

Part 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:
THE FOUNDATION SUPPORTS PROGRAMS THAT ENHANCE INDIVIDUAL AND COMMUNITY POTENTIAL. THE FOUNDATION IS PRIMARILY COMMITTED TO PROGRAMS THAT BENEFIT RESIDENTS OF BALTIMORE CITY.

2

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

☐ Yes ☒ No

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

3

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

☐ Yes ☒ No

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

4

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

4a

(Code:) (Expenses \$ 1,917,119 including grants of \$ 1,910,283) (Revenue \$)
PROVIDE GRANTS TO SUPPORT EFFORTS TO INCREASE OPPORTUNITIES FOR THOSE WITH THE LEAST WEALTH.

4b

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

4c

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

4d

Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses 1,917,119

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 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions.	2	No
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	No
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	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
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	No
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	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	No
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?	11f Yes	
12a If "Yes," complete Schedule D, Part XI. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
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. See instructions.	17	No
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	No
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	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
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 Yes	

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	No
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 Yes	
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	No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	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	No
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	No
26 Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons?	26	No
27 If "Yes," complete Schedule L, Part I. Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	No
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	No
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	No
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	No
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions?	30	No
31 If "Yes," complete Schedule M. Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	No
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	No
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?	33	No
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 Yes	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	No
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	No
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	No
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38 Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	4
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c Yes	

Part V			Statements Regarding Other IRS Filings and Tax Compliance (continued)		
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			2a	0	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			2b		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		No
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O			3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? Enter the name of the foreign country: _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			4a		No
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .			5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No
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).					
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			7a		No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d If "Yes," indicate the number of Forms 8282 filed during the year			7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		
9 Sponsoring organizations maintaining donor advised funds.					
a Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10 Section 501(c)(7) organizations. Enter:					
a Initiation fees and capital contributions included on Part VIII, line 12			10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			10b		
11 Section 501(c)(12) organizations. Enter:					
a Gross income from members or shareholders			11a		
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.			13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			13b		
c Enter the amount of reserves on hand			13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?			15		No
16 If the organization is a trust, did it file Form 720, Schedule N, to report the section 4968 excise tax on net investment income?			16		No
17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.			17		

Part VI

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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 ☒

Section 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.	1a11		
b	Enter the number of voting members included in line 1a, above, who are independent	1b10		
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	Yes	
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
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	Yes	
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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		No
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		No

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

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

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records:

MARILYN LOUX 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 (410) 727-4828

Part VII

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

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

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

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

- List all of the organization’s **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization’s **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization’s five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization’s **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization’s **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) HOWARD MILLER PRESIDENT AND PUBLIC DIRECTOR	0.15 0.00	X		X				0	0	0
(2) BETSY KRIEGER VICE PRESIDENT AND DONOR DIRECTOR	0.15 0.00	X		X				0	0	0
(3) JEAN K KAHN VICE PRESIDENT AND DONOR DIRECTOR	0.15 0.00	X		X				0	0	0
(4) MARC B TERRILL SECRETARY AND PUBLIC DIRECTOR	0.15 40.00	X		X				0	737,697	36,854
(5) MARC KAHN TREASURER AND DONOR DIRECTOR	0.15 0.00	X		X				0	0	0
(6) DAVID KANDEL DONOR DIRECTOR	0.15 0.00	X						0	0	0
(7) HOWARD K COHEN DONOR DIRECTOR	0.15 0.00	X						0	0	0
(8) JUDGE STUART R BERGER PUBLIC DIRECTOR	0.15 0.00	X						0	0	0
(9) BENJAMIN GREENWALD PUBLIC DIRECTOR	0.15 0.00	X						0	0	0
(10) RABBI STEVEN SCHWARTZ PUBLIC DIRECTOR	0.15 0.00	X						0	0	0
(11) BARBARA HIMMELRICH PUBLIC DIRECTOR	0.15 0.00	X						0	0	0
(12) BROOKE HISLE EXECUTIVE DIRECTOR	40.00 0.00			X				0	150,519	2,228

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants, and Other			1a Federated campaigns		1a		
			b Membership dues		1b		
			c Fundraising events		1c		
			d Related organizations		1d		
			e Government grants (contributions)		1e		
			f All other contributions, gifts, grants, and similar amounts not included above		1f		
			g Noncash contributions included in lines 1a - 1f:\$		1g		
			h Total. Add lines 1a-1f				
Program Service Revenue	2a	Business Code					
	b						
	c						
	d						
	e						
	f All other program service revenue.						
9 Total. Add lines 2a-2f.							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		488,577			488,577	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
		(i) Real	(ii) Personal				
	6a						
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
		(i) Securities	(ii) Other				
	7a	1,812,251					
	b Less: cost or other basis and sales expenses	7b	0				
	c Gain or (loss)	7c	1,812,251				
	d Net gain or (loss)			1,812,251			1,812,251
	8a	(not including \$ of contributions reported on line 1c). See Part IV, line 18					
	8a						
	b Less: direct expenses			8b			
	c Net income or (loss) from fundraising events						
	9a	Gross income from gaming activities. See Part IV, line 19					
	9a						
	b Less: direct expenses			9b			
	c Net income or (loss) from gaming activities						
	10a	Gross sales of inventory, less returns and allowances					
	10a						
b Less: cost of goods sold			10b				
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue		Business Code					
11a	ADMIN FEE REVENUE	541900	80,000			80,000	
b							
c							
d	All other revenue						
e Total. Add lines 11a-11d			80,000				
12 Total revenue. See instructions			2,380,828	0	0	2,380,828	

Part IX

Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,910,283	1,910,283		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	165,119		165,119	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	97,846		97,846	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	6,124		6,124	
9 Other employee benefits	22,811		22,811	
10 Payroll taxes	19,900		19,900	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	18,252		18,252	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	341,849		341,849	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	17,290		17,290	
12 Advertising and promotion				
13 Office expenses	2,356		2,356	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	180		180	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	6,987	6,836	151	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered 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 O.)				
a SUBSCRIPTIONS & DUES	8,630		8,630	
b				
c				
d				
e All other expenses	397		397	
25 Total functional expenses. Add lines 1 through 24e	2,618,024	1,917,119	700,905	0
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).				

Part X

Balance Sheet

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

☐

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			1	
	2	Savings and temporary cash investments		66,773	2	108,857
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation	10b		10c	
	11	Investments—publicly traded securities		14,238,345	11	10,727,114
	12	Investments—other securities. See Part IV, line 11		22,406,132	12	17,555,775
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
16	Total assets. Add lines 1 through 15 (must equal line 33)		36,711,250	16	28,391,746	
Liabilities	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		0	26	0
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.					
	27	Net assets without donor restrictions		36,711,250	27	28,391,746
	28	Net assets with donor restrictions			28	
	Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		36,711,250	32	28,391,746
	33	Total liabilities and net assets/fund balances		36,711,250	33	28,391,746

Part XI

Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,380,828
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,618,024
3	Revenue less expenses. Subtract line 2 from line 1	3	-237,196
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	36,711,250
5	Net unrealized gains (losses) on investments	5	-8,082,308
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 32, column (A))	10	28,391,746

Part XII

Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: ☒ Cash ☐ Accrual ☐ Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		No
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?	Yes	
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:		
☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis		
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	Yes	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
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.		

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

Name of the organization ZANVYL AND ISABELLE KRIEGER FUND INC	Employer identification number 52-1126684
--	--

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9

☐

An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10

☐

An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11

☐

An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12

☒

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a

☒

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f

Enter the number of supported organizations

1
- g

Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A) THE ASSOCIATED JEWISH COMMUNITY FEDERATION OF BALTIMORE INC	520607957	10	Yes		459,903	0
Total	1				459,903	0

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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 Total. Add lines 1 through 3						
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) . . .						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4. . .						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on . . .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f))	14	
15 Public support percentage for 2020 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☐		
b 33 1/3% support test—2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☐		
17a 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐		
b 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐		

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

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b. .						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6. . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . .						
13 Total support. (Add lines 9, 10c, 11, and 12.) .						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2021 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2021 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization ☐		
b 33 1/3% support tests—2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization ☐		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐		

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b	A family member of a person described on 11a above?		No
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part VI		No

Section B. Type I Supporting Organizations

		Yes	No
1	Did the officers, 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.		
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.		

Section 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).		

Section 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?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
a	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)			
2	Activities Test. Answer lines 2a and 2b below.			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b	Did the activities described on line 2a, above constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No", provide details in Part VI.			
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.			

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

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

Section A - Adjusted Net Income

(A) Prior Year

(B) Current Year
(optional)

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

Section B - Minimum Asset Amount

(A) Prior Year

(B) Current Year
(optional)

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

Section C - Distributable Amount

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-functionally-integrated Type III supporting organization (see instructions)

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations			(continued)
Section D - Distributions		Current Year	
1 Amounts paid to supported organizations to accomplish exempt purposes	1		
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2		
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3		
4 Amounts paid to acquire exempt-use assets	4		
5 Qualified set-aside amounts (<i>prior IRS approval required - provide details in Part VI</i>)	5		
6 Other distributions (<i>describe in Part VI</i>). See instructions	6		
7 Total annual distributions. Add lines 1 through 6.	7		
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions	8		
9 Distributable amount for 2021 from Section C, line 6	9		
10 Line 8 amount divided by Line 9 amount	10		

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required-- <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2021:			
a From 2016.			
b From 2017.			
c From 2018.			
d From 2019.			
e From 2020.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017.			
b Excess from 2018.			
c Excess from 2019.			
d Excess from 2020.			
e Excess from 2021.			

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

Facts And Circumstances Test

Return Reference	Explanation
PART IV, SECTION A, LINE 6-	GRANTS TO ORGANIZATIONS, OTHER THAN THE SUPPORTED ORGANIZATION, ARE MADE AT THE DISCRETION OF THE BOARD OF DIRECTORS OF THE SUPPORTING ORGANIZATION AND ARE MADE IN THE FURTHERANCE OF THE MISSION OF THE SUPPORTED ORGANIZATION TO SUPPORT JEWISH, CULTURAL, EDUCATIONAL AND SOCIAL JUSTICE WORK.
PART IV, SECTION B, LINE 2-	THE SUPPORTED ORGANIZATION WORKS TO PRESERVE AND ENHANCE JEWISH LIFE. IT ADDRESSES CHARITABLE, EDUCATIONAL, RELIGIOUS, HUMANITARIAN, HEALTH, CULTURAL AND SOCIAL SERVICE NEEDS OF THE JEWISH COMMUNITY LOCALLY, NATIONALLY, IN ISRAEL AND THROUGHOUT THE WORLD. IN FURTHERANCE OF THAT MISSION, THE SUPPORTED ORGANIZATION ENCOURAGES FAMILIES TO ESTABLISH SUPPORTING ORGANIZATIONS IN PARTNERSHIP WITH IT, IN ORDER TO ENGAGE INTERESTED DONORS AND SUCCEEDING GENERATIONS IN PHILANTHROPIC PURSUITS AND ENHANCE BOTH THE JEWISH AND GENERAL COMMUNITIES IN KEEPING WITH THE JEWISH TRADITION OF REPAIRING THE WORLD. ALL GRANTS ARE MADE TO TAX-EXEMPT CHARITABLE ORGANIZATIONS REGISTERED WITH THE INTERNAL REVENUE SERVICE.

Additional Data

[Return to Form](#)

Software ID:

Software Version:

Name of the organization
ZANVYL AND ISABELLE KRIEGER FUND INC

Employer identification number
52-1126684

Part I

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes ☐ No

Part II

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

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

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

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

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

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

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

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

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

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

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:
a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
b Assets included in Form 990, Part X ▶ \$ _____

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

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .

☐ Yes

☐ No

Part IV Escrow and Custodial Arrangements.

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .

☐ Yes

☐ No

b

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

☐

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2

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

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

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

3a

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

(i) Unrelated organizations

(ii) Related organizations

b

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

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

4

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				0

Schedule D (Form 990) 2021

Part VII

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____ (A) INVESTMENT - JEWISH COMMUNITY INVESTMENT FUNDS	17,555,775	F
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	17,555,775	

Part VIII

Investments - Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX

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

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

Part X

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☒	

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	

Part XIII

Supplemental Information

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

Return Reference	Explanation
PART X, LINE 2:	THE ORGANIZATION FOLLOWS THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE CONSOLIDATED FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, THE ORGANIZATION MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFITS RECOGNIZED IN THE CONSOLIDATED FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS. MANAGEMENT HAS EVALUATED THE ORGANIZATION'S TAX POSITIONS AND HAS CONCLUDED THAT THE ORGANIZATION HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE DISCLOSURE. GENERALLY, THE ORGANIZATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE OR LOCAL AUTHORITIES FOR YEARS BEFORE 2019.

Additional Data

[Return to Form](#)

Software ID:

Software Version:

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
ZANVYL AND ISABELLE KRIEGER FUND INC

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Employer identification number
52-1126684

Part I General Information on Grants and Assistance							
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.							
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) THE ASSOCIATED JEWISH COMMUNITY FEDERATION OF BALTIMORE 101 W MT ROYAL AVENUE BALTIMORE, MD 21201	52-0607957	501(C)(3)	459,903	0	N/A	N/A	OPERATING SUPPORT
(2) SINAI KRIEGER EYE INSTITUTE 2411 W BELVEDERE AVENUE BALTIMORE, MD 21215	52-0486540	501(C)(3)	150,000	0	N/A	N/A	OPERATING SUPPORT
(3) UNITED WORKERS ASSOCIATION PO BOX 41547 BALTIMORE, MD 21203	20-4345458	501(C)(3)	50,000	0	N/A	N/A	OPERATING SUPPORT
(4) FUSION PARTNERSHIPS INC 1601 GUILFORD AVE 2 SOUTH BALTIMORE, MD 21202	52-2148413	501(C)(3)	47,500	0	N/A	N/A	OPERATING SUPPORT
(5) MARYLAND PESTICIDE EDUCATION NETWORK INC 544 EPPING FOREST RD ANNAPOLIS, MD 21401	46-3713793	501(C)(3)	37,500	0	N/A	N/A	OPERATING SUPPORT
(6) PUBLIC JUSTICE CENTER 201 N CHARLES ST 1200 BALTIMORE, MD 21201	52-1412226	501(C)(3)	36,500	0	N/A	N/A	OPERATING SUPPORT
(7) UNITED WAY OF CENTRAL MARYLAND PO BOX 64282 BALTIMORE, MD 21264	52-0591543	501(C)(3)	30,450	0	N/A	N/A	OPERATING SUPPORT
(8) ENVIRONMENTAL INTEGRITY PROJECT 1000 VERMONT AVENUE NW 11TH FL WASHINGTON, DC 20005	20-1326922	501(C)(3)	30,000	0	N/A	N/A	OPERATING SUPPORT
(9) MARIAN HOUSE 949 GORSUCH AVENUE BALTIMORE, MD 21218	52-1243849	501(C)(3)	30,000	0	N/A	N/A	OPERATING SUPPORT
(10) CENTER FOR POPULAR DEMOCRACY INC 449 TROUTMAN STREET BROOKLYN, NY 11237	45-3813436	501(C)(3)	30,000	0	N/A	N/A	OPERATING SUPPORT
(11) SINAI HOSPITAL OF BALTIMORE 2401 W BELVEDERE AVENUE BALTIMORE, MD 21215	52-0486540	501(C)(3)	25,250	0	N/A	N/A	OPERATING SUPPORT
(12) CASA DE MARYLAND INC 8151 15TH AVE HYATTSVILLE, MD 20783	52-1372972	501(C)(3)	25,000	0	N/A	N/A	OPERATING SUPPORT
(13) COMMUNITY LAW CENTER 3355 KESWICK ROAD 200 BALTIMORE, MD 21211	52-1320934	501(C)(3)	25,000	0	N/A	N/A	OPERATING SUPPORT
(14) FUND FOR EDUCATIONAL EXCELLENCE 800 N CHARLES STREET 400 BALTIMORE, MD 21201	52-1129402	501(C)(3)	25,000	0	N/A	N/A	OPERATING SUPPORT
(15) HISTORIC EAST BALTIMORE COMMUNITY ACTION COALITION 1212 NORTH WOLFE STREET BALTIMORE, MD 21213	52-1903732	501(C)(3)	25,000	0	N/A	N/A	OPERATING SUPPORT
(16) HOMELESS PERSONS REPRESENTATION PROJECT INC 201 N CHARLES STREET 1104 BALTIMORE, MD 21201	52-1697260	501(C)(3)	25,000	0	N/A	N/A	OPERATING SUPPORT
(17) JEWS UNITED FOR JUSTICE PO BOX 41485 WASHINGTON, DC 20018	52-2346578	501(C)(3)	25,000	0	N/A	N/A	OPERATING SUPPORT
(18) MARYLAND CONSUMER RIGHTS COALITION INC 2209 MARYLAND AVENUE BALTIMORE, MD 21218	52-2266235	501(C)(3)	25,000	0	N/A	N/A	OPERATING SUPPORT
(19) PRO BONO RESOURCE CENTER OF MARYLAND INC 520 W FAYETTE STREET BALTIMORE, MD 21201	52-1664796	501(C)(3)	25,000	0	N/A	N/A	OPERATING SUPPORT
(20) ROBERTA'S HOUSE 928 E NORTH AVE BALTIMORE, MD 21202	26-0517415	501(C)(3)	25,000	0	N/A	N/A	OPERATING SUPPORT
(21) ASYLEE WOMEN ENTERPRISE 4500 FRANKFORD AVE BALTIMORE, MD 21206	45-3769025	501(C)(3)	25,000	0	N/A	N/A	OPERATING SUPPORT
(22) MARYLAND CENTER ON ECONOMIC POLICY 1800 N CHARLES STREET 406 BALTIMORE, MD 21201	90-0999151	501(C)(3)	25,000	0	N/A	N/A	OPERATING SUPPORT
(23) NAMI METRO BALTIMORE 2601 N HOWARD STREET 130 BALTIMORE, MD 21218	52-1301154	501(C)(3)	25,000	0	N/A	N/A	OPERATING SUPPORT
(24) CIVIL JUSTICE INC 520 W FAYETTE ST NO 410 BALTIMORE, MD 21201	52-2102516	501(C)(3)	22,500	0	N/A	N/A	OPERATING SUPPORT
(25) HOUSE OF RUTH MD 2201 ARGONNE DRIVE BALTIMORE, MD 21218	52-1100236	501(C)(3)	20,000	0	N/A	N/A	OPERATING SUPPORT
(26) OUT FOR JUSTICE INC PO BOX 33468 BALTIMORE, MD 21218	45-2482209	501(C)(3)	20,000	0	N/A	N/A	OPERATING SUPPORT
(27) TAHIRIH JUSTICE CENTER 6400 ARLINGTON BLVD STE 400 FALLS CHURCH, VA 22042	54-1858176	501(C)(3)	20,000	0	N/A	N/A	OPERATING SUPPORT
(28) CATHEDRAL CHURCH OF THE INCARNATION 4 E UNIVERSITY PKWY BALTIMORE, MD 21218	52-0607978	501(C)(3)	20,000	0	N/A	N/A	OPERATING SUPPORT
(29) SOUTH BALTIMORE COMMUNITY LAND TRUST INC 1123 MONROE CIRCLE BALTIMORE, MD 21225	27-3253917	501(C)(3)	20,000	0	N/A	N/A	OPERATING SUPPORT
(30) BALT PO BOX 19994 BALTIMORE, MD 21211	87-4412551	501(C)(3)	20,000	0	N/A	N/A	OPERATING SUPPORT
(31) UNIVERSITY OF MARYLAND BALTIMORE FOUNDATION 220 N ARCH ST 13TH FLOOR BALTIMORE, MD 21201	31-1678679	501(C)(3)	19,500	0	N/A	N/A	OPERATING SUPPORT
(32) JOB OPPORTUNITIES TASK FORCE INC 201 N CHARLES STREET 2404 BALTIMORE, MD 21201	52-2278450	501(C)(3)	17,950	0	N/A	N/A	OPERATING SUPPORT
(33) BALTIMORE GREEN SPACE 1212 N WOLFE STREET BALTIMORE, MD 21213	26-0530374	501(C)(3)	17,500	0	N/A	N/A	OPERATING SUPPORT
(34) NATIONAL COUNCIL ON ALCOHOLISM & DRUG DEPENDENCE-MD CHAPTER 28 E OSTEND STREET 3RD FLOOR BALTIMORE, MD 21230	52-1591416	501(C)(3)	17,500	0	N/A	N/A	OPERATING SUPPORT
(35) PRO BONO COUNSELING PROJECT 5900 METRO DRIVE BALTIMORE, MD 21215	52-1784604	501(C)(3)	15,450	0	N/A	N/A	OPERATING SUPPORT
(36) ACLU FOUNDATION OF MARYLAND 3600 CLIPPER MILL ROAD BALTIMORE, MD 21211	23-7209538	501(C)(3)	15,000	0	N/A	N/A	OPERATING SUPPORT
(37) BALTIMORE OUTREACH SERVICES INC 701 S CHARLES STREET BALTIMORE, MD 21230	56-2291915	501(C)(3)	15,000	0	N/A	N/A	OPERATING SUPPORT
(38) GOUCHER COLLEGE 1021 DULANEY VALLEY ROAD BALTIMORE, MD 21204	52-0591613	501(C)(3)	15,000	0	N/A	N/A	OPERATING SUPPORT
(39) HEALTH CARE FOR THE HOMELESS INC 421 FALLSWAY BALTIMORE, MD 21202	52-1576404	501(C)(3)	15,000	0	N/A	N/A	OPERATING SUPPORT
(40) MARYLAND CITIZENS HEALTH INITIATIVE EDUCATION FUND INC 2600 ST PAUL STREET BALTIMORE, MD 21218	52-2173223	501(C)(3)	15,000	0	N/A	N/A	OPERATING SUPPORT
(41) MARYLAND NEW DIRECTIONS INC 2700 N CHARLES STREET 200 BALTIMORE, MD 21218	52-1021365	501(C)(3)	15,000	0	N/A	N/A	OPERATING SUPPORT
(42) ON OUR OWN OF MARYLAND INC 7310 ESQUIRE COURT ELKRIDGE, MD 21075	52-1812414	501(C)(3)	15,000	0	N/A	N/A	OPERATING SUPPORT
(43) COMMON CAUSE EDUCATION FUND 805 15TH ST NW 8TH FL WASHINGTON, DC 20005	31-1705370	501(C)(3)	15,000	0	N/A	N/A	OPERATING SUPPORT
(44) COMMUNITY DEVELOPMENT NETWORK OF MARYLAND INC 408 E 31ST STREET BALTIMORE, MD 21218	46-4190485	501(C)(3)	15,000	0	N/A	N/A	OPERATING SUPPORT
(45) KIDS IN NEED OF DEFENSE 1201 L STREET NW FLOOR 2 WASHINGTON, DC 20001	26-2763038	501(C)(3)	15,000	0	N/A	N/A	OPERATING SUPPORT
(46) CASH CAMPAIGN OF MARYLAND 575 SOUTH CHARLES STREET 500 BALTIMORE, MD 21201	81-4607977	501(C)(3)	15,000	0	N/A	N/A	OPERATING SUPPORT
(47) DRINK AT THE WELL 4710 PENNINGTON AVENUE BALTIMORE, MD 21226	90-0975599	501(C)(3)	15,000	0	N/A	N/A	OPERATING SUPPORT
(48) CAPITAL AREA IMMIGRANTS RIGHTS COALITION 1612 K ST NW STE 204 WASHINGTON, DC 20006	52-2141497	501(C)(3)	15,000	0	N/A	N/A	OPERATING SUPPORT
(49) SOUTHEAST COMMUNITY DEVELOPMENT 3323 EASTER AVENUE SUITE 200 BALTIMORE, MD 21224	52-1034466	501(C)(3)	15,000	0	N/A	N/A	OPERATING SUPPORT
(50) FOOD & WATER WATCH 1616 P STREET NW 400 WASHINGTON, DC 20036	32-0160439	501(C)(3)	15,000	0	N/A	N/A	OPERATING SUPPORT
(51) FAMILY SURVIVOR NETWORK 1706 LAURENS ST BALTIMORE, MD 21217	82-5324129	501(C)(3)	14,000	0	N/A	N/A	OPERATING SUPPORT
(52) MENTAL HEALTH ASSOCIATION OF MD INC HEAVER PLAZA - 1301 YORK RD LUTHERVILLE, MD 21093	52-0591666	501(C)(3)	12,500	0	N/A	N/A	OPERATING SUPPORT
(53) FOOD RESEARCH & ACTION CENTER INC 1200 18TH STREET NW 400 WASHINGTON, DC 20036	23-7200739	501(C)(3)	12,500	0	N/A	N/A	OPERATING SUPPORT
(54) IMMIGRATION OUTREACH SERVICE CENTER INC 5401 LOCH RAVEN BLVD BALTIMORE, MD 21239	90-0138987	501(C)(3)	12,500	0	N/A	N/A	OPERATING SUPPORT
(55) BEHAVIORAL HEALTH SYSTEM BALTIMORE 100 S CHARLES STREET 8TH FLOOR BALTIMORE, MD 21201	52-1519025	501(C)(3)	10,000	0	N/A	N/A	OPERATING SUPPORT
(56) CENTER FOR URBAN FAMILIES INC 2201 N MONROE STREET BALTIMORE, MD 21217	52-2142708	501(C)(3)	10,000	0	N/A	N/A	OPERATING SUPPORT
(57) CHESAPEAKE CLIMATE ACTION NETWORK INC PO BOX 11138 TAKOMA PARK, MD 20912	11-3644283	501(C)(3)	10,000	0	N/A	N/A	OPERATING SUPPORT
(58) DISABILITY RIGHTS MARYLAND 1500 UNION AVE 2000 BALTIMORE, MD 21211	51-0215570	501(C)(3)	10,000	0	N/A	N/A	OPERATING SUPPORT
(59) MARYLAND VOLUNTEER LAWYERS SERVICE 201 NORTH CHARLES STREET 1400 BALTIMORE, MD 21201	52-1225979	501(C)(3)	10,000	0	N/A	N/A	OPERATING SUPPORT
(60) BLUE WATER BALTIMORE 2631 SISSON ST BALTIMORE, MD 21211	52-1420138	501(C)(3)	10,000	0	N/A	N/A	OPERATING SUPPORT
(61) BALTIMORE TREE TRUST INC 2631 SISSON STREET BALTIMORE, MD 21211	26-4031411	501(C)(3)	10,000	0	N/A	N/A	OPERATING SUPPORT
(62) WATERKEEPERS CHESAPEAKE INC PO BOX 11075 TAKOMA PARK, MD 20913	45-4381850	501(C)(3)	10,000	0	N/A	N/A	OPERATING SUPPORT
(63) PHILANTHROPIC VENTURES FOUNDATION 1222 PRESERVATION PARK WAY OAKLAND, CA 94612	94-3136771	501(C)(3)	10,000	0	N/A	N/A	OPERATING SUPPORT
(64) WOMBWORK PRODUCTIONS INC 3724 KIMBLE RD BALTIMORE, MD 21218	52-2276025	501(C)(3)	10,000	0	N/A	N/A	OPERATING SUPPORT
(65) WELLNESS EDUCATION AND ADVOCACY RESEARCH GROUP INC 5900 YORK RD STE 202 BALTIMORE, MD 21212	85-2593417	501(C)(3)	10,000	0	N/A	N/A	OPERATING SUPPORT
(66) MARYLAND PHILANTHROPY NETWORK 1600 W 41ST STREET 700 BALTIMORE, MD 21211	52-1326863	501(C)(3)	8,480	0	N/A	N/A	OPERATING SUPPORT
(67) BALTIMORE CIVIC FUND INC 7 E REDWOOD STREET BALTIMORE, MD 21202	52-1212473	501(C)(3)	7,500	0	N/A	N/A	OPERATING SUPPORT
(68) GREENLIGHT FUND 50 MILK STREET 16TH FLOOR BOSTON, MA 02109	20-0407083	501(C)(3)	7,500	0	N/A	N/A	OPERATING SUPPORT
(69) WORLD RELIEF CORP OF NATIONAL ASSOCIATION OF EVANGELICALS 7 E BALTIMORE ST BALTIMORE, MD 21202	23-6393344	501(C)(3)	7,500	0	N/A	N/A	OPERATING SUPPORT
(70) PROJECT OWN INC 33 N MURLEY STREET BALTIMORE, MD 21224	83-4468502	501(C)(3)	7,500	0	N/A	N/A	OPERATING SUPPORT

2

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

70

3

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

0

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	GRANT REQUESTS ARE REVIEWED TO ENSURE THAT THEY ARE PERMISSIBLE AND IN ACCORDANCE WITH APPLICABLE LAWS AND REGULATIONS. THE FOUNDATION WILL REQUEST AND RECEIVE PERIODIC REPORTS AND UPDATES FROM THE GRANTEEES REGARDING HOW GRANTS ARE UTILIZED, AND TAKE SUCH INFORMATION INTO ACCOUNT IN CONSIDERING FUTURE GRANT AWARDS.

Additional Data

Return to Form

Software ID:
Software Version:

Name of the organization
ZANVYL AND ISABELLE KRIEGER FUND INC

Employer identification number
52-1126684

Part I Questions Regarding Compensation

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

Part II	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.
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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 are not 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.

[illegible]

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.

Return Reference	Explanation
PART I, LINE 4B-	MARC TERRILL PARTICIPATES IN A NONQUALIFIED DEFERRED COMPENSATION PLAN. THERE WERE NO AMOUNTS VESTED OR RECEIVED FROM THE PLAN DURING THE TAX YEAR. \$150,000 WAS DEFERRED IN A PRIOR YEAR. A 5-YEAR CONTRACT WAS EXECUTED BEGINNING JANUARY 1, 2017. THE TERMS AND CONDITIONS OF THE DEFERRED COMPENSATION PLAN ARE OUTLINED IN THE CONTRACT.
PART II, COLUMN A-	THE DIRECTORS OF THE ZANVYL AND ISABELLE KRIEGER FUND INC. RECEIVE NO COMPENSATION FOR THEIR SERVICES, HOWEVER, ONE OF THE DIRECTORS IS EMPLOYED BY THE SUPPORTED ENTITY, THE ASSOCIATED: JEWISH COMMUNITY FEDERATION OF BALTIMORE, INC. (THE ASSOCIATED). ALL OF THE COMPENSATION AND BENEFITS ARE PAID BY THE ASSOCIATED, NONE OF IT IS ATTRIBUTABLE TO THE SERVICE AS A DIRECTOR AND/OR OFFICER OF THE FOUNDATION. THE ZANVYL & ISABELLE KRIEGER FUND, INC. HAS TWO FULL-TIME EMPLOYEES. ALL COMPENSATION IS PROCESSED BY THE SUPPORTED ENTITY, THE ASSOCIATED. THE COMPENSATION COST INCLUDING RELATED TAXES AND BENEFITS ARE REIMBURSED BY THE ZANVYL & ISABELLE KRIEGER FUND, INC. TO THE ASSOCIATED.

Additional Data

Return to Form

Software ID:

Software Version:

Name of the organization

ZANVYL AND ISABELLE KRIEGER FUND INC

Employer identification number

52-1126684

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	THERE ARE FAMILY RELATIONSHIPS AMONG THE DONOR MEMBERS AND DIRECTORS. MARC KAHN, JEAN K. KAHN, BETSY KRIEGER AND DAVID KANDEL HAVE A FAMILY RELATIONSHIPS.
FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS TWO CLASSES OF MEMBERS, A PUBLIC MEMBER - THE ASSOCIATED: JEWISH COMMUNITY FEDERATION OF BALTIMORE, INC. AND DONOR MEMBERS CONSISTING OF MARC KAHN, JEAN K. KAHN, BETSY KRIEGER, DAVID KANDEL AND HOWARD K. COHEN.
FORM 990, PART VI, SECTION A, LINE 7A	THE MEMBERS APPOINT THE BOARD OF DIRECTORS. THE PUBLIC MEMBER APPOINTS THE MAJORITY AND DONOR MEMBERS APPOINT THE REMAINDER.
FORM 990, PART VI, SECTION A, LINE 7B	AMENDMENTS TO THE BYLAWS ARE SUBJECT TO CHANGE OR RECISSION BY THE MEMBERS BEFORE THEY ARE ADOPTED.
FORM 990, PART VI, SECTION A, LINE 8B	THERE IS NO COMMITTEE WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 AND SUPPORTING SCHEDULES ARE DISTRIBUTED TO THE OFFICERS AND DIRECTORS UPON COMPLETION FOR REVIEW AND COMMENTS PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12	THE SUPPORTED ORGANIZATION MONITORS AND ENFORCES THE POTENTIAL OF ANY CONFLICT OF INTEREST BY REGULARLY REVIEWING THE BOARD OF DIRECTORS, ITS ACTIONS AND THE INVESTMENT OF ASSETS TO ENSURE IT COMPLIES WITH THE CONFLICT OF INTEREST POLICY OF THE ASSOCIATED.
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

Additional Data

[Return to Form](#)

Software ID:

Software Version:

Part I

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

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

Part II

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
						YesNo
(1)THE ASSOCIATED JEWISH COMMUNITY FEDERATION OF BALTIMORE INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-0607957	EXEMPT ORGANIZATION	MD	501(C)(3)	LINE 7	N/A	No
(2)ASSOCIATED JEWISH CHARITIES OF BALTIMORE INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-6024192	EXEMPT ORGANIZATION	MD	501(C)(3)	LINE 7	THE ASSOCIATED JCFCB	No
(3)FLORENCE & CHARLES HOFFBERGER FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-1801455	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(4)JILL FOX MEMORIAL FUND INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-1167942	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(5)DUPKIN JEWISH CHARITY & WELFARE FUND INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-1163411	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(6)GOLDSMITH FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-1306094	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(7)MARTIN S HIMELES SR FUND INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-1489357	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(8)FELDMAN FAMILY FUND INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-1489355	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(9)MARVIN SCHAPIRO FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-1615020	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(10)KOLKER-SAXON-HALLOCK FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-1636273	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(11)JEWISH DAY SCHOOL FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-1879606	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(12)BRENDA BROWN LIPITZ REVER FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 31-1555883	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(13)JOAN G AND JOSEPH KLEIN FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 31-1555845	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(14)BAVAR FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-2230085	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(15)JOSEPH & ANNETTE COOPER FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-2206655	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(16)FRANCES & FRANK FLEISHMAN FAMILY CHARITABLE FDN INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-2205658	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(17)HERBERT & PHYLLIS SIEGEL CHARITABLE FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 26-1943873	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(18)JANE KRIEGER SCHAPIRO FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 46-1468312	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(19)MACADOO FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 46-3952974	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(20)LUSKIN FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 46-5753796	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(21)WOLASKY FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 82-0956858	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(22)STEVEN AND LINDA HURWITZ FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 81-3750702	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(23)HOFFBERGER FAMILY FUND INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-1167596	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(24)HARRY WEINBERG FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-1541188	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(25)SWIRNOW CHARITABLE FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-1680035	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(26)GERSON G & SANDY F EISENBERG FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-1726080	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(27)PEARLSTONE FAMILY FUND INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-1249913	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(28)WILLIAM & IRENE WEINBERG FAMILY FOUNDTION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-1857755	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(29)NATHAN & LILLIAN WEINBERG FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-1867912	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(30)THE RICHMAN FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-1899221	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(31)KESHER FUND OF THE COHEN-FRUCHTMAN-KRIEGER FMLY INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 31-1478499	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(32)MARJORIE COOK FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-6044319	CHARITABLE ROYAL SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(33)DAVID & REGINA WEINBERG FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 31-1615045	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(34)THE FUND FOR CHANGE INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 31-1662222	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(35)THE BANCROFT FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 31-1644387	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(36)KR FUND INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-2209699	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(37)LINDA & G ARNOLD KAUFMAN FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 52-2204089	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(38)ZIMMERMAN FUND FOR CHILDREN INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 56-2523091	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(39)LYN STACIE GETZ FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 20-3486477	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(40)JUDI & STEVEN B FADER FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 22-3920799	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(41)LIBMAN FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 20-8572565	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(42)NEUBERGER FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 27-1040796	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(43)SHOLK-KAPLAN FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 45-3915659	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No
(44)VOLOSOV FAMILY FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201 47-4050322	CHARITABLE SUPPORT	MD	501(C)(3)	LINE 12A, I	THE ASSOCIATED JCFCB	No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproporionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K- 1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

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

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

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

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

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

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

	Yes	No
1a		No
1b	Yes	
1c		No
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l		No
1m		No
1n		No
1o	Yes	
1p		No
1q		No
1r		No
1s		No

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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

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

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

Return Reference	Explanation
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Schedule R (Form 990) 2021

Additional Data

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Software ID:
Software Version: