Department of the Treasury Internal Revenue Service

A For the 2018 calendar year, or tax year beginning

Return of Organization Exempt From Income Tax

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

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

and ending

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

OMB No. 1545-0047

Inspection

В	Check if applicable	C Name of organization MARYLAND ASSOCATION OF NON-PROFIT		D Employer	identific	cation number	
	Addre	S ORGANIZATIONS					
	Name chang			į	<u> 52-1</u>	749231	
	Initial return Final return	Number and street (or P.O. box if mail is not delivered to street address) 1500 UNION AVENUE Room/ 2500		E Telephone		727-6367	
	termin			G Gross receipts		2,109,383.	
Г	Amen		ı	H(a) Is this a			
Ē	Applic	•		for subor			
	pendi	SAME AS C ABOVE	H(b) Are all subordinates included? Yes No				
ī	Tax-ex	empt status: X 501(c)(3) 501(c) ()	527			list. (see instructions)	
		te: WWW.MARYLANDNONPROFITS.ORG		H(c) Group ex			
K	Form of	organization: X Corporation	Year c	of formation: 19	991 N	1 State of legal domicile: MD	
	art I	Summary					
	1	Briefly describe the organization's mission or most significant activities: MARYLANI					
Governance	<u> </u>	TO STRENGTHEN ORGANIZATIONS AND NETWORKS FOR	GR	EATER QU	JALI	TY OF LIFE	
r	2	Check this box if the organization discontinued its operations or disposed of	more t	than 25% of its	net ass		
9	3	Number of voting members of the governing body (Part VI, line 1a)				10	
		Number of independent voting members of the governing body (Part VI, line 1b)				10	
V	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)				17	
Activities &	6	Total number of volunteers (estimate if necessary)				114	
Δ.	7 a	Total unrelated business revenue from Part VIII, column (C), line 12				0.	
_	<u> </u>	Net unrelated business taxable income from Form 990-T, line 38			. 7b	0.	
		Ocal Stations and State (Death Mill Sec. 41)		Prior Year 473,7	715	Current Year 431,449.	
4	8	Contributions and grants (Part VIII, line 1h)		1,535,7		1,626,144.	
Revenue	9	Program service revenue (Part VIII, line 2g)		1,333,	0.	1,020,144.	
ă	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		11,3		51,681.	
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,020,7		2,109,383.	
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,020,	0.	0.	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0.	0.	
	4-	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,162,8	-	1,120,856.	
ď	162	Professional fundraising fees (Part IX, column (A), line 11e)		1,102,0	0.	0.	
Fynenses	b loa	Total fundraising expenses (Part IX, column (D), line 25) 20,065.					
Ä	آ ₁₇	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		874,8	336.	938,447.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,037,7	732.	2,059,303.	
		Revenue less expenses. Subtract line 18 from line 12		-16,9	62.	50,080.	
or				inning of Currer		End of Year	
ets	ם 20	Total assets (Part X, line 16)		337,6		423,447.	
Ass	g 21	Total liabilities (Part X, line 26)		368,4		404,156.	
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 20		-30,7	789.	19,291.	
P	art II	Signature Block					
Un	der pena	lties of perjury, I declare that I have examined this return, including accompanying schedules and st	tatemei	nts, and to the be	est of my	knowledge and belief, it is	
true	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which pre	parer l	nas any knowled	je.		
Sig	gn	Signature of officer		Date			
He	re	HEATHER ILIFF, PRESIDENT AND CEO					
		Type or print name and title	Ιn	oto I	<u> </u>	DTIN	
		Print/Type preparer's name Preparer's signature	ا ا	ate	Check	PTIN	
Pai		MARK STEINBERG			self-employ		
	parer	Firm's name HERTZBACH & COMPANY, P.A.		Firm's	LIN ▶	52-1158459	
US	Only	Firm's address 800 RED BROOK BLVD, SUITE 300 OWINGS MILLS, MD 21117		Dhama	no / A	10) 363-3200	
N/-	v tha !!	RS discuss this return with the preparer shown above? (see instructions)		Pnone	110. (4	X Yes No	
IVIC	ty tile li	10 discuss this return with the preparet shown above: (SEE HISTRUCTORIS)				L** 1 C2 140	

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	MARYLAND NONPROFITS MISSION IS TO STRENGTHEN ORGANIZATIONS AND
	NETWORKS FOR GREATER QUALITY OF LIFE AND EQUITY.
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	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
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 \$ 644,200 • including grants of \$) (Revenue \$ 667,367 •)
	MEMBERSHIP
	MARYLAND NONPROFITS MEMBERSHIP PROGRAM ENABLES NONPROFIT ORGANIZATIONS
	TO PARTICIPATE IN PROGRAMS AND SERVICES TO STRENGTHEN THEIR
	ORGANIZATIONS. OUR 1,152 MEMBERS BENEFIT FROM ACCESSING A WIDE RANGE OF
	TOOLS, TEMPLATES AND RESOURCES TO STRENGTHEN THEIR BOARDS OF DIRECTORS,
	FUNDRAISING EFFORTS, INVEST IN THEIR STAFF AND VOLUNTEERS, AND ENSURE
	STRONG ETHICS AND LEGAL COMPLIANCE. MEMBERS SAVE MONEY BY PARTICIPATING
	IN OUR GROUP DISCOUNTS, FREE JOB POSTINGS, AND ACCESS TO FUNDRAISING
	DATABASES. IN 2018, MEMBERS PARTICIPATED IN TWO MAJOR NETWORKING EVENTS
	AND DOZENS OF EXECUTIVE DIRECTOR ROUNDTABLES TO STRENGTHEN THEIR
	CONNECTIONS AND COLLABORATION.
4b	(Code:) (Expenses \$ 280,899 • including grants of \$) (Revenue \$ \$ 212,876 •)
	LEARNING COMMUNITY
	MARYLAND NONPROFITS' LEARNING COMMUNITY ENABLES LEADERS OF NONPROFIT
	ORGANIZATIONS TO LEARN BEST PRACTICES AND COLLABORATE WITH EACH OTHER
	TO EXPAND THEIR CAPACITY AND IMPACT. IN 2018, MARYLAND NONPROFITS
	PROGRAMS ATTRACTED 2,880 PARTICIPANTS IN 48 WORKSHOPS, CONFERENCES,
	ROUNDTABLES, AFFINITY GROUPS AND NETWORKING OPPORTUNITIES.
4c	(Code:) (Expenses \$ $454,634.$ including grants of \$) (Revenue \$ $445,841.$)
	PROFESSIONAL DEVELOPMENT AND CONSULTING
	THE MARYLAND NONPROFITS CONSULTING GROUP PROVIDES HIGH-QUALITY
	STRATEGIC CONSULTING TO NONPROFIT ORGANIZATIONS AND LEADERSHIP COHORTS.
	IN 2018 WE PROVIDED CONSULTING AND CONTRACT TRAINING TO 66
	ORGANIZATIONS. WE COMPLETED A 3-YEAR INITIATIVE, WEST BALTIMORE ON THE
	RISE, THAT STRENGTHENED THE CAPACITY OF 8 COMMUNITY-BASED NONPROFIT
	ORGANIZATIONS IN THE 21217 ZIP CODE OF BALTIMORE, THE SAME NEIGHBORHOOD
	WHERE FREDDIE GRAY LIVED AND THE UPRISING OF 2015 OCCURRED. THIS
	INITIATIVE, SPONSORED BY THE T. ROWE PRICE FOUNDATION, ENABLED THE
	ENTIRE NEIGHBORHOOD TO SHOW ITS CIVIC PRIDE AND CAPABILITIES AS THEY
	PROVIDE PROGRAMS AND SERVICES FOR THEIR NEIGHBORS.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 264,678 • including grants of \$) (Revenue \$ 336,091 •)
4e	Total program service expenses ▶ 1,644,411.
	Form 990 (2018)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in 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			l
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			l
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
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 temporarily restricted endowments, permanent			,,
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	-
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			٦,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			1 37
	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	l		₩
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			x
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	Х	
	Schedule D, Parts XI and XII	12a	Λ	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	401-		x
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
13				X
14a	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		1
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	145		
10	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	<u>. </u>		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
-	1c and 8a? If "Yes," complete Schedule G, Part II	18		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		Х
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	<u> </u>	Х

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes."			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	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			
	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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	<u> </u>
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
832004	: 12-31-18	Form	990	(2018)

Form 990 (2018) ORGANIZATIONS

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

	i (continued)				V	NI.		
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	l			Yes	No		
Za	filed for the calendar year ending with or within the year covered by this return	2a	17					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	х			
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions							
За				За		Х		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule (3b				
	At any time during the calendar year, did the organization have an interest in, or a signature or other a							
	financial account in a foreign country (such as a bank account, securities account, or other financial a		•	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 A	ccoun	ts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?		5b		X		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5с				
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit							
	any contributions that were not tax deductible as charitable contributions?							
b	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
	were not tax deductible?			6b				
7	Organizations that may receive deductible contributions under section 170(c).							
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices p	rovided to the payor?	7a		_ <u>X</u> _		
	, , , , , , , , , , , , , , , , , , , ,			7b				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as requ	uired			7.7		
	to file Form 8282?	 I – .	 I	7c		<u> </u>		
	If "Yes," indicate the number of Forms 8282 filed during the year	7d		_		v		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		t?	7e 7f		$\frac{x}{x}$		
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?							
	 if the organization received a contribution of qualified intellectual property, and the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 							
8								
Ü	sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?							
9								
а	Did the appropriate conscious realization realization described distributions and acceptant 40000			9a				
b	Did the annual in a second state and a selection to a decrease decrease discourse and the decrease of			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:							
а	Gross income from members or shareholders	11a						
b	Gross income from other sources (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)	11b						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	? 	12a				
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			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							
D	organization is licensed to issue qualified health plans	13b]					
c	Enter the amount of reserves on hand	13c						
				14a				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule			14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune							
	excess parachute payment(s) during the year?			15		X		
	If "Yes," see instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t incon	ne?	16		X		
	If "Yes," complete Form 4720, Schedule O.							
				_	$\Delta \Delta \Delta$			

ORGANIZATIONS 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 in Schedule O. See instructions

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in 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 in Schedule O.								
b	Enter the number of voting members included in line 1a, above, who are independent 1b 10								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other								
	officer, director, trustee, or key employee?	2		X					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X					
6	6 Did the organization have members or stockholders?								
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or								
	more members of the governing body?	7a		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	Х						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
	organization's mailing address? If "Yes," provide the names and addresses in 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		Х					
	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		12a	Х						
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х						
	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						
	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).	. 5.0							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
	taxable entity during the year?	16a		х					
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	lou							
	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							
Sec	tion C. Disclosure	100							
17	List the states with which a copy of this Form 990 is required to be filed ▶MD								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s	only) s	availah	ole					
.0	for public inspection. Indicate how you made these available. Check all that apply.	J. 11 y / 6							
	X Own website Another's website X Upon request Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financi	ial						
19	statements available to the public during the tax year.	manc	iai						
20	State the name, address, and telephone number of the person who possesses the organization's books and records								
20	HEATHER ILIFF - 410-727-6367								
	1500 UNION AVENUE, SUITE 2500, BALTIMORE, MD 21211								
	TOOU CITEDIA IIV DIEDIA DOTTO ACOU, DENTITUULO, IID ATALL								

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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

		nor any related organization compensate								(E)	
(A)	(B) (C)		(D)	(E)	(F)						
Name and Title	Average		not c	heck	more	than o		Reportable	Reportable	Estimated	
	hours per week					is both or/trus		compensation from	compensation from related	amount of other	
	(list any	tor						the	organizations	compensation	
	hours for	direc				pa		organization	(W-2/1099-MISC)	from the	
	related	tee o	trustee			ensat		(W-2/1099-MISC)		organization	
	organizations	al trus	nal tr		loyee	comp				and related	
	below line)	Individual trustee or director	Institutional	Officer	Key employee	Highest compensated employee	Former			organizations	
(1) MICHAEL MITCHELL	1.00	드	드	5	32	王吉	3				
CHAIR	1:00	x		Х				0.	0.	0.	
(2) MARLA BOBOWICK	1.00	1									
VICE CHAIR		Х		х				0.	0.	0.	
(3) KIMBERLY CORBIN	1.00										
TREASURER		Х		Х				0.	0.	0.	
(4) GRACE LEE	1.00										
SECRETARY		Х		Х				0.	0.	0.	
(5) VIOLET APPLE	1.00										
BOARD MEMBER		X						0.	0.	0.	
(6) SHERYL BRISSETT CHAPMAN	1.00										
BOARD MEMBER		Х						0.	0.	0.	
(7) CARL DELORENZO	1.00							_	_	_	
BOARD MEMBER		Х						0.	0.	0.	
(8) PATRICIA O'MALLEY	1.00							_	_	_	
BOARD MEMBER		Х						0.	0.	0.	
(9) JOSHUA PEDERSEN	1.00	l									
BOARD MEMBER	1	X				_		0.	0.	0.	
(10) PHILIP SYMONDS, CPA	1.00								•		
BOARD MEMBER	1 00	Х				┝		0.	0.	0.	
(11) DESTINY-SIMONE RAMJOHN, PHD	1.00	٠,							0	_	
BOARD MEMBER	1 00	Х				-		0.	0.	0.	
(12) JANICE LIGGINS BOARD MEMBER	1.00	X						0.	0.	0.	
(13) ALLEN TIEN	1.00	Λ				\vdash		1	0.	· ·	
BOARD MEMBER	1.00	X						0.	0.	0.	
(14) HEATHER ILIFF	40.00	^				┢		0.	0.	· · ·	
PRESIDENT & CEO	40.00	1		Х				134,088.	0.	24,308.	
TREE PER LE CELO						\vdash		134,000.	•	24,500.	
		1									
									_		
		_	_		_	_	_			000	

Form **990** (2018)

Page 8

Par	t VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	Hig	ghes	st C	ompensated Employee	s (continued)				
	(A)	(B)	(B) (C)						(D)	(E)			(F)	
	Name and title	Average	Position (do not check more than one				one	Reportable	Reportable		Es	timate	ed	
		hours per	box, unless person is			is both	n an	compensation	compensatio	n	an	nount (of	
		week		Cer an	lu a u	recid	T	iee)	from	from related			other	
		(list any hours for	recto						the	organization			pensa	
		related	ordi	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MIS	sC)		om the	
		organizations	ruste	l trus		99	ubeu		(00-2/1099-101130)				anizati d relate	
		below	dual t	ntiona	_	nploy	st cor	- h					anizatio	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				3-		
			•											
			-											
			1											
			•											
							H							
			•											
	<u> </u>	l .							134,088.		0.	2	4,30	n o
	Sub-total								134,000.		0.		4,3	
	Total from continuation sheets to Part VI										0.	_	1 2 (0.
	Total (add lines 1b and 1c)							<u> </u>	134,088.				4,30	00.
2	Total number of individuals (including but n	ot limited to th	ose	liste	d ab	oove	e) wh	o re	eceived more than \$100,	000 of reportable	;			1
	compensation from the organization												V	
											1		Yes	No
3	Did the organization list any former officer,			e, ke	y en	nplo	yee,	or l	highest compensated er	nployee on				37
	line 1a? If "Yes," complete Schedule J for s											3		X
4	For any individual listed on line 1a, is the su	•							•	•				
	and related organizations greater than \$150											4	Х	
5	Did any person listed on line 1a receive or a	•				•			•					
_	rendered to the organization? If "Yes." com	plete Schedule	e J f	or su	ıch <u>ı</u>	oers	on .					5		X
	tion B. Independent Contractors													
1	Complete this table for your five highest co	•	•							•	ensat	tion fro	om	
	the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thin T		ear.				
	(A)	addraga	37/						(B)	om dooo	0)		_
	Name and business	address	N	ONE	5			\dashv	Description of s	ervices		оттре	nsatior	1
								_						
								_						
								_						
								_						
2	Total number of independent contractors (in	ncluding but n	ot lir	nited	d to		_	ted	above) who received mo	ore than				
	\$100,000 of compensation from the organiz	zation >				()							
												Form	990 (2	2018)

Form 990 (2018) ORGANIZ
Part VIII Statement of Revenue

		Check if Schedule O conta	ains a response	or note to anv lin	e in this Part VIII			
					(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue excluded from tax under
						exempt function revenue	business revenue	sections 512 - 514
(0.40	4 -	Followstand assessment	la-l			Teveride	Tevende	312 - 314
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns						
Gra	р	Membership dues						
ts, An	С.	Fundraising events						
igir ilar	d	Related organizations	1d	150 000				
ns, Sim	е	Government grants (contribution	, 	150,000.				
erS	f	All other contributions, gifts, grant		001 440				
je t		similar amounts not included abov		281,449.				
ont od O	g	Noncash contributions included in lines 1			424 440			
<u>3 g</u>	h	Total. Add lines 1a-1f			431,449.			
				Business Code				
ė	2 a	MEMBERSHIP SERV	ICES		1,020,627.	1,020,627.		
e <u>v</u> i	b	MEMBERSHIP DUES		900099	605,517.	605,517.		
Series	С							
am	d							
Program Service Revenue	е							
P	f	All other program service rever	nue					
	g	Total. Add lines 2a-2f		>	1,626,144.			
	3	Investment income (including of	dividends, intere	st, and				
		other similar amounts)		>	109.			109.
	4	Income from investment of tax						
	5	Royalties						
		•	(i) Real	(ii) Personal				
	6 a	Gross rents	15,650.					
		Less: rental expenses	0.					
		Rental income or (loss)	15,650.					
		Net rental income or (loss)		•	15,650.			15,650.
		Gross amount from sales of	(i) Securities	(ii) Other				
	_	assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
	c	Gain or (loss)						
		Net gain or (loss)		•				
ө		Gross income from fundraising						
nue		including \$	of					
Other Revenu		contributions reported on line	1c). See					
Ę.		Part IV, line 18	а					
the	b	Less: direct expenses	b					
O	С	Net income or (loss) from fund	raising events	>				
	9 a	Gross income from gaming act	tivities. See					
		Part IV, line 19	а					
	b	Less: direct expenses	b					
	С	Net income or (loss) from gami	ing activities	<u></u>				
	10 a	Gross sales of inventory, less r	returns					
		and allowances	а					
	b	Less: cost of goods sold						
	С	Net income or (loss) from sales	s of inventory	>				
		Miscellaneous Revenue		Business Code				
	11 a	PUBLICATION & M	ISCELLA	900099	36,031.	36,031.		
	b							
	С							
	d	All other revenue						
		Total. Add lines 11a-11d		>	36,031.			
	12	Total revenue. See instructions			2,109,383.	1,662,175.	0.	15,759.

Form 990 (2018) ORGANIZATIONS Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All othe	er organizations must con	nplete column (A).	
	Check if Schedule O contains a respons	se or note to any line in t			X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	150 206	100 004	26 270	0 110
	trustees, and key employees	158,396.	120,004.	36,279.	2,113
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	798,713.	600,354.	187,808.	10,551
7	Other salaries and wages	130,113.	000,354.	101,000.	10,331
8	Pension plan accruals and contributions (include	35,876.	27,148.	8,243.	485
_	section 401(k) and 403(b) employer contributions)	57,916.	47,282.	9,790.	844
9	Other employee benefits	69,955.	52,192.	16,875.	888
0	Payroll taxes	09,955.	32,192.	10,073.	000
1	Fees for services (non-employees):				
а	Management	23,600.	23,600.		
b	Legal	97,179.	77,215.	18,630.	1,334
C	Accounting	31,113.	11,213.	10,030.	1,334
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	346,338.	328,853.	17,485.	
	column (A) amount, list line 11g expenses on Sch O.)	9,467.	8,511.	956.	
2	Advertising and promotion	20,954.	11,436.	9,382.	136
3	Office expenses	93,250.	59,367.	32,582.	1,301
4	Information technology	93,430.	39,307.	32,302.	1,301
15	Royalties	105,662.	79,851.	24,379.	1,432
6	Occupancy	21,392.	17,342.	3,709.	341
7	Iravel	21,392.	17,342.	3,109.	241
8	Payments of travel or entertainment expenses				
^	for any federal, state, or local public officials Conferences, conventions, and meetings	120,652.	113,045.	7,607.	
9		120,032.	113,043.	7,007.	
20	Interest				
!1 !2	Payments to affiliates	27,158.	20,522.	6,275.	361
2 3		6,880.	20,222•	6,880.	501
ა 4	Other expenses. Itemize expenses not covered	0,000.		0,000.	
7	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	EQUIPMENT RENTAL & MAIN	37,018.	35,135.	1,604.	279
b	DUES AND SUBSCRIPTIONS	28,761.	22,418.	6,343.	_,
c	MISCELLANEOUS	136.	136.	-,	
d					
e	All other expenses				
5	Total functional expenses. Add lines 1 through 24e	2,059,303.	1,644,411.	394,827.	20,065
<u>.5</u> 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** (2018)

Form 990 (2018)
Part X Balance Sheet

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	40,260.	1	137,220
2			2	
3		85,000.	3	105,000
4		129,990.	4	121,792
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6				
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
ω	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	Notes and loans receivable, net		7	
8 \$			8	
9	Prepaid expenses and deferred charges	19,828.	9	18,539
	a Land buildings and equipment: cost or other	, ,		. ,
'	basis. Complete Part VI of Schedule D 10a 201, 494.			
1 1	b Less: accumulated depreciation 10a 201,494. 10a 201,494. 10b 169,200.	55,217.	10c	32,294
11		,	11	•
12			12	
13			13	
14	. •		14	
15	Other assets. See Part IV, line 11	7,327.	15	8,602
16	Total assets. Add lines 1 through 15 (must equal line 34)	337,622.	16	423,447
17		67,173.	17	99,957
18			18	-
19	Deferred revenue	301,238.	19	304,199
20	Tax-exempt bond liabilities		20	-
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
, 22	,			
<u> </u>	key employees, highest compensated employees, and disqualified persons.			
	Complete Part II of Schedule L		22	
ے 23 ا			23	
24			24	
25				
	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schedule D		25	
26		368,411.	26	404,156
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
ဖွ	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	-80,789.	27	-10,709 30,000
28		50,000.	28	30,000
29	Permanently restricted net assets		29	
5	Organizations that do not follow SFAS 117 (ASC 958), check here			
5	and complete lines 30 through 34.			
2 30	Capital stock or trust principal, or current funds		30	
31			31	
27 28 29 30 31 32 33 33 33 33 33 33 33 33 33 33 33 33			32	
ž 33		-30,789.	33	19,291
34		337,622.	34	423,447

Form **990** (2018)

Form	1 990 (2018) ORGANIZATIONS	52-	1749231	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	2,10	9,3	<u>83.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,05		
3	Revenue less expenses. Subtract line 2 from line 1	3		0,0	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	-3	0,7	<u>89.</u>
5	Net unrealized gains (losses) on investments	5			
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 in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
_	column (B))	10	1:	9,2	<u>91.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain 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	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	<u> </u>	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis 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 tay year, explain in Sche				

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Act and OMB Circular A-133?

Form **990** (2018)

За

X

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

MARYLAND ASSOCATION OF NON-PROFIT

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

ORGANIZATIONS 52-1749231 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	600,076.	315,304.	339,966.	473,715.	431,449.	2160510.
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	600,076.	315,304.	339,966.	473,715.	431,449.	2160510.
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)						635,546.
	Public support. Subtract line 5 from line 4.						1524964.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	600,076.	315,304.	339,966.	473,715.	431,449.	2160510.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	7,427.	18,220.	15,823.	11,300.	15,759.	68,529.
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.)					101,278.	101,278.
11	Total support. Add lines 7 through 10						2330317.
12	Gross receipts from related activities,	•				12	
13	First five years. If the Form 990 is for	•			•	. , ,	
804	organization, check this box and stop						>
	etion C. Computation of Publi					I	6F 44
	Public support percentage for 2018 (li					14	65.44 % 62.85 %
15	Public support percentage from 2017					15	
168	33 1/3% support test - 2018. If the c						, 37
L	stop here. The organization qualifies		~			or more, shook thi	
L	33 1/3% support test - 2017. If the c						
17~	and stop here. The organization qual 10% -facts-and-circumstances test						
17 a	and if the organization meets the "fac	-					
	meets the "facts-and-circumstances"		•	•	•	•	
h	10% -facts-and-circumstances test						
L.	more, and if the organization meets the	_					
	organization meets the "facts-and-circ		•		• •		,
18	Private foundation. If the organization			•	,		
.0	Titale louridation. If the organizatio	and Hot Officer a	SOA OIT III TO TO, TO	., 100, 17a, 01 17b	, or look trills box at	ia see iristructions	·

Schedule A (Form 990 or 990-EZ) 2018

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

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

Se	ction A. Public Support	, , , , , , , , , , , , , , , , , , , ,					
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ı	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.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						<u> </u>
14	First five years. If the Form 990 is for	•		*	•	. , . , .	
<u>C-</u>	check this box and stop here					<u></u>	>
	ction C. Computation of Publi					T I	
	Public support percentage for 2018 (I					15	<u>%</u>
16	Public support percentage from 2017					16	%
	ction D. Computation of Inves			40		14-1	
	Investment income percentage for 20					17	%
	Investment income percentage from					18	<u>%</u>
19	a 33 1/3% support tests - 2018. If the						. .
ı	more than 33 1/3%, check this box ar 33 1/3% support tests - 2017. If the						
	line 18 is not more than 33 1/3%, che	ck this box and st	t op here. The orga	nization qualifies a	as a publicly suppo	orted organization	
20	Private foundation If the organization	n did not chock a	hay on line 14 10	or 10h chock th	nic how and coo inc	etructions	ightharpoonup

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")? |f "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).
- 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		
	3a		
	3b		
	0-		
	3c		
	4a		
	ıu		
	4b		
	4c		
	5a		
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	5b		
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	9a		
	OF		
	9b		
	9с		
	10a		
	10b		
n a	an or ac	ハーヒブト	2010

Pa	T IV Supporting Organizations (continued)			
	, and the second		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		
С	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	_		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
	, , , , , , , , , , , , , , , , , , ,			
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions) The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see insti	ructions)		
2	Activities Test. Answer (a) and (b) below.	uctions)	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		100	140
	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 "Ves " describe in Part VI the role played by the organization in this regard	3b		

Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Organ	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970 (explain in F	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	omplete Se	ections 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		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
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	lly integrate	ed Type III supporting orga	enization (see

Schedule A (Form 990 or 990-EZ) 2018

instructions).

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations _(continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	3	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which th	e organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
<u>a</u>	From 2013			
b	From 2014			
с	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2018 distributable amount			
<u>i_</u>	Carryover from 2013 not applied (see instructions)			
<u>j_</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
<u>a</u>	Applied to underdistributions of prior years			
<u>b</u>	Applied to 2018 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2014			
b	Excess from 2015			
c	Excess from 2016			
d	Excess from 2017			
е	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

MARYLAND ASSOCATION OF NON-PROFIT

Schedule A	(Form 990 or 990-EZ) 2018 ORGANIZATIONS	52-1749231 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17 Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, 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; P Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 2, 5, and 6. Also complete this part for any additional part of the section D, lines 2, 5, and 6. A	les 1 and 2; Part IV, Section C, lart V, Section B, line 1e; Part V,
	(See instructions.)	

Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2018

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
Total Excess Contributions to Schedule A. Part II. Line 5		

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2018

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

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

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

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

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

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

	Continue FO1/a)/// /F) and (C) annumber	iana. Camalata Bast III				
	Section 501(c)(4), (5), or (6) organization MARYI,AN	D ASSOCATION OF	NON-PROFTT	Fmp	loyer identification r	number
	ORGANIZ		NON INOITI		52-174923	
Pa		anization is exempt und	ler section 501(c)	or is a section 527 or		
		<u> </u>	(7)		<u></u>	
1	Provide a description of the organiz	ation's direct and indirect politic	cal campaign activities i	n Part IV.		
	Political campaign activity expendit			> 9	8	
	Volunteer hours for political campai					
	1					
Pa	art I-B Complete if the org	anization is exempt und	ler section 501(c)(3).		
1	Enter the amount of any excise tax	incurred by the organization un	der section 4955	▶ 9	š	0.
	Enter the amount of any excise tax					0.
3	If the organization incurred a sectio	n 4955 tax, did it file Form 4720) for this year?		Yes	No
4a	Was a correction made?				Yes	No
<u>k</u>	If "Yes," describe in Part IV.					
Pa	art I-C Complete if the org	anization is exempt und	ler section 501(c),	except section 501(c	;)(3).	
1	Enter the amount directly expended	by the filing organization for se	ection 527 exempt funct	ion activities > \$	}	
2	Enter the amount of the filing organ		J			
	exempt function activities				›	
3	Total exempt function expenditures					
	line 17b			> \$	·	
	Did the filing organization file Form					No
5	Enter the names, addresses and en	• •	•	•		nc
	made payments. For each organiza contributions received that were pro-	•			•	
	political action committee (PAC). If			·	e segregated fund or	а
	. ,				(2) Amount of 2	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of po	
				funds. If none, enter -0	promptly and dir	rectly
					delivered to a sep	
					political organiza	
					+ '	
					i	

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

	C (Form 990 or 990-EZ) 2018					749231 Page 2
Part II		anization is exer	npt under section	501(c)(3) and file	ed Form 5768 (ele	ction under
	section 501(h)).					
A Check	if the filing organiza	tion belongs to an affi	liated group (and list in	Part IV each affiliated	group member's name	, address, EIN,
	expenses, and shar	e of excess lobbying	expenditures).			
B Check	if the filing organiza	tion checked box A ar	nd "limited control" pro	visions apply.		
		ts on Lobbying Expe ditures" means amou	nditures ints paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Tot	al lobbying expenditures to influ	uence public opinion (grass roots lobbying)		2,571.	
	al lobbying expenditures to influ				12,421.	
c Tot	al lobbying expenditures (add li	nes 1a and 1b)	, , , , , , , , , , , , , , , , , , , ,		14,992.	
	ner exempt purpose expenditure				2,044,311.	
e Tot	al exempt purpose expenditure				2,059,303.	
f_Lob	obying nontaxable amount. Ente	er the amount from the	e following table in both	columns.	252,965.	
If th	ne amount on line 1e, column (a) o	r (b) is: The lob	bying nontaxable amo	ount is:		
No	t over \$500,000	20% of	the amount on line 1e.			
Ov	er \$500,000 but not over \$1,000	0,000 \$100,00	00 plus 15% of the exce	ess over \$500,000.		
Ov	er \$1,000,000 but not over \$1,5	00,000 \$175,00	00 plus 10% of the exce	ess over \$1,000,000.		
Ov	er \$1,500,000 but not over \$17,	000,000 \$225,00	00 plus 5% of the exces	ss over \$1,500,000.		
Ov	er \$17,000,000	\$1,000,	000.			
g Gra	assroots nontaxable amount (en	ter 25% of line 1f)			63,241.	
h Sul	otract line 1g from line 1a. If zer	o or less, enter -0			0.	
i Sul	otract line 1f from line 1c. If zero	o or less, enter -0			0.	
j Iftl	nere is an amount other than ze	ro on either line 1h or	line 1i, did the organiza	tion file Form 4720	_	
rep	orting section 4911 tax for this	year?				Yes No
	(Some organizations th	nat made a section 5	eraging Period Under 01(h) election do not h ate instructions for lin	nave to complete all c	of the five columns be	low.
		Lobbying Expe	nditures During 4-Yea	r Averaging Period		
(or	Calendar year fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total

	Lobbying Expen	ditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount	266,295.	253,672.	251,887.	252,965.	1,024,819.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,537,229.
c Total lobbying expenditures	27,433.	21,723.	25,869.	14,992.	90,017.
d Grassroots nontaxable amount	66,574.	63,418.	62,972.	63,241.	256,205.
e Grassroots ceiling amount (150% of line 2d, column (e))					384,308.
f Grassroots lobbying expenditures	2,464.	1,879.	3,273.	2,571.	10,187.

Schedule C (Form 990 or 990-EZ) 2018

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

		1		(k	٠,
4 6	lobbying activity.	Yes	No	Amo	ount
I L	During the year, did the filing organization attempt to influence foreign, national, state, or				
lo	ocal legislation, including any attempt to influence public opinion on a legislative matter				
c	or referendum, through the use of:				
a ∨	/olunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c N	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f G	Grants to other organizations for lobbying purposes?				
_	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h F	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	f "Yes," enter the amount of any tax incurred under section 4912				
c If	f "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	f the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section	, FO1/a\/F\	0r 000	tion	
d II		1 50 1 (0)(5)	, or sec	LION	
d If					
d If	501(c)(6).			Yes	N
d II	501(c)(6).		1	Yes	N
d f Part	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members?			Yes	No
d	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	e prior year? 1 501(c)(5)	2 3 , or sec	tion	
d if	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section	e prior year? n 501(c)(5) No," OR (, or sec b) Part	tion	
1 V 2 C 3 C Part	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes."	e prior year? n 501(c)(5) No," OR (, or sec b) Part	tion	
d	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members	e prior year? n 501(c)(5) No," OR (, or sec b) Part	tion	
d	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	e prior year? n 501(c)(5) No," OR (g , or sec b) Part	tion	
d	Mere substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	e prior year? n 501(c)(5) No," OR (or sec b) Part	tion	
d III art 1 V 2 E 3 E art b C c T	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year	prior year? n 501(c)(5) No," OR (2 3, or sec b) Part	tion	
1 V 2 C 3 C 2 S e a C b C c T	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	e prior year? n 501(c)(5) No," OR (2 3 , or sec b) Part	tion	No e 3, is
1 V22 C33 C2art 1 C C T C C T C C T C C T C C T C C T C C T C C T C C T C C C T C C C T C	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues In notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	e prior year? n 501(c)(5) No," OR (2 3 , or sec b) Part	tion	
11 V 22 E 33 E 24 E 4 H 6	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues for notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expensions.	e prior year? n 501(c)(5) No," OR (2 3 , or sec b) Part	tion	
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1 V 2 C 3 C 2 S 6 C C T 3 A 4 H C C 6 T 7 art 7 rovides	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues f notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polescependiture next year? Taxable amount of lobbying and political expenditures (see instructions)	e prior year? n 501(c)(5) No," OR (2 3, or sec b) Part 1 2a 2b 2c 3	tion III-A, line	

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

MARYLAND ASSOCATION OF NON-PROFIT ORGANIZATIONS

Employer identification number 52-1749231

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II	Par	t I Organizations Maintaining Donor Advised	l Funds or Other Similar Funds	or Accounts. Complete if the
1 Total number at end of year 2 Aggregate value of contributions to (auring year) 3 Aggregate value of grants from (during year) 4 Aggregate value of grants from (during year) 5 Did the organization inform all chorns and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermisable private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of open space 2 Complete lines 2a through 2 dif the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements included in (e) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of states where property subject to conservation easements is located by a visit of the National Register Number of states where property subject to conservation easements in located by and such accordance and the normal properties of the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year by and section 170ph)(4(B)(B)) 1 Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization share that describes the eigenization		organization answered "Yes" on Form 990, Part IV, line	6.	
2 Aggregate value of contributions to (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all orders and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). 1 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of pans pace 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 2 Total number of conservation easements 3 Total arceage restricted by conservation easements 4 Number of conservation easements in cluded in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 5 Number of conservation easements in confided, transferred, released, extinguished, or terminated by the organization during the tax year? 4 Number of states where property subject to conservation easement is located Positions, and enforcing conservation easements during the year Position of states where property subject to conservation easement is located Positions, and enforcing conservation easements during the year Position of subject to purposition of the conservation easements in the requirements of section 170(h)(4)(B)(f) and section 170(h)(4)(B)(f)) 9 In Part XII, describe how the organization reports conservation easements in its revenue and expenses statement, and balance sheet, and include, if applicab			(a) Donor advised funds	(b) Funds and other accounts
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 advisor during the tree organization is property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of natural habitat Protection of natural habitat Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 3 Total number of conservation easements 4 Total acreage restricted by conservation easements 5 Number of conservation easements on a certified historic structure included in (a) 8 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 9 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 1 Number of states where property subject to conservation easement is located 2 So Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year 2 Amount of expenses incurred of the conservation easements in holds? 3 Amount of expenses incurred of the conservation easements in its revenue and expenses statement, and balance sheet, and include, if applicable, the text of the footnote to the organization easements in this revenue and expenses statement, and balance shee	1	Total number at end of year		
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5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization is property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of perservation easements held by the organization contribution in the form of a conservation easement on the last day of the tax year. 2 Complete lines 2 at through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 3 Total number of conservation easements 5 Total acreage restricted by conservation easements 6 Total acreage restricted by conservation easements 7 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure is lasted in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 9 Number of states where property subject to conservation easement is located > 10 Staff and volunteer house devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year organization seasement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(B)	3	Aggregate value of grants from (during year)		
are the organization's property, subject to the organization's exclusive legal control?	4	Aggregate value at end of year		
6 Did the organization inform all grantlees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferning impermissible private benefit? Personation Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. I held at the End of the Tax Yea Total number of conservation easements Conservation easements are called in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year P Number of states where property subject to conservation easement is located P Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year P Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year P No Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year P No Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year P No Amount of expenses incurred in monitoring, inspecting, handling of v	5	·	_	
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Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education)	6	Did the organization inform all grantees, donors, and donor ad	lvisors in writing that grant funds can be	used only
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Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Itel did at the End of the Tax Yea Total number of conservation easements Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcement of the conservation easements in holds? A mount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year No sea such conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, ine 8. If if the organization elected, as permitted under SFAS 116 (ASC 958				Part IV, line 7.
Protection of natural habitat	1			
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(ii) Assets included in Form 990, Part X		-		*
TE THE OPERATION FORMANDED IN DOLD MORKS OF ART. DISTORING TRADELINGS OF APPAR CHARLES FOR THE ARABIS AND APPARISON.	2			
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide	2	-		ai gairi, provide
the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	_		-	• •
a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X \$ \bullet\$ \$				

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

Schedule D (Form 990) 2018

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Par	rt III Organizations Maintain	ing Collections of A	rt, Histo	orical Tre	asures, o	r Other S	Similar <i>F</i>	Assets	(continue	ed)
3	Using the organization's acquisition, a	ccession, and other recor	ds, check	any of the f	ollowing that	t are a sign	ificant use	of its coll	ection ite	ems
	(check all that apply):									
а	Public exhibition		d 🔲	Loan or exc	hange progra	ams				
b	Scholarly research		е 🔲	Other						
С	Preservation for future generation	ons								
4	Provide a description of the organization	on's collections and expla	ain how th	ey further th	ne organizatio	on's exemp	t purpose	in Part XI	II.	
5	During the year, did the organization s	olicit or receive donations	of art, his	torical treas	sures, or othe	er similar a	ssets			
	to be sold to raise funds rather than to	be maintained as part of	the organ	ization's co	llection?				Yes	No
Par	rt IV Escrow and Custodial A	Arrangements. Comp	olete if the	organizatio	n answered '	"Yes" on F	orm 990, F	Part IV, lin	e 9, or	
	reported an amount on Form 99									
1a	Is the organization an agent, trustee, o	custodian or other interme	diary for c	ontributions	s or other ass	sets not inc	cluded			
	on Form 990, Part X?								Yes	No
b	If "Yes," explain the arrangement in Pa									
	•	·	_					Α	Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amour						?		Yes	No
	If "Yes," explain the arrangement in Pa	·				•				
	rt V Endowment Funds. Com									
		(a) Current year		rior year	(c) Two yea		d) Three yea	rs back (e) Four ve	ears back
1a	Beginning of year balance		\	•		,	,	,	,	
b										
С	Net investment earnings, gains, and lo									
d	Grants or scholarships									
е	011 (()									
	and programs									
f										
а	End of year balance									
2	Provide the estimated percentage of the	•	ce (line 1a	. column (a)) held as:					
а			%	,, (,	,,					
b		%								
С										
	The percentages on lines 2a, 2b, and 2									
За	Are there endowment funds not in the		zation that	are held ar	nd administer	red for the	organizatio	on		
	by:	3					3		Y	es No
	(i) unrelated organizations								3a(i)	
									3a(ii)	
b									3b	
4	Describe in Part XIII the intended uses									
Par	rt VI Land, Buildings, and Eq									
	Complete if the organization an	nswered "Yes" on Form 99	00, Part IV	, line 11a. S	ee Form 990	, Part X, lir	ne 10.			
	Description of property	(a) Cost or			or other		umulated	(6	d) Book v	/alue
		basis (inves		. ,	(other)	` ,	eciation	'	,	
	Land									
b										
c				2	0,003.		20,003	3.		0.
d					6,986.		51,828		5 .	158.
	Other				4,505.		97,369			136.
	al. Add lines 1a through 1e. (Column (d)	*	t X colum					>		294.

Schedule D (Form 990) 2018

Daut VIII Increasion and a	Otto and On an orbition		
chedule D (Form 990) 2018	ORGANIZATIONS		
	MAKILAND ASSOCATION	OF	NON-PROFII

	Complete if the organization answered "Vec" of	n Earm aan Dart IV lin	11h Soo Earm 000 Dart V I	
(a) Descrip	Complete if the organization answered "Yes" on the of security or category (including name of security)	(b) Book value	-	n: Cost or end-of-year market value
		(2) = 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	(-,	······································
	al derivatives -held equity interests			
Other	Tiola against interests			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	b) must equal Form 990, Part X, col. (B) line 12.)			
	Investments - Program Related.			
	Complete if the organization answered "Yes" o	n Form 990. Part IV. lin	e 11c. See Form 990. Part X. I	ine 13.
	(a) Description of investment	(b) Book value		n: Cost or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)			1	
(7) (8) (9)				
(8) (9) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
(8) (9)	b) must equal Form 990, Part X, col. (B) line 13.) Other Assets.			
(8) (9) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Other Assets. Complete if the organization answered "Yes" o	n Form 990, Part IV, lin	e 11d. See Form 990, Part X, I	line 15.
(8) (9) tal. (Col. (Other Assets. Complete if the organization answered "Yes" or	n Form 990, Part IV, lin Description	e 11d. See Form 990, Part X, I	line 15. (b) Book value
(8) (9) tal. (Col. (Other Assets. Complete if the organization answered "Yes" or		e 11d. See Form 990, Part X, I	
(8) (9) tal. (Col. (Other Assets. Complete if the organization answered "Yes" or		e 11d. See Form 990, Part X, I	
(8) (9) tal. (Col.	Other Assets. Complete if the organization answered "Yes" or		e 11d. See Form 990, Part X, I	
(8) (9) tal. (Col. (Part IX)	Other Assets. Complete if the organization answered "Yes" or		e 11d. See Form 990, Part X, I	
(8) (9) tal. (Col.	Other Assets. Complete if the organization answered "Yes" or		e 11d. See Form 990, Part X, I	
(8) (9) tal. (Col. (Part IX) (1) (2) (3) (4) (5) (6)	Other Assets. Complete if the organization answered "Yes" or		e 11d. See Form 990, Part X, I	1
(8) (9) tal. (Col. (Part IX) (1) (2) (3) (4) (5)	Other Assets. Complete if the organization answered "Yes" or		e 11d. See Form 990, Part X, I	
(8) (9) tal. (Col. (Part IX) (1) (2) (3) (4) (5) (6)	Other Assets. Complete if the organization answered "Yes" or		e 11d. See Form 990, Part X, I	
(8) (9) tal. (Col. (Part IX) (1) (2) (3) (4) (5) (6) (7)	Other Assets. Complete if the organization answered "Yes" or		e 11d. See Form 990, Part X, I	1
(8) (9) tal. (Col. (Part IX) (1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered "Yes" of (a) E (a) E (b) must equal Form 990, Part X, col. (B) line Other Liabilities.	Description 15.)		(b) Book value
(8) (9) tal. (Col. (Part IX) (1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered "Yes" of (a) E Imm (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" of	Description 15.)	e 11e or 11f. See Form 990, P	(b) Book value
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(8) (9) tal. (Col. (Part IX) (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Columnation X) (1) Feed (2) (3) (4)	Other Assets. Complete if the organization answered "Yes" of (a) Example 1. (a) Example 2. (a) Example 2. (a) Example 2. (a) Example 2. (a) Example 3. (a) Description of liability	Description 15.)	e 11e or 11f. See Form 990, P	(b) Book value
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Schedule D (Form 990) 2018

52-1749231 Page 4

Pai	t XI Reconciliation of Revenue per Audited Financial S	Statements With Revenue	per Keturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV	/, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	2,109,383.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	2,109,383.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b			0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)		2,109,383.
Pa	T XII Reconciliation of Expenses per Audited Financial		es per Return	l .
	Complete if the organization answered "Yes" on Form 990, Part IV			
1	Total expenses and losses per audited financial statements		1	2,059,303.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
а	Donated services and use of facilities	I I		
b	Prior year adjustments	2b		
С	Other losses			
d	Other (Describe in Part XIII.)	2d		0
_	Add lines 2a through 2d			2,059,303.
3	Subtract line 2e from line 1		3	2,059,505.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.4-1		
a	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.) Add lines 4a and 4b		4c	0.
C	Add lines 4a and 4b		1 0	
5	Total expenses Add lines 3 and 4c. (This must equal Form 000, Port I line			2.059.303.
5 Pa	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lirt XIII Supplemental Information.			2,059,303.
Pa	t XIII Supplemental Information.	ne 18.)	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information.	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	
Pa l Prov	t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	ne 18.) nd 4; Part IV, lines 1b and 2b; Pa	5	

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

2018

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Questions Regarding Compensation

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

MARYLAND ASSOCATION OF NON-PROFIT

ORGANIZATIONS

 $Employer\ identification\ number \\ 52-1749231$

			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		_X_
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2018

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred on prior Form 990
(1) HEATHER ILIFF	(i)	134,088.	0.	0.	3,900.	20,408.	158,396.	0.
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
-	(i)							
	(ii)							
	(i)							
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	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							1 1/5 200) 2010

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE 0

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.

Open to Public Inspection

OMB No. 1545-0047

Employer identification number

52-1749231

Name of the organization

AND EQUITY.

MARYLAND ASSOCATION OF NON-PROFIT ORGANIZATIONS

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

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

STANDARDS FOR EXCELLENCE

MARYLAND NONPROFITS' STANDARDS FOR EXCELLENCE PROGRAM OFFERS 3 TIERS OF

ACCREDITATION AND RECOGNITION - BASICS, BASICS ENHANCED AND FULL

ACCREDITATION - TO ENABLE ORGANIZATIONS TO WORK AT THEIR OWN PACE ON

ADOPTING BEST PRACTICES. STANDARDS FULL ACCREDITATION IS PROVEN BY

INDEPENDENT ACADEMIC RESEARCH TO HELP ORGANIZATIONS INCREASE FINANCIAL

SUPPORT FROM THE PUBLIC. IN 2018, 208 ORGANIZATIONS WERE ACCREDITED OR

RECOGNIZED BY THE STANDARDS FOR EXCELLENCE INSTITUTE, 13 ORGANIZATIONS

ACROSS THE COUNTRY WERE LICENSED TO REPLICATE THE STANDARDS FOR

EXCELLENCE PROGRAM IN THEIR COMMUNITIES, AND 163 CONSULTANTS WERE

LICENSED TO SUPPORT ORGANIZATIONS IN ACHIEVING THE BENCHMARKS OF THE

STANDARDS FOR EXCELLENCE CODE.

ADVOCACY

IN 2018, MARYLAND NONPROFITS WORKED TO SUCCESSFULLY PASS A BILL THAT

ENSURES NONPROFITS RECEIVE REIMBURSEMENT FOR INDIRECT COSTS OF AT LEAST

10% IN STATE CONTRACTS. BY WORKING TOGETHER WITH OTHER ADVOCATES, WE

EXPANDED MARYLAND'S EARNED INCOME TAX CREDIT, IMPROVED SUBSIDIZED

CHILDCARE, AND INCREASED FUNDING IN MENTAL HEALTH, DISABILITIES, ARTS,

AGING, CHILD WELFARE AND OTHER IMPORTANT AREAS.

EXPENSES \$ 264,678. INCLUDING GRANTS OF \$ 0. REVENUE \$ 336,091.

FORM 990, PART VI, SECTION A, LINE 6:

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

Schedule O (Form 990 or 990-EZ) (2018)

832211 10-10-18

Schedule O (Form 990 or 990-EZ) (2018) Page 2 Name of the organization MARYLAND ASSOCATION OF NON-PROFIT **Employer identification number** ORGANIZATIONS 52-1749231 MEMBERS ARE NONPROFIT ORGANIZATIONS WHO WISH TO BENEFIT FROM COLLABORATION WITH OTHER ORGANIZATIONS, REDUCED RATES ON TRAINING AND TECHNICAL ASSISTANCE, GROUP BUYING PROGRAMS AND OTHER SERVICES, AND ACCESS TECHNICAL ASSISTANCE PUBLICATIONS AVAILABLE ONLY TO MEMBERS. FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT. IT WAS THEN REVIEWED BY THE BOARD OF DIRECTORS BEFORE FILING WITH THE IRS. THE ENTIRE BOARD RECEIVED A COPY OF THE 990 PRIOR TO FILING. FORM 990, PART VI, SECTION B, LINE 12C: THE SAME CONFLICT OF INTEREST POLICY AND STATEMENT ARE USED FOR BOARD MEMBERS AND STAFF AT MARYLAND NONPROFITS. BOARD MEMBERS: THE CONFLICT OF INTEREST POLICY AND STATEMENTS ARE DISTRIBUTED TO ALL BOARD MEMBERS IN JANUARY AND COLLECTED FROM ALL BOARD MEMBERS BY FEBRUARY.

STAFF MEMBERS: EACH STAFF MEMBER RECEIVES A COPY OF THE CONFLICT OF INTEREST POLICY AND STATEMENT DURING THEIR INITIAL ORIENTATION. THE POLICY IS ALSO PROVIDED IN MARYLAND NONPROFITS EMPLOYEE HANDBOOK. EACH YEAR, AT THE START OF THE FISCAL YEAR, ALL EMPLOYEES ARE GIVEN ANOTHER COPY OF THE CONFLICT OF INTEREST POLICY TO COMPLETE. THE HR/FINANCE OFFICER RETAINS COMPLETED FORMS IN A SPECIAL CONFLICT OF INTEREST FILE.

WHERE AN ACTUAL OR POTENTIAL CONFLICT EXISTS BETWEEN THE INTERESTS OF MARYLAND NONPROFITS AND AN INTERESTED PARTY WITH RESPECT TO A SPECIFIC PROPOSED ACTION OR TRANSACTION, MARYLAND NONPROFITS REFRAINS FROM THE

Employer identification number 52-1749231

PROPOSED ACTION OR TRANSACTION UNTIL SUCH TIME AS THE PROPOSED ACTION OR

TRANSACTION HAS BEEN APPROVED BY THE DISINTERESTED MEMBERS OF THE BOARD OF

DIRECTORS OF MARYLAND NONPROFITS. THE FOLLOWING PROCEDURES APPLY:

AN INTERESTED PARTY WHO HAS AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST
WITH RESPECT TO A PROPOSED ACTION OR TRANSACTION OF THE CORPORATION DOES

NOT PARTICIPATE IN ANY WAY, NOR IS PRESENT, IN THE DELIBERATIONS AND

DECISION MAKING OF MARYLAND NONPROFITS WITH RESPECT TO SUCH ACTION OR

TRANSACTION. THE INTERESTED PARTY MAY, UPON REQUEST, BE AVAILABLE TO ANSWER

QUESTIONS OR PROVIDE MATERIAL FACTUAL INFORMATION ABOUT THE PROPOSED ACTION
OR TRANSACTION.

THE DISINTERESTED MEMBERS OF THE BOARD OF DIRECTORS MAY APPROVE THE

PROPOSED ACTION OR TRANSACTION UPON FINDING THAT IT IS IN THE BEST

INTERESTS OF THE CORPORATION. THE BOARD CONSIDERS WHETHER THE TERMS OF THE

PROPOSED TRANSACTION ARE FAIR AND REASONABLE TO MARYLAND NONPROFITS AND

WHETHER IT WOULD BE POSSIBLE, WITH REASONABLE EFFORT, TO FIND A MORE

ADVANTAGEOUS ARRANGEMENT WITH AN ENTITY THAT IS NOT AN INTERESTED PARTY.

APPROVAL BY THE DISINTERESTED MEMBERS OF THE BOARD OF DIRECTORS IS BY VOTE

OF A MAJORITY OF DIRECTORS IN ATTENDANCE AT A MEETING AT WHICH A QUORUM IS

PRESENT. AN INTERESTED PARTY IS NOT COUNTED FOR PURPOSES OF DETERMINING

WHETHER A QUORUM IS PRESENT, NOR FOR PURPOSES OF DETERMINING WHAT

CONSTITUTES A MAJORITY VOTE OF DIRECTORS IN ATTENDANCE.

THE MINUTES OF THE MEETING REFLECT THAT THE CONFLICT DISCLOSURE WAS MADE,

THE VOTE TAKEN AND, WHERE APPLICABLE, THE ABSTENTION FROM VOTING AND

PARTICIPATION BY THE INTERESTED PARTY.

Name of the organization MARYLAND ASSOCATION OF ORGANIZATIONS	NON-PROFIT	Employer identification number 52-1749231
FORM 990, PART VI, SECTION B, LINE 1	5A:	
UPON HIRE, THE CEO ENTERED INTO A CO	NTRACT WITH THE BOARD	OF DIRECTORS.
AFTER THE EXPIRATION OF THE INITIAL	CONTRACT, CEO COMPENSA	TION IS REVIEWED
ANNUALLY BY THE BOARD OF DIRECTORS.	GOALS AND OBJECTIVES O	F PERFORMANCE ARE
ESTABLISHED BY THE CEO AND BOARD OF	DIRECTORS DURING THE R	EVIEW IN ORDER TO
DETERMINE COMPENSATION. COMPARABLE D	ATA IS USED AND THE DE	CISION IS
DOCUMENTED.		
FORM 990, PART VI, SECTION C, LINE 1	9:	
THE ORGANIZATION MAKES ITS GOVERNING	DOCUMENTS, CONFLICT O	F INTEREST POLICY
AND FINANCIAL STATEMENTS AVAILABLE T	O THE PUBLIC ON OUR WE	BSITE AND UPON
REQUEST.		
FORM 990, PART IX, LINE 11G, OTHER F	EES:	
BANK FEES:		
PROGRAM SERVICE EXPENSES		404.
MANAGEMENT AND GENERAL EXPENSES		15,178.
FUNDRAISING EXPENSES		0.
TOTAL EXPENSES		15,582.
OTHER PROFESSIONAL FEES:		
PROGRAM SERVICE EXPENSES		44,870.
MANAGEMENT AND GENERAL EXPENSES		436.
FUNDRAISING EXPENSES		0.
TOTAL EXPENSES		45,306.
CONSULTING:		
PROGRAM SERVICE EXPENSES		283,579.
832212 10-10-18	Sched	dule O (Form 990 or 990-EZ) (2018)