

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

2008Open to Public
Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.


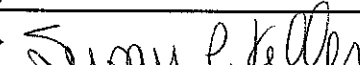
A For the 2008 calendar year, or tax year beginning JUL 1, 2008 and ending JUN 30, 2009

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC.		D Employer identification number 52-1488711
		Doing Business As		E Telephone number 301-695-7660
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 312 EAST CHURCH STREET		G Gross receipts \$ 19,795,853.
		City or town, state or country, and ZIP + 4 FREDERICK, MD 21701		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
F Name and address of principal officer: ELIZABETH DAY SAME AS C ABOVE				
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
J Website: WWW.CFFREDCO.ORG				
K Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶				
L Year of formation: 1986 M State of legal domicile: MD				

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: A CATALYST TO CREATE POSITIVE & LASTING IMPACT, BY BUILDING & FOSTERING RELATIONSHIPS THAT ARE FOR		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	24
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	24
	5	Total number of employees (Part V, line 2a)	5	10
	6	Total number of volunteers (estimate if necessary)	6	0
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 5,974,573.	Current Year 7,190,336.
	9	Program service revenue (Part VIII, line 2g)		
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,116,301.	<1,850,353.>
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		11,144.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,090,874.	5,351,127.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,662,279.	3,733,962.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	433,339.	530,373.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 118,997.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	474,294.	406,861.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,569,912.	4,671,196.
	19	Revenue less expenses. Subtract line 18 from line 12	5,520,962.	679,931.
	Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Year 44,792,276.
21		Total liabilities (Part X, line 26)	5,597,733.	4,807,516.
22		Net assets or fund balances. Subtract line 21 from line 20	39,194,543.	36,937,804.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.				
Sign Here	Signature of officer			Date 2/25/10
	Type or print name and title	ELIZABETH DAY, PRESIDENT		
Paid Preparer's Use Only	Preparer's signature		Date 2/9/2010	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4	ELLIN & TUCKER, CHARTERED 100 S CHARLES ST SUITE 1300 BALTIMORE, MD 21201		Preparer's identifying number (see instructions) EIN ▶ Phone no. ▶ 410-727-5735

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Form 990 (2008)

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Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

THE COMMUNITY FOUNDATION SERVES AS A CATALYST TO CREATE POSITIVE AND LASTING IMPACT, BY BUILDING AND FOSTERING RELATIONSHIPS THAT ARE FOR GOOD, FOREVER, FOR FREDERICK COUNTY.

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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 645,671. including grants of \$ 534,070.) (Revenue \$)

THE COMMUNITY FOUNDATION PROVIDES SCHOLARSHIPS TO INDIVIDUALS PURSUING POST-SECONDARY EDUCATION AT ACCREDITED HIGHER LEARNING INSTITUTIONS. AGES OF SCHOLARS RANGE FROM 17 TO OVER 50 YEARS OF AGE. IN ADDITION TO POST-SECONDARY EDUCATIONAL SCHOLARSHIPS THE COMMUNITY FOUNDATION PROVIDES MUSIC SCHOLARSHIPS TO YOUTH AGES 6 TO 17 FOR CONTINUING EDUCATION IN VOICE AND INSTRUMENTAL INSTRUCTION.

4b (Code:) (Expenses \$ 260,417. including grants of \$ 182,296.) (Revenue \$)

THE COMMUNITY FOUNDATION PROVIDES DISCRETIONARY GRANTS TO QUALIFIED NONPROFITS, GENERALLY IDENTIFIED AS 501(C)(3) ORGANIZATIONS THAT ARE CHARITABLE, EDUCATIONAL, SCIENTIFIC, LITERARY, OR RELIGIOUS IN PURPOSE.

4c (Code:) (Expenses \$ 3,051,076. including grants of \$ 3,017,596.) (Revenue \$)

THE COMMUNITY FOUNDATION PROVIDES RESTRICTED GRANTS TO QUALIFIED NONPROFITS, GENERALLY IDENTIFIED AS 501(C)(3) ORGANIZATIONS THAT ARE CHARITABLE, EDUCATIONAL, SCIENTIFIC, LITERARY OR RELIGIOUS IN PURPOSE.

4d Other program services. (Describe in Schedule O.)

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

4e Total program service expenses \$ 3,957,164. (Must equal Part IX, Line 25, column (B).)

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

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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)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	4	X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	5	
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6 X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 X	
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	11 X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	12	X
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	16	X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18 X	
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20	X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 X	
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i>	24a	X
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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27	X

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Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>		X
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X

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Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	33	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
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	10	
2b	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 this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
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)?		X
4b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	X	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		X
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter: N/A		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter: N/A		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A		

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Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)**Section A. Governing Body and Management**

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Yes	No
1a Enter the number of voting members of the governing body	24	
b Enter the number of voting members that are independent	24	
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?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9a Does the organization have local chapters, branches, or affiliates?		X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11 Is there any officer, director or 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		X

Section B. Policies

	Yes	No
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a The organization's CEO, Executive Director, or top management official?	X	
b Other officers or key employees of the organization?	X	
Describe the process in Schedule O. (see instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☒ Own website ☒ Another's website ☒ Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ►
 GAIL FITZGERALD - 301-695-7660
 312 EAST CHURCH STREET, FREDERICK, MD 21701

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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			
ANDREW CARPEL FIRST VICE CHAIRMAN	2.00	X		X				0.	0.	0.
CATHARINE FAIRLEY TRUSTEE	1.00	X						0.	0.	0.
DENNIS E. BLACK TRUSTEE	1.00	X						0.	0.	0.
DOUGLAS W. SELBY TREASURER	2.00	X		X				0.	0.	0.
GEORGE E. LEWIS, JR. TRUSTEE	1.00	X						0.	0.	0.
HUMBERTO BENITEZ TRUSTEE	1.00	X						0.	0.	0.
JOHN QUINN TRUSTEE	1.00	X						0.	0.	0.
JOHN E. TRITT SECRETARY	2.00	X		X				0.	0.	0.
JOHN R. RATNAVALE TRUSTEE	1.00	X						0.	0.	0.
JOSEPH S. WELTY TRUSTEE	1.00	X						0.	0.	0.
KARLYS KLINE TRUSTEE	1.00	X						0.	0.	0.
KATHLEEN A. COSTLOW CHAIRMAN OF THE BOARD	2.00	X		X				0.	0.	0.
KATHLEEN M. DAVIS SECOND VICE CHAIRMAN	2.00	X		X				0.	0.	0.
MARY ELIZABETH BOWIE TRUSTEE	1.00	X						0.	0.	0.
META NASH TRUSTEE	1.00	X						0.	0.	0.
PATRICIA HURWITZ TRUSTEE	1.00	X						0.	0.	0.
ROBERT C. MOUNT TRUSTEE	1.00	X						0.	0.	0.

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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			
ROBERT E. KALLSTROM PAST CHAIRMAN OF THE BOA	2.00	X		X				0.	0.	0.
SCOTT R GROVE TRUSTEE	1.00	X						0.	0.	0.
ROBERT BROADRUP TRUSTEE	1.00	X						0.	0.	0.
DANIEL LAJEWSKI TRUSTEE	1.00	X						0.	0.	0.
BRENDA MAIN TRUSTEE	1.00	X						0.	0.	0.
JANET MCCURDY TRUSTEE	1.00	X						0.	0.	0.
JOY ONLEY TRUSTEE	1.00	X						0.	0.	0.
ELIZABETH DAY PRESIDENT	60.00			X				93,828.	0.	11,609.
GAIL FITZGERALD CHIEF FINANCIAL OFFICER	60.00			X				69,324.	0.	12,933.
1b Total								163,152.	0.	24,542.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization 0

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
MTB INVESTMENT ADVISORS, 100 EAST PRATT ST, 17TH FLOOR, BALTIMORE, MD 21202	INVESTMENT MANAGER	102,412.

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization 1

Form **990** (2008)

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

Form 990 (2008)

52-1488711 Page **9**

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c	2,570.			
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	7187766.			
	g Noncash contributions included in lines 1a-1f: \$		271,199.			
	h Total. Add lines 1a-1f		7,190,336.			
Program Service Revenue	Business Code					
	2 a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1,341,034.			1341034.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross Rents	(i) Real (ii) Personal				
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b Less: cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)		<3191387.>			<3191387.>
	8 a Gross income from fundraising events (not including \$ 2,570. of contributions reported on line 1c). See Part IV, line 18	a	107,015.			
	b Less: direct expenses	b	95,871.			
	c Net income or (loss) from fundraising events		11,144.			11,144.
	9 a Gross income from gaming activities. See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
	10 a Gross sales of inventory, less returns and allowances	a				
	b Less: cost of goods sold	b				
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11 a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		5,351,127.	0.	0.	<1839209.>	

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02-02-09

Form **990** (2008)

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) but are not required to complete columns (B), (C), and (D).

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 governments and organizations in the U.S. See Part IV, line 21	3,199,892.	3,199,892.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	534,070.	534,070.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	203,953.	38,440.	106,886.	58,627.
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	277,818.	158,916.	78,740.	40,162.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	4,632.	2,273.	1,613.	746.
9 Other employee benefits	11,265.	6,321.	3,375.	1,569.
10 Payroll taxes	32,705.	13,717.	11,608.	7,380.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	7,725.		7,725.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	140,036.		140,036.	
g Other	17,435.		17,435.	
12 Advertising and promotion	8,598.		2,149.	6,449.
13 Office expenses	30,072.	642.	28,266.	1,164.
14 Information technology	10,628.		10,628.	
15 Royalties				
16 Occupancy	53,082.		53,082.	
17 Travel	3,024.		3,024.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	58,404.		58,404.	
23 Insurance	5,021.		5,021.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a EVENTS	24,071.	2,893.	21,178.	
b OTHER	18,840.		18,413.	427.
c ANNUAL REPORT	15,357.		13,821.	1,536.
d NEWSLETTER	9,369.		8,432.	937.
e DUES & SUBSCRIPTIONS	5,199.		5,199.	
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	4,671,196.	3,957,164.	595,035.	118,997.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

Form 990 (2008)

52-1488711 Page **11**

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,091,964.	1	2,651,323.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	180,593.	3	221,044.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	10,057.	9	12,575.
	10a Land, buildings, and equipment: cost basis ... 10a	321,529.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D ... 10b	124,325.		
		249,370.	10c	197,204.
	11 Investments - publicly traded securities	15,488,943.	11	13,472,904.
	12 Investments - other securities. See Part IV, line 11	25,501,235.	12	23,612,242.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	2,270,114.	15	1,578,028.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	44,792,276.	16	41,745,320.	
Liabilities	17 Accounts payable and accrued expenses	63,267.	17	62,607.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D	5,534,466.	25	4,744,909.
	26 Total liabilities. Add lines 17 through 25	5,597,733.	26	4,807,516.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	32,752,027.	27	31,127,653.
	28 Temporarily restricted net assets	4,497,336.	28	3,843,219.
	29 Permanently restricted net assets	1,945,180.	29	1,966,932.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	39,194,543.	33	36,937,804.
	34 Total liabilities and net assets/fund balances	44,792,276.	34	41,745,320.

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X
b Were the organization's financial statements audited by an independent accountant?	2b	X
c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	
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?	3a	X
b If "Yes," did the organization undergo the required audit or audits?	3b	

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Employer identification number
52-1488711

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: (Please check only **one** organization.)

- 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.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).** (Attach Schedule H.)

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 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 the Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).** (see instructions)

11 ☐ 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 that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	

h Provide the following information about the organizations the organization supports.

[illegible]

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

Schedule A (Form 990 or 990-EZ) 2008

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4025992.	7435090.	6094900.	5974573.	7190336.	30720891.
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 - 3	4025992.	7435090.	6094900.	5974573.	7190336.	30720891.
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)						6994122.
6 Public Support. Subtract line 5 from line 4.						23726769.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	4025992.	7435090.	6094900.	5974573.	7190336.	30720891.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	814,975.	796,975.	972,177.	2905128.	1341034.	6830289.
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 IV.)						
11 Total support. Add lines 7 through 10						37551180.
12 Gross receipts from related activities, etc. (see instructions)				12		
13 First five 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	63.19	%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	68.65	%
16a 33 1/3% support test - 2008. 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			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2007. 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			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2008. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2007. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
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			<input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2008

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 - 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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
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) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3% support tests - 2008. 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 - 2007. 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

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that
answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization **THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

Employer identification number
52-1488711

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	152	500
2 Aggregate contributions to (during year)	1,136,251.	5,776,075.
3 Aggregate grants from (during year)	1,338,506.	2,212,177.
4 Aggregate value at end of year	6,341,175.	29,657,545.

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 may be used only
for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? ☒ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a-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 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable
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, violations, and
enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing 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 XIV, 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" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of
the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, 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) Revenues included in 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 SFAS 116 relating to these items:

a Revenues included in 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 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 XIV.

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 Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to 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 XIV and complete the following table:

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to 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	2,347,964.				
b Contributions	37,362.				
c Investment earnings or losses	<205,736.>				
d Grants or scholarships	72,643.				
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	2,106,947.				

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ☐ %
 b Permanent endowment ☒ 93.40 %
 c Term endowment ☒ 6.60 %

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

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

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

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

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		216,333.	63,555.	152,778.
d Equipment		105,196.	60,770.	44,426.
e Other				
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				197,204.

Schedule D (Form 990) 2008

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	5,351,127.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	4,671,196.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	679,931.
4	Net unrealized gains (losses) on investments	4	<2,640,084.>
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	<296,586.>
9	Total adjustments (net). Add lines 4-8	9	<2,936,670.>
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	<2,256,739.>

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	1,496,658.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	<2,640,084.>
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	<875,962.>
e	Add lines 2a through 2d	2e	<3,516,046.>
3	Subtract line 2e from line 1	3	5,012,704.
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 XIV)	4b	338,423.
c	Add lines 4a and 4b	4c	338,423.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	5,351,127.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	3,871,704.
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	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	117,671.
e	Add lines 2a through 2d	2e	117,671.
3	Subtract line 2e from line 1	3	3,754,033.
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 XIV)	4b	917,163.
c	Add lines 4a and 4b	4c	917,163.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	4,671,196.

Part XIV Supplemental Information

Complete this part to 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; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

PART V, LINE 4: THE FOUNDATION HAS A TRUSTEE-APPROVED ENDOWMENT

SPENDING POLICY THAT TARGETS EITHER NET INCOME OR 5% OF ITS ENDOWMENT

FUND'S FAIR MARKET VALUE AS OF DECEMBER 31 OF THE PREVIOUS FISCAL YEAR FOR SCHOLARSHIP FUNDS AND JUNE 30 OF THE PREVIOUS FISCAL YEAR FOR ALL OTHER FUNDS.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

CHANGE IN PRESENT VALUE OF REMAINDER INTERESTS: -888318.

Part XIV Supplemental Information (continued)

INCREASE IN CASH SURRENDER VALUE OF LIFE INSURANCE: 12992.

FAS 136 ADJUSTMENT: 578740.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

INCREASE IN CSV: 12992.

RELATED ORGANIZATION INCOME AND UNREALIZED LOSS: -96508.

CHANGE IN PV OF FUTURE INTEREST: -888317.

FUNDRAISING EVENTS: 95871.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

FASB 136 ADJUSTMENT: 338423.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

RELATED ORGANIZATION EXPENSES: 21800.

FUNDRAISING EVENTS: 95871.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

FASB 136 ADJUSTMENT: 917163.

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2008

Open To Public Inspection

▶ **Attach to Form 990 or Form 990-EZ.** Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Name of the organization THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Employer identification number
52-1488711

Part I	Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
---------------	---

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☐ Mail solicitations
- b ☐ Email solicitations
- c ☐ Phone solicitations
- d ☐ In-person solicitations
- e ☐ Solicitation of non-government grants
- f ☐ Solicitation of government grants
- g ☐ Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes ☒ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total						

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

THE COMMUNITY FOUNDATION OF FREDERICK

Schedule G (Form 990 or 990-EZ) 2008

COUNTY MARYLAND, INC.

52-1488711 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		GOLF TOURNAMENT (event type)	GOLF TOURNAMENT/ (event type)	2 (total number)	(Add col. (a) through col. (c))
Revenue	1 Gross receipts	44,060.	27,835.	37,690.	109,585.
	2 Less: Charitable contributions		300.	2,270.	2,570.
	3 Gross revenue (line 1 minus line 2)	44,060.	27,535.	35,420.	107,015.
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs	30,413.	28,751.	7,580.	66,744.
	7 Other direct expenses	5,921.	19,724.	3,483.	29,128.
	8 Direct expense summary. Add lines 4 through 7 in column (d)				95,872.
	9 Net income summary. Combine lines 3 and 8 in column (d)				11,143.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)				()	
8 Net gaming income summary. Combine lines 1 and 7 in column (d)					

- 9 Enter the state(s) in which the organization operates gaming activities: _____
- a Is the organization licensed to operate gaming activities in each of these states? _____
- b If "No," Explain: _____
- 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? _____
- b If "Yes," Explain: _____
- 11 Does the organization operate gaming activities with nonmembers? _____
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? _____

	Yes	No
9a		
10a		
11		
12		

Schedule G (Form 990 or 990-EZ) 2008

13 Indicate the percentage of gaming activity operated in:

- | | 13a | % |
|-------------------------------------|-----|---|
| a The organization's facility | | |
| b An outside facility | 13b | % |

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records:

Name ►

Address ►

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

15a

- b If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$

- c If "Yes," enter name and address:

Name ►

Address ►

16 Gaming manager information:

Name ►

Gaming manager compensation ► \$

Description of services provided ►

☐ Director/officer ☐ Employee ☐ Independent contractor
17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

17a

- b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the U.S.**

► **Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.**
► **Attach to Form 990.**

Name of the organization **THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

Part I General Information on Grants and Assistance

Employer identification number
52-1488711

Open to Public
Inspection

2008

OMB No. 1545-0047

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 Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. ► ☐

1 (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 non-cash assistance	(h) Purpose of grant or assistance
ACCELERATE BRAIN CANCER CURE, INC. 1717 RHODE ISLAND AVE NW STE 700 WASHINGTON, DC 20036	52-2320756	501(C)(3)	5,000.	0.			GENERAL SUPPORT
ADVENTIST HEALTH CARE, INC. 1801 RESEARCH BLVD #400 ROCKVILLE, MD 20847	52-1532556	501(C)(3)	29,893.	0.			SHADY GROVE HOSPITAL
ADVOCATES FOR HOMELESS FAMILIES, INC. - 216 ABBRECHT PLACE - FREDERICK, MD 21701	52-1591139	501(C)(3)	5,702.	0.			GENERAL SUPPORT
ALL SAINTS EPISCOPAL CHURCH 108 WEST CHURCH STREET FREDERICK, MD 21701	52-0610441	501(C)(3)	11,361.	0.			MAINTENANCE AND RENOVATION; OUTREACH PROGRAM
ARC OF FREDERICK COUNTY, INC. 620-A RESEARCH DRIVE FREDERICK, MD 21701	52-6055211	501(C)(3)	58,740.	0.			DEVELOPMENTALLY ILL SERVICES AND ACTIVITIES
BOYS & GIRLS CLUB OF FREDERICK COUNTY BOYS & GIRLS CLUB OF FREDERICK COUNTY - 413 BURCK STREET -	26-3428555	501(C)(3)	11,200.	0.			SMART GIRLS PROGRAM AND MEMBERSHIP SUPPORT PROGRAM, BASEBALL EQUIPMENT

2 Enter total number of section 501(c)(3) and government organizations **65.**

3 Enter total number of other organizations **6.**

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) 2008

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS	202	534,070.	0.		

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: THE STAFF CHECKS TO ENSURE THAT GRANTEE IS A QUALIFYING ORGANIZATION, AND REQUESTS END OF GRANT PERIOD REPORT WHICH DETAILS THE USE OF THE FUNDS AND OUTCOME MEASURES AND RESULTS. COVER LETTER THAT IS SENT WITH GRANT CHECK STATES THAT GRANTEE SIGNIFIES IT AGREES TO TERMS OF GRANT BY DEPOSITING THE GRANT CHECK.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: FREDERICK COUNTY CHAMBER OF COMMERCE

(H) PURPOSE OF GRANT OR ASSISTANCE: OPERATING EXPENSES FOR THE FREDERICK

SCHEDULE I-1

(Form 990)
Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)
Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization **THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

Employer identification number
52-1488711

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
BRAIN TUMOR SOCIETY 124 WATERMAN STREET SUITE 3H WATERTOWN, MA 02472	04-3068130	501(C)(3)	5,000.	0.			GENERAL SUPPORT
CAKES FOR CAUSE 21 EAST 5TH STREET FREDERICK, MD 21701	77-0712653	501(C)(3)	6,518.	0.			SUPPLIES, EQUIPMENT AND MATERIALS FOR YOUTH
CARROLL MANOR FIRE COMPANY 2795 ADAMS STREET ADAMSTOWN, MD 21710	52-1293774	501(C)(3)	5,441.	0.			GENERAL SUPPORT
CURESEARCH NATIONAL CHILDHOOD CANCER FOUNDATION - 4600 EAST WEST HIGHWAY - BETHESDA, MD 20814	95-4132414	501(C)(3)	5,000.	0.			2008 MILESTONE WALK
DELAPLAINE VISUAL ARTS EDUCATION CENTER - 40 SOUTH CARROLL STREET - FREDERICK, MD 21701	52-1481592	501(C)(3)	21,762.	0.			ART CLASSES AND INSTRUCTION FOR CHILDREN
EVANGELICAL LUTHERAN CHURCH 35 EAST CHURCH STREET FREDERICK, MD 21701	52-0627772	501(C)(3)	19,453.	0.			FREDERICK AND URBANA CAMPUSES, FINE ARTS SERIES
FAMILIES PLUS 35 EAST CHURCH STREET FREDERICK, MD 21701	52-1389967	501(C)(3)	6,495.	0.			WELLNESS GROUP AND EQUIPMENT
FREDERICK CHURCH OF THE BRETHREN 201 FAIRVIEW AVENUE FREDERICK, MD 21701	52-0651674	501(C)(3)	102,500.	0.			EXPANSION FUND

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

832241 12-17-08

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

Schedule I-1 (Form 990) 2008

SCHEDULE I-1
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

▲ Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

**THE COMMUNITY FOUNDATION OF
COUNTY MARYLAND, INC.**

Employer identification number

52-1488711

Part II

Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
FREDERICK COMMUNITY ACTION AGENCY 100 S. MARKET STREET FREDERICK, MD 21701	52-6000943	GOVERNMENT AGENC	10,000.	0.			PRESCRIPTIONS, MEDICAL AND LAB EXPENSES
FREDERICK COMMUNITY COLLEGE FOUNDATION - 7932 OPPOSSUMTOWN PIKE - FREDERICK, MD 21701	52-1231768	501(C)(3)	13,841.	0.			MUSIC EDUCATION MATERIALS, INSTRUMENTS, SCHOLARSHIP PROGRAM
FREDERICK COUNTY CHAMBER OF COMMERCE - 8420-B GAS HOUSE PIKE - FREDERICK, MD 21701	52-0318880	501(C)(6)	47,653.	0.			OPERATING EXPENSES FOR THE FREDERICK COUNTY BUSINESS ROUNDTABLE FOR EDUCATION AND LEADERSHIP
FREDERICK COUNTY DEPARTMENT OF AGING - 1440 TANEY AVENUE - FREDERICK, MD 21701	52-6000943	GOVERNMENT AGENC	19,670.	0.			BINGO AND BIRTHDAYS FOR ELDERLY, MEALS ON WHEELS PROGRAM, MOVEMENT FOR MOTION CLASSES
FREDERICK COUNTY HEAD START 401 SAGNER AVENUE FREDERICK, MD 21701	52-6000943	GOVERNMENT AGENC	5,523.	0.			CHILD MOTOR VEHICLES
FREDERICK COUNTY HEALTH DEPARTMENT 350 MONTEVUE LANE FREDERICK, MD 21701	52-6000943	GOVERNMENT AGENC	16,672.	0.			START-UP COSTS FOR FREDERICK COUNTY HEALTH CARE COALITION
FREDERICK COUNTY LANDMARKS 1110 ROSEMONT AVENUE FREDERICK, MD 21701	23-7241926	501(C)(3)	6,602.	0.			HISTORIC PRESERVATION AND MAINTENANCE
FREDERICK COUNTY PUBLIC LIBRARIES 110 EAST PATRICK STREET FREDERICK, MD 21701	52-2173683	501(C)(3)	15,163.	0.			CHILDREN'S BOOKS, MAINTENANCE AND ACQUISITION OF MATERIALS AND BOOKS AND TO EXPAND

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

832241 12-17-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Schedule I-1 (Form 990) 2008

SCHEDULE I-1
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

▲ Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization **THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

Employer identification number
52-1488711

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II).

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
FREDERICK COUNTY PUBLIC SCHOOLS 115 EAST CHURCH STREET FREDERICK, MD 21701	52-6000941	GOVERNMENT AGENC	1,163,639.	0.			CONSTRUCTION AND EQUIPMENT FOR PLANETARIUM AND SCIENCE LAB, FURNITURE FOR MEDIA
FREDERICK MEMORIAL HOSPITAL 400 WEST SEVENTH STREET FREDERICK, MD 21701	52-0591612	501(C)(3)	87,562.	0.			BREAST CANCER FUND AND GENERAL SUPPORT
FREDERICK RESCUE MISSION 419 W. SOUTH STREET FREDERICK, MD 21701	52-0813371	501(C)(3)	20,403.	0.			TRAINING AND EDUCATION ACTIVITIES, CAMERAS, 5 PANEL DRUG TESTS, FURNITURE
GIRL SCOUT COUNCIL OF THE NATION'S CAPITAL - 4301 CONNECTICUT AVENUE, NW - WASHINGTON, DC 20008	54-0732966	501(C)(3)	13,764.	0.			SCOUTING ACTIVITIES IN FREDERICK COUNTY, FINANCIAL ASSISTANCE PROGRAM
GLADE UNITED CHURCH OF CHRIST 21 FULTON AVENUE WALKERSVILLE, MD 21793	52-0679615	501(C)(3)	7,938.	0.			GENERAL SUPPORT
GOODWILL INDUSTRIES OF THE MONOCACY VALLEY, INC. - 400 EAST CHURCH STREET - FREDERICK, MD 21701	23-7047548	501(C)(3)	9,444.	0.			CAPITAL IMPROVEMENTS, TRAINING AND EDUCATION OF DISABLED INDIVIDUALS
HAGERSTOWN COMMUNITY COLLEGE 11400 ROBINWOOD DR HAGERSTOWN, MD 21742	23-7121670	501(C)(3)	10,000.	0.			GENERAL SUPPORT
HEARTLY HOUSE, INC. PO BOX 857 FREDERICK, MD 21701	52-1186250	501(C)(3)	41,645.	0.			UV LIGHTS, HVAC CLEANERS, SCHOLARSHIP PROGRAM, SUPPORT FOR CHILDREN'S SERVICES, TRANSITIONAL

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

832241 12-17-08

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

Schedule I-1 (Form 990) 2008

SCHEDULE I-1
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)
Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization **THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

Employer identification number
52-1488711

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
HISTORICAL SOCIETY OF FREDERICK COUNTY - 24 EAST CHURCH STREET - FREDERICK, MD 21701	52-6050333	501(C)(3)	27,633.	0.			AFRICAN AMERICAN SCHOOLS EXHIBIT, HISTORIC RESEARCH, MAINTENANCE AND RESTORATION, P NEWMAN
HOMEWOOD AT CRUMLAND FARMS 7407 WILLOW ROAD FREDERICK, MD 21701	52-1931794	501(C)(3)	25,123.	0.			SERVICES TO ALZHEIMER'S PATIENTS
HOOD COLLEGE 401 ROSEMONT AVENUE FREDERICK, MD 21701	52-0591608	501(C)(3)	20,093.	0.			ONICA PRALL SCHOOL, LIBRARY, ATHLETIC AND ART DEPARTMENTS, SCHOLARSHIP PROGRAM
HOPE ALIVE, INC. 17645 HARBAUGH VALLEY ROAD SABILLASVILLE, MD 21780	68-0515611	501(C)(3)	17,810.	0.			VEHICLE FOR RESIDENTIAL PROGRAM, CHILDREN'S PROGRAMS, TRANSITIONAL SHELTER, WOMEN'S
HOSPICE OF FREDERICK COUNTY 516 TRAIL AVENUE #C FREDERICK, MD 21701	52-1164513	501(C)(3)	21,357.	0.			CAMP JAMIE, BEREAVEMENT SUPPORT, KLINE HOSPICE HOUSE
JEANNE BUSSARD CENTER 555 SOUTH MARKET STREET FREDERICK, MD 21701	52-0808406	501(C)(3)	7,212.	0.			GENERAL SUPPORT
FRIENDS OF CITIZENS NURSING HOME 312 EAST CHURCH STREET FREDERICK, MD 21701		CPFC FUND	7,898.	0.			PLANNING/MATERIAL FOR FUNDING CAMPAIGN
SOUTHERN FREDERICK COUNTY YOUTH ATHLETICS - 312 EAST CHURCH STREET - FREDERICK, MD 21701		CPFC FUND	14,112.	0.			URBANA PLAYING FIELD DESIGN AND ENGINEERING FEES

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

832241 12-17-08

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

Schedule I-1 (Form 990) 2008

SCHEDULE I-1
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)
Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No. 1545-0047
2008
Open to Public Inspection

Name of the organization **THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC.**

Employer identification number
52-1488711

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
MARYLAND 4-H FOUNDATION, INC. 7100 WISCONSIN AVENUE CHEVY CHASE, MD 20813	52-6056016	501(C)(3)	29,893.	0.			GENERAL SUPPORT
MARYLAND SHERIFFS' YOUTH RANCH, INC. - PO BOX 42 - BUCKEYSTOWN, MD 21717	52-1055741	501(C)(3)	6,193.	0.			ACTIVITIES PROGRAM AND CAPITAL NEEDS
MENTAL HEALTH ASSOCIATION OF FREDERICK COUNTY, INC. - 263 W PATRICK STREET - FREDERICK, MD 21701	52-0968521	501(C)(3)	122,205.	0.			COMPUTER AND VIDEO EQUIPMENT, INTERPRETING SERVICES TO 25 LATINO MOTHERS, FOOD, HEALTH AND
MISSION OF MERCY 22 S MARKET STREET FREDERICK, MD 21701	86-0704883	501(C)(3)	5,000.	0.			MEDICAL AND DENTAL PROGRAMS
MONTGOMERY COUNTY PUBLIC SCHOOLS 850 HUNGERFORD DRIVE ROCKVILLE, MD 20850	52-1804509	501(C)(3)	59,785.	0.			SCHOLARSHIP PROGRAMS
MONTGOMERY UNITED METHODIST CHURCH 28325 KEMPTOWN ROAD DAMASCUS, MD 20872	27-7420311	501(C)(3)	17,000.	0.			GENERAL SUPPORT
CARROLL CREEK ROTARY PO BOX 39 FREDERICK, MD 21701	52-1829548	501(C)(4)	229,277.	0.			RENOVATION OF BAKER PARK BANDSHELL
NATIONAL LUTHERAN HOME FOR THE AGED - 9701 VIERS DRIVE - ROCKVILLE, MD 20850	53-0196624	501(C)(3)	15,453.	0.			GENERAL SUPPORT

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

SCHEDULE I-1
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)
Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization **THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

Employer identification number
52-1488711

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part I.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
NEUROFIBROMATOSIS MID-ATLANTIC, INC. - 8855 ANNAPOLIS ROAD - LANHAM, MD 20703	22-2580179	501(C)(3)	6,484.	0.			CAMP NEW FRIEND
NEW HOPE UNITED METHODIST CHURCH 7 SOUTH MARLAND AVENUE BRUNSWICK, MD 21716	52-0683373	501(C)(3)	27,000.	0.			BUILDING FUND
PATY POLLATOS FUND, INC. 11102 EAGLETRACE DRIVE NEW MARKET, MD 21774	52-2272934	501(C)(3)	20,000.	0.			GENERAL SUPPORT
POSITIVE INFLUENCE PO BOX 23 FREDERICK, MD 21705	01-0750631	501(C)(3)	9,805.	0.			GENERAL SUPPORT
RELIGIOUS COALITION FOR EMERGENCY HUMAN NEEDS - 27 DEGRANGE STREET - FREDERICK, MD 21701	52-1449375	501(C)(3)	77,102.	0.			ALAN P LINTON SHELTER OPERATIONS, IMPROVEMENTS, FURNITURE AND EQUIPMENT, HOUSING ASSISTANCE AND
SAINT JOHN'S CATHOLIC PREP 889 BUTTERFLY LANE FREDERICK, MD 21701	52-0954961	501(C)(3)	203,929.	0.			SCHOLARSHIP PROGRAM
SALVATION ARMY 223 WEST FIFTH STREET FREDERICK, MD 21701	52-0591457	501(C)(3)	6,981.	0.			EMERGENCY FOOD AND SHELTER PROGRAMS
ST CATHERINE'S NURSING CENTER 331 S SETON AVENUE EMMITTSBURG, MD 21727	52-1835288	501(C)(3)	35,000.	0.			BENEVOLENCE FUND

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

SCHEDULE I-1
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)
Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization **THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

Employer identification number
52-1488711

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
ST JOHN'S REGIONAL SCHOOL 8414 OPOSSUMTOWN PIKE FREDERICK, MD 21701	52-1752206	501(C)(3)	10,055.	0.			SCHOLARSHIP/TUITION ASSISTANCE PROGRAM
ST JOHN'S CEMETERY, INC. 112 EAST 2ND STREET FREDERICK, MD 21701	52-1746331	501(C)(13)	7,387.	0.			PRESERVATION AND MAINTENANCE OF CEMETERY
ST PETER'S EPISCOPAL CHURCH 20100 FISHER AVENUE POOLESVILLE, MD 20837	23-7348977	501(C)(3)	5,000.	0.			LIBRARY PROJECT IN RICHMOND, SOUTH AFRICA
THE COPPER RIDGE INSTITUTE 576 JOHNSVILLE ROAD ELDERSBURG, MD 21784	52-2139438	501(C)(3)	6,421.	0.			GENERAL SUPPORT
THE FRIENDSHIP SCHOOL 1545 PROGRESS WAY ELDERSBURG, MD 21784	52-2122763	501(C)(3)	6,267.	0.			SCHOLARSHIP PROGRAM
THE GREAT FREDERICK FAIR, INC. 797 EAST PATRICK STREET FREDERICK, MD 21701	52-0915839	501(C)(5)	346,270.	0.			CAPITAL BUILDING IMPROVEMENTS, "FAIRTUBE" ONLINE INTERACTIVE EDUCATIONAL PROGRAM
THE HILGENBERG SPEECH & LANGUAGE CENTER - 3800 N CHARLES STREET - BALTIMORE, MD 21218	52-1300481	501(C)(3)	10,000.	0.			GENERAL SUPPORT
THE JOHN HOPKINS UNIVERSITY CENTER FOR TALENTED YOUTH - 5801 SMITH AVENUE - BALTIMORE, MD 21209	52-0595110	501(C)(3)	5,000.	0.			SCHOLARSHIP FOR ELEMENTARY/MIDDLE SCHOOL SUMMER STUDENTS

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

SCHEDULE I-1
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)
Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

**THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

Employer identification number

52-1488711

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
THE JEFFERSON SCHOOL 2940 POINT OF ROCKS ROAD JEFFERSON, MD 21755	52-0591684	501(C)(3)	5,500.	0.			FREDERICK COUNTY RESIDENT ACTIVITIES
THORPEWOOD, INC. 12805A MINK FARM ROAD THURMONT, MD 21788	20-5381038	501(C)(3)	15,000.	0.			SELF-SUFFICIENCY AND PERSONAL GROWTH PROGRAM FOR BOYS AND GIRLS
UMCP FOUNDATION 1221 SYMONS HALL COLLEGE PARK, MD 20740	52-2197313	501(C)(3)	29,893.	0.			GENERAL SUPPORT
UNITED WAY OF FREDERICK COUNTY, INC. - PO BOX 307 - FREDERICK, MD 21701	52-0607973	501(C)(3)	36,761.	0.			GENERAL SUPPORT
UP COUNTY FAMILY CENTER 303 W LINCOLN AVENUE EMMITSBURG, MD 21727	52-6000943	GOVERNMENT AGENC	6,154.	0.			FATHERHOOD PROGRAM
WALKERSVILLE UNITED METHODIST CHURCH - 22 MAIN STREET - WALKERSVILLE, MD 21793	52-6043801	501(C)(3)	8,010.	0.			GENERAL SUPPORT
WEINBERG CENTER FOR THE ARTS 20 W PATRICK STREET FREDERICK, MD 21701	52-1900511	501(C)(3)	79,552.	0.			COMPUTER EQUIPMENT AND SOFTWARE, CAPITAL CAMPAIGN
YELLOW RIBBON FUND 7200 WISCONSIN AVENUE BETHESDA, MD 20814	36-4567583	501(C)(3)	10,000.	0.			SUPPORT FOR WOUNDED SOLDIERS AND FAMILIES

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

832241 12-17-08

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

Schedule I-1 (Form 990) 2008

Name of the organization THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC.

Employer identification number
52-1488711

[illegible]

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations.

Part IV Supplemental Information

COUNTY BUSINESS ROUNDTABLE FOR EDUCATION AND LEADERSHIP FREDERICK AWARDS

NAME OF ORGANIZATION OR GOVERNMENT: FREDERICK COUNTY PUBLIC LIBRARIES

(H) PURPOSE OF GRANT OR ASSISTANCE: CHILDREN'S BOOKS, MAINTENANCE AND
ACQUISITION OF MATERIALS AND BOOKS AND TO EXPAND HOLDINGS OF MARYLAND
ROOM AND HISTORIC RESEARCH

NAME OF ORGANIZATION OR GOVERNMENT: FREDERICK COUNTY PUBLIC SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: CONSTRUCTION AND EQUIPMENT FOR
PLANETARIUM AND SCIENCE LAB, FURNITURE FOR MEDIA CENTER AT INNER CITY
SCHOOL, MUSIC EQUIPMENT AND MATERIALS, AGRICULTURE-RELATED CURRICULUM,
SUMMER ENGINEERING PROGRAM SCHOLARSHIPS AND CAMP SCHOLARSHIPS

NAME OF ORGANIZATION OR GOVERNMENT: HEARTLY HOUSE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: UV LIGHTS, HVAC CLEANERS,
SCHOLARSHIP PROGRAM, SUPPORT FOR CHILDREN'S SERVICES, TRANSITIONAL
HOUSING, EMERGENCY SHELTER, IT EQUIPMENT

NAME OF ORGANIZATION OR GOVERNMENT:

HISTORICAL SOCIETY OF FREDERICK COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: AFRICAN AMERICAN SCHOOLS EXHIBIT,
HISTORIC RESEARCH, MAINTENANCE AND RESTORATION, P NEWMAN LECTURE SERIES

NAME OF ORGANIZATION OR GOVERNMENT: HOPE ALIVE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: VEHICLE FOR RESIDENTIAL PROGRAM,
CHILDREN'S PROGRAMS, TRANSITIONAL SHELTER, WOMEN'S DEVELOPMENT
TRANSPORTATION

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT:

MENTAL HEALTH ASSOCIATION OF FREDERICK COUNTY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: COMPUTER AND VIDEO EQUIPMENT,
INTERPRETING SERVICES TO 25 LATINO MOTHERS, FOOD, HEALTH AND HOUSING
ASSISTANCE

NAME OF ORGANIZATION OR GOVERNMENT:

RELIGIOUS COALITION FOR EMERGENCY HUMAN NEEDS

(H) PURPOSE OF GRANT OR ASSISTANCE: ALAN P LINTON SHELTER OPERATIONS,
IMPROVEMENTS, FURNITURE AND EQUIPMENT, HOUSING ASSISTANCE AND EMERGENCY
SHELTER, MEDICATIONS FOR LOW INCOME AND
UNINSURED, DENTAL ASSISTANCE, EVICTION PREVENTION AND ENERGY ASSISTANCE

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

NonCash Contributions

OMB No. 1545-0047

► To be completed by organizations that answered
"Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

2008

Open to Public
Inspection

Name of the organization **THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.**

Employer identification number
52-1488711

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	6	271,049	HIGH-LOW AVERAGE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other) ...				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions
for which the organization completed Form 8283, Part IV, Donee Acknowledgment

29

0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for
at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for
the entire holding period?

	Yes	No
30a		X
31	X	
32a	X	

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

b If "Yes," describe in Part II.

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,
describe in Part II.

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

Schedule M (Form 990) 2008

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33.
Also complete this part for any additional information.

SCHEDULE M, LINE 32B: PUBLICLY TRADED SECURITIES ARE SOLD BY
INVESTMENT MANAGERS.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Employer identification number
52-1488711

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

GOOD, FOREVER, FOR FREDERICK COUNTY.

FORM 990, PART VI, SECTION A, LINE 10: THE AUDIT COMMITTEE REVIEWS THE
FORM 990, THEN SENDS IT TO THE BOARD OF TRUSTEES FOR ITS REVIEW AND
APPROVAL PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: OFFICERS, TRUSTEES, AND KEY
EMPLOYEES MUST COMPLETE A QUESTIONNAIRE OUTLINING THEIR INTERESTS AND
RELATIONSHIPS THAT COULD GIVE RISE TO CONFLICTS OF INTEREST. THE
GOVERNANCE COMMITTEE AND STAFF REVIEW THE INFORMATION CONTAINED THEREIN AND
ARE WATCHFUL AT BOARD MEETINGS FOR VOTES THAT MAY CONSTITUTE A CONFLICT
MAKING SURE THAT THE INTERESTED PARTY ABSTAINS FROM VOTING. THE ABSTENTION
IS NOTED IN THE MEETING MINUTES.

FORM 990, PART VI, SECTION B, LINE 15: THE PERSONNEL COMMITTEE ESTABLISHES
SALARY RANGES BASED ON OTHER NONPROFIT AND FOUNDATION SALARY INFORMATION.
PERFORMANCE REVIEWS THEN DETERMINE WHERE ON THE SALARY RANGE THE POSITION
WILL FALL.

FORM 990, PART VI, SECTION C, LINE 19: COPIES ARE AVAILABLE ON THE
ORGANIZATION'S WEBSITE AS WELL AS UPON REQUEST. ALL DONORS FOUNDING FUNDS
RECEIVE A COPY OF THE ARTICLES OF INCORPORATION AND BYLAWS AT THE TIME THE
FUND AGREEMENT IS SIGNED.

FORM 990, PART XI, QUESTION 2B - AUDITED FINANCIAL STATEMENTS

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

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

THE COMMUNITY FOUNDATION OF FREDERICK
COUNTY MARYLAND, INC.

Employer identification number
52-1488711

ALTHOUGH THE ORGANIZATION DOES NOT RECEIVE STAND ALONE GAAP FINANCIAL
STATEMENTS, IT DOES RECEIVE ON AN ANNUAL BASIS FROM INDEPENDENT
AUDITORS CONSOLIDATED ENTITY GAAP FINANCIAL STATEMENTS FOR IT AND ITS
AFFILIATES.

Part I

[illegible]

Part II Identification of Related Tax-Exempt Organizations

(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
THE COMMUNITY FOUNDATION HOLDING COMPANY INC. - 52-2028247, 312 EAST CHURCH STREET, FREDERICK, MD 21701	PROVIDE FINANCIAL SUPPORT TO THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MD	MARYLAND	501(C)(3)	11A	
THE AUSHERMAN FAMILY TRUST - 52-7165889 71420 HAYWARD ROAD FREDERICK, MD 21702	PROVIDE SUPPORT TO THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MD	MARYLAND	501(C)(3)	11A	

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	

[illegible]

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

[illegible]

Part V Transactions With Related Organizations

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

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?

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a	X
b Gift, grant, or capital contribution to other organization(s)	1b	X
c Gift, grant, or capital contribution from other organization(s)	1c	X
d Loans or loan guarantees to or for other organization(s)	1d	X
e Loans or loan guarantees by other organization(s)	1e	X
f Sale of assets to other organization(s)	1f	X
g Purchase of assets from other organization(s)	1g	X
h Exchange of assets	1h	X
i Lease of facilities, equipment, or other assets to other organization(s)	1i	X
j Lease of facilities, equipment, or other assets from other organization(s)	1j	X
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	X
l Performance of services or membership or fundraising solicitations by other organization(s)	1l	X
m Sharing of facilities, equipment, mailing lists, or other assets	1m	X
n Sharing of paid employees	1n	X
o Reimbursement paid to other organization for expenses	1o	X
p Reimbursement paid by other organization for expenses	1p	X
q Other transfer of cash or property to other organization(s)	1q	X
r Other transfer of cash or property from other organization(s)	1r	X

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.

(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1) THE COMMUNITY FOUNDATION HOLDING COMPANY, INC.	P	2,204.
(2)		
(3)		
(4)		
(5)		
(6)		

Part VI: Unrelated Organizations Taxable as a Partnership

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]

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Type or print	Name of Exempt Organization THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC.	Employer identification number 52-1488711
	Number, street, and room or suite no. If a P.O. box, see instructions. 312 EAST CHURCH STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. FREDERICK, MD 21701	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

THE ORGANIZATION

- The books are in the care of ► **312 EAST CHURCH STREET - FREDERICK, MD 21701**
Telephone No. ► **301-695-7660** FAX No. ► _____
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until
FEBRUARY 15, 2010, to file the exempt organization return for the organization named above. The extension
is for the organization's return for:

► ☐ calendar year _____ or
► ☒ tax year beginning **JUL 1, 2008**, and ending **JUN 30, 2009**

- 2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

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

Form 8868 (Rev. 4-2009)

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).		
Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization THE COMMUNITY FOUNDATION OF FREDERICK COUNTY MARYLAND, INC.	Employer identification number 52-1488711
	Number, street, and room or suite no. If a P.O. box, see instructions. 312 EAST CHURCH STREET	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. FREDERICK, MD 21701	

Check type of return to be filed (File a separate application for each return):

☒ Form 990 ☐ Form 990-EZ ☐ Form 990-T (sec. 401(a) or 408(a) trust) ☐ Form 1041-A ☐ Form 5227 ☐ Form 8870
☐ Form 990-BL ☐ Form 990-PF ☐ Form 990-T (trust other than above) ☐ Form 4720 ☐ Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

GAIL FITZGERALD

• The books are in the care of **312 EAST CHURCH STREET - FREDERICK, MD 21701**

Telephone No. **301-695-7660**

FAX No. ☐

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **MAY 15, 2010**
 5 For calendar year **JUL 1, 2008**, or other tax year beginning **JUL 1, 2008**, and ending **JUN 30, 2009**
 6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension

ADDITIONAL TIME IS REQUESTED IN ORDER TO GATHER INFORMATION NECESSARY TO PREPARE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature **Susan P. Keller**

Title **CFA**

Date **2/9/2010**

Form 8868 (Rev. 4-2009)