFORD			es? Yes X No
	pending	SAME AS C ABOVE				s included? Yes No
ΙΤ	ax-exe		(insert no.) 4947(a)(1)	or 527		a list. (see instructions)
		www.ubfoundation.org	(mesi tinos) io ii (a)(i) i	<u></u>	H(c) Group exempt	
			ociation Other	I Year		M State of legal domicile; MD
		Summary		1 - 1 - 0 - 0 - 1		III class of logal dollinois
Т		Briefly describe the organization's mission or most s	ignificant activities: ESTA	BLISHE	D TO RAISE	. MANAGE
ဦ	. 1	FUNDS, AND PROVIDE FINANCI	AL SUPPORT TO	THE UN	IVERSITY O	F BALTIMORE.
nai	_	Check this box if the organization discont				
& Governance		Number of voting members of the governing body (F				1 4-
ဗိ		Number of independent voting members of the government of the gove	, , , , , , , , , , , , , , , , , , , ,			
8		otal number of individuals employed in calendar ye				
Activities		otal number of volunteers (estimate if necessary)				<u> </u>
.≩		otal number of volunteers (estimate in necessary) otal unrelated business revenue from Part VIII, colu				
₹		Net unrelated business taxable income from Form 9				
\dashv	<u> </u>	vet difference business taxable income from Form 5	50 1, 11110 03		Prior Year	Current Year
	8 (Contributions and grants (Part VIII, line 1h)			3,038,492	
Revenue		(5			178,091	
ě		nvestment income (Part VIII, column (A), lines 3, 4, a	and 7d)		2,482,753	
<u>۾</u> ا		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9			0	
		otal revenue - add lines 8 through 11 (must equal P			5,699,336	-1
\dashv		Grants and similar amounts paid (Part IX, column (A)			0	
		Benefits paid to or for members (Part IX, column (A),			0	
,,		Salaries, other compensation, employee benefits (Pa			288,957	
Expenses		Professional fundraising fees (Part IX, column (A), lin			65,440	-
ber		otal fundraising expenses (Part IX, column (D), line	. 220 2	95.	00,110	32,0220
ŭ		Other expenses (Part IX, column (A), lines 11a-11d, 1			4,167,591	3,829,786.
		otal expenses. Add lines 13-17 (must equal Part IX,			4,521,988	
		Revenue less expenses. Subtract line 18 from line 12			1,177,348	
es		tevende less expenses. Cabildet line 10 from line 12			ginning of Current Yea	
t Assets or nd Balances	20 T	otal assets (Part X, line 16)			70,178,800	
Ass I Ba		otal liabilities (Part X, line 26)			1,116,830	
<u>lë S</u> e		Net assets or fund balances. Subtract line 21 from li	ne 20		69,061,970	
Pa		Signature Block	NO 20			
		ties of perjury, I declare that I have examined this return, in	cluding accompanying schedule	s and statem	ents, and to the best of	my knowledge and belief, it is
		, and complete. Declaration of preparer (other than officer)				, ,
	Ī	Dannifor Schwartz			12/14/2	2020
Sign	,	Signature of officer			Date	.020
Here		JENNIFER SCHWARTZ, CFO				
		Type or print name and title				
		Print/Type preparer's name	Preparer's signature		oate Check	PTIN
Paid			-	MBECK	if self-emp	P01062953
Prep			HARTERED	<u> </u>	Firm's EIN	52-0959934
Use		Firm's address 400 EAST PRATT ST			2	<u> </u>
	-	BALTIMORE, MD 212			Phone no. 4	10-727-5735
May	the IR	S discuss this return with the preparer shown above			1:	X Ves No

3-7036780	Page 2

Pa	rt III Statement of Program Service Accomplishments	_
	Check if Schedule O contains a response or note to any line in this Part III	<u>_</u>
1	Briefly describe the organization's mission:	
	TO RAISE AND MANAGE FUNDS AND TO PROVIDE FINANCIAL SUPPORT TO THE	
	UNIVERSITY OF BALTIMORE. THE FOUNDATION PROVIDES LEADERSHIP, GUIDANCE,	_
	AND SUPPORT TO THE UNIVERSITY'S ADMINISTRATION IN ADVANCING THE	_
	MISSION AND VISION OF THE UNIVERSITY.	_
2	Did the organization undertake any significant program services during the year which were not listed on the	_
_	prior Form 990 or 990-EZ?	^
	If "Yes." describe these new services on Schedule O.	
•	' — — — — — — — — — — — — — — — — — — —	_
3	5 7 71 5	9
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	_
4a	(Code:) (Expenses \$ 3,194,862. including grants of \$) (Revenue \$ 58,844.	_)
	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.	
		_
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		—
	 	—
41-		_
4b	(Code:) (Expenses \$	-)
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		_
4c	(Code:) (Expenses \$	
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		—
		_
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	_
4e	Total program service expenses ► 3,194,862.	_
	Form 990 (201	19)

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	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			,
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			x
_	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
Ū	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,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	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?			
	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		37	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
_	as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	Part VI	11a		x
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	114		
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
40	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI and XII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			,,
	foreign organization? 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	40		X
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	''		\vdash
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
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		X

Form 990 (2019)	UNIVE	RSITY	OF	BAL	Ί
Part IV	Ch	ecklist of Re	quired S	chedule	es (co	ntinuea)

			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	100	Х
22	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
		23		х
24 a	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	20		
	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		х
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		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			.,
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			x
	"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		
С		28c		x
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	23		
00	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
	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?			v
	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	0.7		X
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	х	
Pa	Note: All Form 990 filers are required to complete Schedule 0 rt V Statements Regarding Other IRS Filings and Tax Compliance	_ 30		
	Check if Schedule O contains a response or note to any line in this Part V			
	1 7		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 22			
b				
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

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 return	ns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		X
b	If "Yes," enter the name of the foreign country ▶				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Advanced in the Financi	counts (FBAR).			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b		Х
	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				37
	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 contribution	ons or gifts			
_	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).		_		Х
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and serv		7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa to file Form 8282?		7c		х
d		7d	70		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		X
g g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
•	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
		•	8		
9	Sponsoring organizations maintaining donor advised funds.				
а	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	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	, , , , , , , , , , , , , , , , , , , ,	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	,	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		40-		
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
h	Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the				
b		13b			
c		13c			
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule		14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner				
-	excess parachute payment(s) during the year?		15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		Х
	If "Yes," complete Form 4720, Schedule O.				
			Eorm	000	(2010)

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a				
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in 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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			37
	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	7. T	СШ	TOT
17	List the states with which a copy of this Form 990 is required to be filed MD, CO, MA, MI, NJ, NY, OH, WA, CA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(Section 501)))s only	/) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request 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, are	ıd fina	ncial	
	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			
	JENNIFER SCHWARTZ - 410-837-6148			
	1130 N. CHARLES STREET, BALTIMORE, MD 21201		000	(0040)

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

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

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

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

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

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

(A) Name and title	(B) Average		not c	heck	ition more	than		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	offi	, unle cer an					compensation from	compensation from related organizations	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1) TRACEY A. DUBREE	1.00							_	_	
DIRECTOR		Х						0.	0.	0.
(2) R. THOMAS CRAWFORD	10.00	ļ		l						
CHAIR		Х		Х				0.	0.	0.
(3) MARIE VAN DEUSEN	1.00	ļ		l						
VICE-CHAIR		Х		Х				0.	0.	0.
(4) NINA YUDELL	5.00	۱		l						
TREASURER	1 00	Х		Х				0.	0.	0.
(5) RACHEL T MCGUCKIAN	1.00	١								_
SECRETARY	<u> </u>	Х		Х				0.	0.	0.
(6) STUART J. SILBERG	5.00	١								_
EXECUTIVE VICE-PRESIDENT	1 00	Х		Х				0.	0.	0.
(7) BARNETT BROOKS	1.00	۱.,								_
DIRECTOR	1 00	Х						0.	0.	0.
(8) CARMINE DALESSANDRO	1.00	٠,								_
DIRECTOR	1 00	Х						0.	0.	0.
(9) CLIFTON L. BROWN, JR	1.00	x						0.	0.	0.
DIRECTOR	1.00	Α.						0.	0.	<u> </u>
(10) CYNTHIA H. JONES	1.00	x						0.	0.	0.
DIRECTOR (11) TAMES B. MOLAN	1.00	^						0.	0.	<u> </u>
(11) JAMES P. NOLAN DIRECTOR	1.00	X						0.	0.	0.
(12) JOAN WORTHINGTON	1.00	^						0.	0.	•
DIRECTOR	1.00	X						0.	0.	0.
(13) MICHAEL L. CURRY	1.00	122						0.	0.	<u></u>
DIRECTOR	1.00	x						0.	0.	0.
(14) PIERCE FLANIGAN	1.00	123								
DIRECTOR	1.00	x						0.	0.	0.
(15) SAYRA MEYERHOFF	1.00									
DIRECTOR		x						0.	0.	0.
(16) KURT L. SCHMOKE	1.00									<u>_</u>
EX-OFFICIO		x						0.	0.	0.
(17) JENNIFER SCHWARTZ	40.00	T								
CFO		1		x				116,407.	0.	18,607.
030007 04 00 00	•		•	_		_		· · · · · · · · · · · · · · · · · · ·		Form 990 (2010)

932007 01-20-20 Form **990** (2019)

Section A. Officers, Directors, Trus	tees, Key Em	ploy	/ees	, an	d Hi	ghe	st C	Compensated Employe	es (continued)				
(A)	(B)			(0	-			(D)	(E)		1	(F)	
Name and title	Average	(do		Pos		than	one	Reportable	Reportable		Es	timate	∍d
	hours per	box	, unle	ss pe	rson	is bot or/trus	h an	compensation	compensatio	'n	an	nount	of
	week	\vdash	Cer an	uau	liecio	Ji/ ii us	lee)	from	from related		1	other	
	(list any hours for	irecto						the	organization			pensa	
	related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MIS	3C)		om th anizat	
	organizations	ruste	ll trus		ee (ee	mpen		(** 27 1033 141100)			_	d relat	
	below	ndividual trustee or director	Institutional trustee	<u>.</u>	key employee	est co	e e					anizati	
	line)	Indivi	Institu	Officer	Key eı	Highest compensated employee	Former						
(18) THERESA SILANSKIS	40.00												
EXECUTIVE DIRECTOR, EX-OFF		1		Х				0.		0.	1		0.
		1									1		
		1									1		
		1									1		
		1									1		
		1									1		
		1									1		
											1		
													-
		1									1		
1h Subtotal	L		<u> </u>	<u> </u>		<u> </u>		116,407.		0.	1	8,6	07.
1b Subtotal c Total from continuation sheets to Part V								0.		0.		• , •	0.
d Total (add lines 1b and 1c)								116,407.		0.	1	8,6	
2 Total number of individuals (including but n								·	000 of roportab			• , •	• • •
compensation from the organization	iot iii iiited to ti	1036	iiote	u ai	DOV	C) WI	10 1	eceived more than proc	,000 or reportable	.0			1
compensation from the organization												Yes	No
3 Did the organization list any former officer,	director trust	00	kov c	mn	lovo		r hic	shoet componented omr	olovoo on	ſ		100	
line 1a? If "Yes," complete Schedule J for s			•		•		_		•		3		Х
4 For any individual listed on line 1a, is the su											3		
and related organizations greater than \$15			-					<u>-</u>	the organization		4		Х
5 Did any person listed on line 1a receive or a									idual for convices		4		
rendered to the organization? If "Yes," com	-				-			-			5		Х
Section B. Independent Contractors	ipiete Scriedui	e	UI SI	JCII ,	pers	SOII .							
-	mnonostad !=	don	ond-	nt c	ont	roct	orc 1	that raceived mare the	\$100,000 of ac-	2000	otion	rom	
 Complete this table for your five highest co the organization. Report compensation for 										iperis	auUII l	10111	
	trie caleridar y	ear	enai	ng v	VILI	Or W	ILITIII		year.			<u> </u>	
(A) Name and business	address	NO	ONE	2				(B) Description of s	ervices	С)) ompe		n
				_			\dashv						
							\dashv						
							\dashv						
							\dashv						
							_						
2 Total number of independent contractors (i	including but a	ot II	mita	d +c	the	SC 11	l	d abovo) who received a	oro than				
 Total number of independent contractors (i \$100,000 of compensation from the organi 		IOL II		u iO		se 11: 0	ى ب ح ال	a above, who received h	IOI C LIIAII				
Too,ooo or compensation from the organi	zation -										Form	gan "	2010)
											rorm	33U ()	∠∪ 19)

Pa	T V	1111						5			
			Check if Schedule O	conta	ains a re	sponse	or note to any lin	ne in this Part VIII (A)	(B)	(C)	
								Total revenue	Related or exempt	Unrelated	Revenue excluded
									function revenue	business revenue	sections 512 - 514
ts t	1 :	<u></u>	Federated campaigns		1	а					
iran			Membership dues			b					
, B			Fundraising events			c					
ar /			Related organizations			d					
Contributions, Gifts, Grants and Other Similar Amounts			Government grants (contr			e	93,995.				
ioi			All other contributions, gifts,				,				
the			similar amounts not included			f	6,068,480.				
E O			Noncash contributions included in			g \$	24,230.				
a S		_	Total. Add lines 1a-1f		_	-		6,162,475.			
							Business Code				
e l	2 :	а	PROGRAM INCOME				900099	58,844.	58,844.		
اه کّ		b									
Se		С									
eve		d									
Program Service Revenue		е									
<u>-</u>	1	f	All other program service	reve	nue						
		g	Total. Add lines 2a-2f					58,844.			
	3		Investment income (include	ding	dividend	ds, intere	est, and				
			other similar amounts)					983,082.			983,082.
	4		Income from investment of	of tax	-exemp	t bond p	proceeds				
	5		Royalties								
					(i) F	Real	(ii) Personal				
	6	а	Gross rents	6a							
	- 1	b	Less: rental expenses	6b							
			Rental income or (loss)	6с							
			Net rental income or (loss)							
	7		Gross amount from sales of		- '	urities	(ii) Other				
			assets other than inventory	7a	11,62	6,613.					
o l			Less: cost or other basis	<u></u>	0 51						
Revenue				7b		6,023.					
eve	•	с	Gain or (loss)	7c	1,91	0,590.		1 010 500			1 010 500
er B			Net gain or (loss)				P	1,910,590.			1,910,590.
Oth	8		Gross income from fundraising including \$	Ü	`						
١			including \$contributions reported on								
			Part IV, line 18		-						
		h	Less: direct expenses			8b					
			Net income or (loss) from								
			Gross income from gamin		•						
	٠,		Part IV, line 19	-							
			Less: direct expenses								
			Net income or (loss) from								
			Gross sales of inventory, I	•	•						
			and allowances			10a					
			Less: cost of goods sold								
			Net income or (loss) from				>				
S							Business Code				
e gon	11 :	а									
Miscellaneous Revenue	ı	b									
Sev.		С									
ig ∐		d	All other revenue								
		е	Total. Add lines 11a-11d				>				
	12		Total revenue. See instruction	ons				9,114,991.	58,844.	0.	2,893,672.

Part IX | Statement of Functional Expenses

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

	Check if Schedule O contains a respon	plete all columns. All otherse or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
		,	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
3	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
3	trustees, and key employees	119,870.		119,870.	
6	Compensation not included above to disqualified				
٠	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	170,479.		168,973.	1,506
8	Pension plan accruals and contributions (include	,		,	_ / - / - /
-	section 401(k) and 403(b) employer contributions)	19,836.		19,836.	
9	Other employee benefits	24,072.		24,072.	
10	Payroll taxes	21,369.		21,250.	119
11	Fees for services (nonemployees):	, = = = =		, = = = =	
	. ` ` ' ' '				
b	Legal	2,891.		2,891.	
c		33,776.		33,776.	
d		, , , , , , , , , , , , , , , , , , ,		<u> </u>	
e	D (' ' ' ' ' ' ' ' ' ' ' O D ' ' ' ' ' ' '	51,821.			51,821
f	Investment management fees	150,061.		150,061.	-
g					
_	column (A) amount, list line 11g expenses on Sch O.)	220,882.	116,839.	52,092.	51,951
12	Advertising and promotion	10,924.	10,924.		
13	Office expenses	9,416.	7,646.	1,770.	
14	Information technology	134,412.	39,836.	78,466.	16,110
15	Royalties				
16	Occupancy				
17	Travel	12,674.	6,034.	140.	6,500
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	211,801.	210,090.	1,571.	140
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	11,563.		11,563.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а		1,982,140.	1,982,140.	0.	0
b	BUILDING RENOVATION	523,004.	523,004.	0.	0
С	MISCELLANEOUS	320,043.	92,150.	23,645.	204,248
d	OTHER PROGRAM SUPPORT	206,199.	206,199.	0.	0
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	4,237,233.	3,194,862.	709,976.	332,395
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2019

Form **990** (2019)

Form 990 (2019) Part X | Balance Sheet

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part >	۲		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	9,449,664.	1	11,719,529.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	3,700,707.	3	4,845,744.
	4	Accounts receivable, net		4	24,683.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%	6		
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ř	9	Prepaid expenses and deferred charges		9	61,084.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities	37,570,720.	11	39,491,380.
	12	Investments - other securities. See Part IV, line 11	18,911,795.	12	15,817,226.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	454,284.	15	454,284.
	16	Total assets. Add lines 1 through 15 (must equal line 33)		16	72,413,930.
	17	Accounts payable and accrued expenses	445,297.	17	406,210.
	18	Grants payable		18	
	19	Deferred revenue	671,533.	19	468,742.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%	6		
ja ja		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	074 050
	26	Total liabilities. Add lines 17 through 25	1,116,830.	26	874,952.
S		Organizations that follow FASB ASC 958, check here ▶ X			
nce		and complete lines 27, 28, 32, and 33.	F 600 600		F 756 005
ala	27	Net assets without donor restrictions		27	5,756,825.
g B	28	Net assets with donor restrictions	03,3/3,3/0.	28	65,782,153.
<u>.</u> 5		Organizations that do not follow FASB ASC 958, check here	J		
è		and complete lines 29 through 33.			
əts	29	Capital stock or trust principal, or current funds		29	
SS	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	71 520 070
ž	32	Total net assets or fund balances		32	71,538,978.
	33	Total liabilities and net assets/fund balances	70,178,800.	33	72,413,930.

	990 (2019) UNIVERSITY OF BALTIMORE FOUNDATION, INC.	23-70	<u> 36780</u>	Pa	ge 12
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	9,11		
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,23		
3	Revenue less expenses. Subtract line 2 from line 1	3	4,87	7,7	58.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		69,06		
5	Net unrealized gains (losses) on investments	5	-2,40	0,7	50.
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	71,53	8,9	78.
Pa	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	_X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e 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				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

SCHEDULE A

(Form 990 or 990-EZ)

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.

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

OMB No. 1545-0047 **2019**

Open to Public Inspection

Employer identification number Name of the organization UNIVERSITY OF BALTIMORE FOUNDATION, INC. 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.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 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.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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 III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f 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 No above (see instructions))

Total

Schedule A (Form 990 or 990-EZ) 2019 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Page 2

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

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

Section A. Public Support							
Cale	endar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	3969255.	6720088.	3346825.	3038492.	6162475.	23237135.
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	3969255.	6720088.	3346825.	3038492.	6162475.	23237135.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						5195438.
6	Public support. Subtract line 5 from line 4.						18041697.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	3969255.	6720088.	3346825.	3038492.	6162475.	23237135.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	978,020.	838,852.	777,129.	1010757.	983,082.	4587840.
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.)	140,042.	152,323.	174,151.	178,091.	58,844.	703,451.
11	Total support. Add lines 7 through 10						28528426.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stor	here					>
	ction C. Computation of Publ						
14	Public support percentage for 2019 (14	63.24 %
15	Public support percentage from 2018	Schedule A, Part	II, line 14			15	60.98 %
16a	33 1/3% support test - 2019. If the o	-					
	stop here. The organization qualifies						
b	33 1/3% support test - 2018. If the o						
	and stop here. The organization qual	ifies as a publicly s	supported organization	ation			▶□
17a	10% -facts-and-circumstances tes	t - 2019. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac				•	_	
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		▶□
b	10% -facts-and-circumstances tes	t - 2018. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, cl	neck this box and	stop here. Explair	in Part VI how the	e
	organization meets the "facts-and-circ		· ·	•	,		
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b			
					Sche	dule A (Form 990	or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Page 3 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support	clow, picase com	piete i dit ii.)				
	endar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and	, ,	` ,	, ,	, ,	1	``
	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					1	
J	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
4	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					+	
	Total. Add lines 1 through 5			-			
/ 6	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	zation,
-	check this box and stop here						<u></u>
	ction C. Computation of Publ					 	
	Public support percentage for 2019 (I					15	%
	Public support percentage from 2018					16	%
	ction D. Computation of Inves					14-1	
17	Investment income percentage for 20					17	%
18	Investment income percentage from 2					18	%
19	a 33 1/3% support tests - 2019. If the						17 is not
ŀ	more than 33 1/3%, check this box at 33 1/3% support tests - 2018. If the						▶Ш and
	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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	За		
	26		
	3b		
	3с		
	_		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	0:		
	9b		
	9с		
	10a		
	iua		
	10b		
n a	90 or 99	0-F7	2019

Sche	dule A (Form 990 or 990-EZ) 2019 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-70	3678	0 Pa	aae 5
	t IV Supporting Organizations (continued)			.900
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	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			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	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 in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations	<u> </u>		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
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 government entity (see ins	tructions	s).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	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 in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? 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 or 990-EZ) 2019 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Page 6

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	anizations	<u> </u>
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust o	n Nov. 20, 1970 (explain in	Part VI). See instructions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
_5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	y integra	ated Type III supporting org	ganization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Page 7

Par	t V	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Secti	ion D -	Distributions		,	Current Year
1	Amou	nts paid to supported organizations to accomplish exe	mpt purposes		
2	Amou	nts paid to perform activity that directly furthers exemp			
	organ	izations, in excess of income from activity			
3	Admir	nistrative expenses paid to accomplish exempt purpose	ns		
4		nts paid to acquire exempt-use assets	•		
5		ied set-aside amounts (prior IRS approval required)			
6		distributions (describe in Part VI). See instructions.			
7		annual distributions. Add lines 1 through 6.			
8		outions to attentive supported organizations to which the	ne organization is responsive	 e	
_		de details in Part VI). See instructions.		-	
9		outable amount for 2019 from Section C, line 6			
10		amount divided by line 9 amount			
	<u> </u>	amount arriage by line o amount	(i)	(ii)	(iii)
Secti	ion E -	Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
1	Distrib	outable amount for 2019 from Section C, line 6			
2	Unde	rdistributions, if any, for years prior to 2019 (reason-			
	able c	ause required- explain in Part VI). See instructions.			
3	Exces	s distributions carryover, if any, to 2019			
а	From	2014			
b	From	2015			
С	From	2016			
d	From	2017			
е	From	2018			
f	Total	of lines 3a through e			
g	Applie	ed to underdistributions of prior years			
h	Applie	ed to 2019 distributable amount			
i	Carry	over from 2014 not applied (see instructions)			
j	Rema	inder. Subtract lines 3g, 3h, and 3i from 3f.			
4		outions for 2019 from Section D,			
	line 7:	\$			
а		ed to underdistributions of prior years			
		ed to 2019 distributable amount			
С	Rema	inder. Subtract lines 4a and 4b from 4.			
5		ining underdistributions for years prior to 2019, if			
		Subtract lines 3g and 4a from line 2. For result greater			
	-	zero, explain in Part VI. See instructions.			
6		ining underdistributions for 2019. Subtract lines 3h			
_		b from line 1. For result greater than zero, explain in			
		/I. See instructions.			
7		ss distributions carryover to 2020. Add lines 3j			
•	and 4				
8		down of line 7:			
		ss from 2015			
		ss from 2016			
		ss from 2017			
		ss from 2018			
е	EXCES	ss from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Schedule A	(Form 990 or 990-EZ) 2019 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036/80 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
	(OBE INSTRUCTIONS.)

Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2019

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
THE PETER AND GEORGIA ANGELOS FOUNDATION	3,500,000.	2,929,431.
CARNEGIE CORPORATION OF NEW YORK	752,200.	181,631.
THE BOB & RENEE PARSONS FOUNDATION	1,000,000.	429,431.
JOHN AND BARBARA RIPLEY	1,000,000.	429,431.
SAM ROSE	1,200,000.	629,431.
WHITING-TURNER CONTRACTING CO	1,000,000.	429,431.
JOHN COGILL BURGESS ESTATE	707,790.	137,221.
BARRY & LYN CHASEN	600,000.	29,431.
Total Excess Contributions to Schedule A, Part II, Line 5	1	5,195,438.

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 Open to Public Inspection

Name of the organization

UNIVERSITY OF BALTIMORE FOUNDATION, INC.

Employer identification number 23-7036780

Pa	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the						
	organization answered "Yes" on Form 990, Part IV, line 6.						
	•	(a) Donor advised funds	(b) Fur	nds 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	writing that the assets held in donor adv	ised funds				
	are the organization's property, subject to the organization's	_		Yes No			
6	Did the organization inform all grantees, donors, and donor a						
	for charitable purposes and not for the benefit of the donor of						
	impermissible private benefit?			Yes No			
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7				
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).					
	Preservation of land for public use (for example, recrea	ation or education) Preservation o	f a historically	important land area			
	Protection of natural habitat	Preservation o	f a certified hi	storic structure			
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the forn	n of a co <u>nserv</u>	ation easement on the last			
	day of the tax year.			Held at the End of the Tax Year			
а	Total number of conservation easements		2a				
	Total acreage restricted by conservation easements						
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c				
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic struc	ture				
	listed in the National Register		2d				
3	Number of conservation easements modified, transferred, re			n during the tax			
	year ▶						
4	Number of states where property subject to conservation ea	sement is located >					
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	:				
	violations, and enforcement of the conservation easements i	t holds?		Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing con	nservation eas	sements during the year			
	>						
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easeme	nts during the year			
	> \$						
8	Does each conservation easement reported on line 2(d) above						
	and section 170(h)(4)(B)(ii)?						
9	In Part XIII, describe how the organization reports conservation	•					
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial stater	nents that des	scribes the			
Da	organization's accounting for conservation easements.	f Aut Historical Tracerry	Alban Cinail	lau Aaaata			
Pa	rt III Organizations Maintaining Collections o		otner Simil	ar Assets.			
_	Complete if the organization answered "Yes" on Form						
та	If the organization elected, as permitted under FASB ASC 95						
	of art, historical treasures, or other similar assets held for pul			public			
	service, provide in Part XIII the text of the footnote to its final						
D	If the organization elected, as permitted under FASB ASC 95						
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in fur	tnerance of pi	ublic service,			
	provide the following amounts relating to these items:		_	Φ.			
	(i) Revenue included on Form 990, Part VIII, line 1		_	\$ \$ 454,284.			
•				· ————————————————————————————————————			
2	If the organization received or held works of art, historical tre		aı gain, provid	ie			
_	the following amounts required to be reported under FASB A		_	Φ			
a	Revenue included on Form 990, Part VIII, line 1			Φ			

932051 10-02-19

Schedule D (Form 990) 2019

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

Schedule D (Form 990) 2019

e Other

d Equipment

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

Schedule D (Form 990) 2019

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

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

	ule D (Form 990) 2019 UNIVERSITY OF BALTIMORE FOL				
Part	XI Reconciliation of Revenue per Audited Financial Stateme	nts W	ith Revenue per I	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			1.	6 512 062
	Fotal revenue, gains, and other support per audited financial statements			1	6,512,863.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ا مو ا	-2,400,750		
	Net unrealized gains (losses) on investments Donated services and use of facilities	-	2,400,750	<u>-</u>	
	Recoveries of prior year grants				
	Other (Describe in Part XIII.)	-	-51,317		
	Add lines 2a through 2d			2e	-2,452,067.
	Subtract line 2e from line 1			3	8,964,930.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				, , , , , , , , , , , , ,
	nvestment expenses not included on Form 990, Part VIII, line 7b	4a	150,061		
	Other (Describe in Part XIII.)				
	Add lines 4a and 4b			4c	150,061.
5	Fotal revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	9,114,991.
Part	XII Reconciliation of Expenses per Audited Financial Statemen	ents V	Vith Expenses per	r Retu	ırn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	4,060,063.
2 /	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a l	Donated services and use of facilities	2a			
b l	Prior year adjustments	2b			
c (Other losses	2c	4= 001		
	Other (Describe in Part XIII.)		45,391	<u>•</u>	45 201
	Add lines 2a through 2d			2e	45,391.
	Subtract line 2e from line 1			3	4,014,672.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:		150 061		
a I	nvestment expenses not included on Form 990, Part VIII, line 7b	4a	150,061, 72,500,		
	Other (Describe in Part XIII.)			_	222 561
	Add lines 4a and 4b			4c	222,561. 4,237,233.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information.			5	4,431,433.
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I	V linos	1h and 2h: Part V line	1. Darl	t V line 2: Part VI
	d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addi			4, Fan	IA, III le 2, Fait Ai,
111103 2	a and 45, and 1 art XII, lines 2d and 45. Also complete this part to provide any addr	lionai ii	normation.		
-					
PAR'	Γ III, LINE 4:				
ART	AND HISTORICAL COLLECTIONS INCLUDE LIBRAR	RY C	OLLECTIONS,	POS	TERS,
DRTI	NTS AND OTHER ARTIFACTS.				
11/11	AND OTHER ARTIFACTS.				
PAR'	ΓV, LINE 4:				
THE	FOUNDATION'S PERMANENT ENDOWMENT CONSISTS	OF	VARIOUS DOI	NOR	RESTRICTED
FIIN	DS ESTABLISHED TO PROVIDE A SOURCE OF INCO	ME:	FOR ONGOING	PR∩	GRAMS AS
1 011	DO EDINDUIGHED TO TROVIDE A DOORCE OF THE	71111	TON ONGOING	1110	GRIMID, AD
WEL	L AS SCHOLARSHIPS AND PROFESSORSHIPS.				
יסגס	r y time 2.				
TAL	F X, LINE 2:				
THE	ORGANIZATION FOLLOWS THE PROVISIONS OF AC	CCOU	NTING FOR U	NCER	TAINTY IN
	OME TAXES UNDER THE INCOME TAXES TOPIC OF	THE	CODIFICATIO		THE
932054	10-02-19			Sche	dule D (Form 990) 2019

CODIFICATION REQUIRES THE EVALUATION OF TAX POSITIONS, WHICH INCLUDE

MAINTAINING THEIR TAX-EXEMPT STATUS AND THE TAXABILITY OF ANY UNRELATED

BUSINESS INCOME, AND DOES NOT ALLOW RECOGNITION OF TAX POSITIONS WHICH DO

NOT MEET A MORE-LIKELY-THAN-NOT THRESHOLD OF BEING SUSTAINED BY THE

APPLICABLE TAX AUTHORITY. MANAGEMENT DOES NOT BELIEVE IT HAS TAKEN ANY

TAX POSITIONS THAT WOULD NOT MEET THIS THRESHOLD.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

REVENUE FROM UNIVERSITY PROPERTIES, INC.	21,183.
BAD DEBT EXPENSE	-72,500.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-51,317.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES FROM UNIVERSITY	PROPERTIES, INC.	45,391.
--------------------------	------------------	---------

PART XII, LINE 4B - OTHER ADJUSTMENTS:

BAD DEBT	EXPENSE	72,500.

PART XI, LINE 2D

REVENUE OF \$21,183 FROM UNIVERSITY PROPERTIES, INC., AN AFFILIATE, IS

INCLUDED IN THE AUDITED FINANCIAL STATEMENTS, BUT NOT INCLUDED IN THE FORM

990.

PART XII, LINE 2D

EXPENSES OF \$45,391 FROM UNIVERSITY PROPERTIES, INC., AN AFFILIATE, ARE

INCLUDED IN THE AUDITED FINANCIAL STATEMENTS, BUT NOT INCLUDED IN THE FORM

990.

Schedule D (Form 990) 2019

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

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

➤ Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization					Employer identi	fication number
UNIVERSITY OF	BALTIMORE	FOUNDAT	ION, INC.		23-703678	80
Part I General II	nformation on A		tside the United States. Comple	ete if the organ		
	art IV, line 14b.					
			ds to substantiate the amount of its gra] v
the grantees' eligible	ity for the grants or a	assistance, and	the selection criteria used to award the	grants or ass	stance? L	Yes No
2 For grantmakers.	Describe in Part V the	e organization's	procedures for monitoring the use of its	s grants and o	ther assistance ou	tside the
United States.		o organization o	procedures for mornioning the dee or it	o granto ana o	arior accionarios ca	10140 1110
3 Activities per Region	n. (The following Part	t I, line 3 table c	an be duplicated if additional space is r	needed.)		
(a) Region	(b) Number of offices in the region	employees, agents, and independent contractors	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a prod describe	vity listed in (d) gram service, e specific type (s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND		in the region				III the region
THE CARIBBEAN -						
ANTIGUA & BARBUDA,						
ARUBA, BAHAMAS	0	0	INVESTMENTS ONLY			5,914,503.
						1
						1
3 a Subtotal	0	0				5,914,503.
b Total from continuate sheets to Part I		0				0.
c Totals (add lines 3a and 3b)	١ .	0				5,914,503.

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

Schedule F (Form 990) 2019

Part II Grants and Other	er Assistance to Org	ganizations or Entities	Outside the United States.	Complete if the o	rganization answered	d "Yes" on Form	990, Part IV, line 15, fo	r any
recipient who rec	ceived more than \$5,	000. Part II can be dupli	cated if additional space is ne	eeded.				
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)		(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		, recognized as tax-e	exempt		•

3 Enter total number of other organizations or entities

Part III Grants and Other Assistand Part III can be duplicated if a			ates. Complete i	f the organization answered "Yes" o	on Form 990, Par	t IV, line 16.	
(a) Type of grant or assistance	(b) 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)

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

Schedule F (Form 990) 2019

Page 4

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

UNIVERSITY OF BALTIMORE FOUNDATION, INC.

Employer identification number 23-7036780

Part I Fundraising Activities required to complete this part	Complete if the organization answer	ered "Y	es" or	n Form 990, Part IV,	line 17. Form 990-EZ	Z filers are not
 1 Indicate whether the organization rail a X Mail solicitations b X Internet and email solicitation c X Phone solicitations d X In-person solicitations 2 a Did the organization have a written 	sed funds through any of the following set of the f	tion of tion of fundra (includerofessi	non-g gover ising o ding o	overnment grants nment grants events fficers, directors, true undraising services?	stees, or X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundra have cu or con contribu	trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
WILSON-BENNETT TECHNOLOGY,		Yes	No			
INC - 2239 BILL FOSTER	TELEMARKETING		Х	127,465.	51,820.	75,645.
Solution Solut					·	

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

Schedule G (Form 990 or 990-EZ) 2019

Schedule G (Form 990 or 990-EZ) 2019 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7036780 Page 2 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 (add col. (a) through col. (c)) (total number) (event type) (event type) 1 Gross receipts 2 Less: Contributions Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 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 (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes Yes 6 Volunteer labor 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** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? _____ Yes ____ No

Schedule G (Form 990 or 990-EZ) 2019

b If "Yes," explain:

	edule G (Form 990 or 990-EZ) 2019 UNIVERSITY OF BALTIMORE FOUNDATION, INC. 23-7	<u> 1036780</u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	└── No
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility		%
	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		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party \$\sum_{\text{s}}\$		
c	If "Yes," enter name and address of the third party:		
	Name >		
	Address ▶		
16	Gaming manager information:		
	Name ▶		
	Gaming manager compensation ▶ \$		
	Description of services provided		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	Mandatory distributions:		
	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	L	└── No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
По	organization's own exempt activities during the tax year > \$		01 401
Га	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	art III, lines 9,	96, 106,
	100, 100, 10, and 110, at approaches 100 provide any additional information.		
SC	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISEF	RS:	
(I) NAME OF FUNDRAISER: WILSON-BENNETT TECHNOLOGY, INC		
(I) ADDRESS OF FUNDRAISER:		
<u> </u>			
22	39 BILL FOSTER MEMORIAL HWY W, CABOT, AR 72023		

Schedule G	(Form 990 or 990-EZ)	UNIVERSITY	OF	BALTIMORE	FOUNDATION,	INC.23-7036780	Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Inf	ormation (continued)					
		· · · · · · · · · · · · · · · · · · ·					
<u></u>							

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization UNIVERSITY OF BALTIMORE FOUNDATION, INC. Employer identification number 23-7036780

Pai	rt I Types of Property						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	_	unts
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded	X	4	24,230.	MARKET VALU	E	
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	ation durin	g the tax year for c	ontributions			
	for which the organization completed Form 828	3, Part IV,	Donee Acknowled	gement 29			
						Ye	s No
30a	During the year, did the organization receive by	contribution	on any property rep	oorted in Part I, lines 1 through	gh 28, that it		
	must hold for at least three years from the date	of the initia	al contribution, and	I which isn't required to be u	sed for		
	exempt purposes for the entire holding period?					30a	X
b	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance p	olicy that r	equires the review	of any nonstandard contribu	ıtions?	31 X	
32a	Does the organization hire or use third parties of	or related or	ganizations to soli	cit, process, or sell noncash			
	contributions?					32a	X
b	If "Yes," describe in Part II.						
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of propert	y for which column (a) is che	cked,		
	describe in Part II.						

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

Schedule M (Form 990) 2019

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

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ)
Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047 **2019**Open to Public

Open to Public Inspection

Name of the organization

UNIVERSITY OF BALTIMORE FOUNDATION, INC.

Employer identification number 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,AL,CT,FL,GA,HI,IL,KY,MS,MO,TN,VA,WV,PA,DC

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

THESE DOCUMENTS ARE AVAILABLE UPON REQUEST.

PART XI, LINE 2C

THE AUDIT PROCESS WAS UNCHANGED FROM THE CURRENT YEAR, AND IS OVERSEEN
BY THE AUDIT COMMITTEE.

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

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

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

➤ Attach to Form 990.

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

2019
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Department of the Treasury Internal Revenue Service

UNIVERSITY OF BALTIMORE FOUNDATION, INC.

Employer identification number 23-7036780

Part I Identification of Disregarded Entities. Compl	ete if the organization answered "	Yes" on Form 990, Part IV, line 3	33.				
(a)	(b)	(c)	(d)	(e)		(f)	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state of foreign country)	or Total inco	me End-of-yea	r assets Dir	ect controllin entity	g
Part II Identification of Related Tax-Exempt Organi organizations during the tax year.	zations. Complete if the organizat	ion answered "Yes" on Form 99	0, Part IV, line 34,	because it had one	e or more related ta	x-exempt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling	ng _{con}	(g) 512(b)(13) trolled atity?
				501(c)(3))		Yes	No
UNIVERSITY PROPERTIES, INC 52-1040290	_						
1130 N. CHARLES STREET BALTIMORE, MD 21201	SEE SCHEDULE O	MARYLAND	501(C)(2)		N/A		X
							-

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

Schedule R (Form 990) 2019

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.

	signification to a partition in partition and the control of the c										
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of	Disprop	ortionate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera	or Percentage
or related organization		(state or foreign	entity	excluded from tax under	income	end-of-year assets	allocations?		20 of Schedule	partne	Ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0
				ı			I		I.		

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)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i	i) tion
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	CITA	
		country)		,				Yes	No
	1								
	1								
	1								
		16	<u> </u>						

Page 3

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No			
1 During the tax year, did the organization engage in any of the following transaction	ons with one or more i	related organizations listed	in Parts II-IV?						
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled ent	ity			1a		Х			
b Gift, grant, or capital contribution to related organization(s)				1b		Х			
c Gift, grant, or capital contribution from related organization(s)				1c		Х			
d Loans or loan guarantees to or for related organization(s)				1d		Х			
e Loans or loan guarantees by related organization(s)				1e		Х			
f Dividends from related organization(s)				1f		Х			
g Sale of assets to related organization(s)				1g		Х			
h Purchase of assets from related organization(s)									
i Exchange of assets with related organization(s)									
j Lease of facilities, equipment, or other assets to related organization(s)									
,									
k Lease of facilities, equipment, or other assets from related organization(s)									
I Performance of services or membership or fundraising solicitations for related organization(s)									
m Performance of services or membership or fundraising solicitations by related organization(s)									
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
o chaining of paid offipioyodo Marriolatou organization(c)				10	Х				
n Reimbursement paid to related organization(s) for expenses									
p Reimbursement paid to related organization(s) for expenses									
Tombaroomeric para by rolated organization(o) for expenses	q Reimbursement paid by related organization(s) for expenses								
r Other transfer of cash or property to related organization(s)				1r		х			
s Other transfer of cash or property from related organization(s)				1s		X			
2 If the answer to any of the above is "Yes," see the instructions for information on				13	l				
			·						
(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amount invo	alved					
Trains of Foldier of Garmanion	type (a-s)	7 anodne mivorvod	Motriod of dotoffilling afficient lifts	Sivou					
	7								
(1) UNIVERSITY PROPERTIES, INC.	N	0.							
(1) 01/11/11/01/11/11/11/11/11/07									
(2)									
(-)									
(3)									
(3)									
(4)									
(4)									
(E)									
(5)									
(e)									
(6)	47		Schodulo F) (Ear-	m 000	2040			
	± /		Schodillo L	. II-Orr	11 441				

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.

Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners 501(c)(orgs.	sec. (3)	Share of total	Share of end-of-year	Disprition	opor- ate ions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera manag	or Perce	centage
or entity		country)	excluded from tax under sections 512-514)	orgs.	?"	totai	ena-or-year	allocat	ions?				- ق - ا - ا - ا - ا - ا
		Country)	Sections 5 (2-5 (4)			income	assets	uou		of Schedule K-1	partne	? OWIT	nersnip
				Yes	No	lilcome	assets	Yes	No	(FOIII 1065)	Yes N	0	
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Schedule F	R (Form 990) 2019	UNIVERSITY	OF.	BALTIMORE	FOUNDATION,	INC.23-7036780	Page 5
Part VII	R (Form 990) 2019 Supplemental Inf	formation					
		rmation for responses to	questio	ns on Schedule R. S	See instructions.		
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Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

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

OMB No. 1545-0047

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

Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of exempt organization or other filer, see instructions. Taxpaver identification number (TIN) print 23-7036780 UNIVERSITY OF BALTIMORE FOUNDATION, File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 1130 N. CHARLES STREET instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. BALTIMORE, MD 21201 Enter the Return Code for the return that this application is for (file a separate application for each return) Application Return Application Return Is For Code Is For Code Form 990 or Form 990-EZ Form 990-T (corporation) 01 07 Form 990-BL 02 Form 1041-A 80 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF Form 5227 10 04 Form 990-T (sec. 401(a) or 408(a) trust) Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 JENNIFER SCHWARTZ • The books are in the care of ▶ 1130 N. CHARLES STREET - BALTIMORE, MD 21201 Telephone No. \blacktriangleright 410-837-6148 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. MAY 17, 2021 I request an automatic 6-month extension of time until , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year or ► X tax year beginning JUL 1, 2019 , and ending JUN 30, 2020 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return L Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За **b** If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

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

Efiled on Nov 10 2020 Form 8868 (Rev. 1-2020)