

Department of the Treasury Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

For calendar year 2024 or tax year beginning and ending

Name of foundation: NATURE SACRED. Employer identification number: 42-1263576. Telephone number: (410) 268-1376. City: ANNAPOLIS, MD 21401. Accounting method: Cash.

Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (1-12), Operating and Administrative Expenses (13-26), and Summary (27).

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing	434,493.	240,859.	240,859.
	2	Savings and temporary cash investments	1,014,381.	1,380,894.	1,380,894.
	3	Accounts receivable _____ Less: allowance for doubtful accounts _____			
	4	Pledges receivable _____ Less: allowance for doubtful accounts _____			
	5	Grants receivable	70,000.	623,290.	623,290.
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) _____ Less: allowance for doubtful accounts _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges STMT 7 . .	23,237.	19,091.	19,091.
	10a	Investments - U.S. and state government obligations (attach schedule).**	2,127,705.	1,557,013.	1,557,013.
	b	Investments - corporate stock (attach schedule) . STMT 9 . .	3,287,384.	8,842,208.	8,842,208.
	c	Investments - corporate bonds (attach schedule) . STMT 10 .	1,537,185.	4,953,642.	4,953,642.
	11	Investments - land, buildings, and equipment: basis _____ Less: accumulated depreciation (attach schedule) _____			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule) STMT 11 .	1,177,763.	7,291,456.	7,291,456.
	14	Land, buildings, and equipment: basis 258,896 . Less: accumulated depreciation (attach schedule) 249,969 .	12,914.	8,927.	8,927.
15	Other assets (describe _____ STMT 12)	1,000.	1,000.	1,000.	
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	9,686,062.	24,918,380.	24,918,380.	
Liabilities	17	Accounts payable and accrued expenses	119,161.	106,578.	
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons . .			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe _____ STMT 13)	15,926.	15,000.	
23	Total liabilities (add lines 17 through 22)	135,087.	121,578.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30 <input checked="" type="checkbox"/>				
	24	Net assets without donor restrictions	7,922,086.	23,830,584.	
	25	Net assets with donor restrictions	1,628,889.	966,218.	
	Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30 <input type="checkbox"/>				
	26	Capital stock, trust principal, or current funds			
	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
	28	Retained earnings, accumulated income, endowment, or other funds . .			
29	Total net assets or fund balances (see instructions)	9,550,975.	24,796,802.		
30	Total liabilities and net assets/fund balances (see instructions)	9,686,062.	24,918,380.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	9,550,975.
2	Enter amount from Part I, line 27a	2	14,793,007.
3	Other increases not included in line 2 (itemize) SEE STATEMENT 14	3	452,820.
4	Add lines 1, 2, and 3	4	24,796,802.
5	Decreases not included in line 2 (itemize) _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	24,796,802.

**

STMT 8

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a SEE PART IV SCHEDULE				
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.				(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a				
b				
c				
d				
e				
2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	594,227.
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8	{ }	3	17,900.

Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)	1	12,793.
b	All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2	
3	Add lines 1 and 2	3	12,793.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	NONE
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	12,793.
6	Credits/Payments:		
a	2024 estimated tax payments and 2023 overpayment credited to 2024	6a	12,720.
b	Exempt foreign organizations - tax withheld at source	6b	NONE
c	Tax paid with application for extension of time to file (Form 8868)	6c	3,000.
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	15,720.
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	2,927.
11	Enter the amount of line 10 to be: Credited to 2025 estimated tax 2,927. Refunded	11	

Part VI-A Statements Regarding Activities

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?
c Did the foundation file Form 1120-POL for this year?
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers.
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments?
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?
4b If "Yes," has it filed a tax return on Form 990-T for this year?
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:
7 Did the foundation have at least \$5,000 in assets at any time during the year?
8a Enter the states to which the foundation reports or with which it is registered.
8b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G?
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2024 or the tax year beginning in 2024?
10 Did any persons become substantial contributors during the tax year?
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)?
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?
14 The books are in care of BROWN INVESTMENT ADVISORY & TR Telephone no. 410-537-5400 Located at 901 S. BOND ST #400 BALTIMORE, MD ZIP+4 21231-3340
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year.
16 At any time during calendar year 2024, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

Table with columns: Question, Yes, No. Rows include 1a (1-6), 1b, 1c, 1d, 2a, 2b, 3a, 3b, 4a, 4b.

Form 990-PF (2024)

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

	Yes	No
5a During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.		X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		
c Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d).		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		X

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 16		283,278.	58,549.	NONE

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 26		270,398.	21,934.	NONE

Total number of other employees paid over \$50,000 NONE

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
SEE STATEMENT 28		614,903.
Total number of others receiving over \$50,000 for professional services		NONE

Part VIII-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 SEE FOOTNOTE FOR DIRECT CHARITABLE ACTIVITIES	
	1,570,901.
2	
3	
4	

Part VIII-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 NONE	
2	
All other program-related investments. See instructions.	
3 NONE	
Total. Add lines 1 through 3	

Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	9,463,471.
b	Average of monthly cash balances	1b	2,469,003.
c	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	11,932,474.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	11,932,474.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	178,987.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	11,753,487.
6	Minimum investment return. Enter 5% (0.05) of line 5.	6	587,674.

Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)

1	Minimum investment return from Part IX, line 6.	1	
2a	Tax on investment income for 2024 from Part V, line 5.	2a	
b	Income tax for 2024. (This does not include the tax from Part V.)	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1.	7	

Part XI Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	2,349,112.
b	Program-related investments - total from Part VIII-B	1b	NONE
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	2,349,112.

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2023	(c) 2023	(d) 2024
1 Distributable amount for 2024 from Part X, line 7				NONE
2 Undistributed income, if any, as of the end of 2024:				
a Enter amount for 2023 only.			NONE	
b Total for prior years: 20 22 ,20 21 ,20 20		NONE		
3 Excess distributions carryover, if any, to 2024:				
a From 2019	494,469.			
b From 2020	788,993.			
c From 2021	1,159,708.			
d From 2022	1,474,922.			
e From 2023	1,954,191.			
f Total of lines 3a through e	5,872,283.			
4 Qualifying distributions for 2024 from Part XI, line 4: \$ 2,349,112.				
a Applied to 2023, but not more than line 2a . . .			NONE	
b Applied to undistributed income of prior years (Election required - see instructions).				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2024 distributable amount.				
e Remaining amount distributed out of corpus. . .	2,349,112.			
5 Excess distributions carryover applied to 2024 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	8,221,395.			
b Prior years' undistributed income. Subtract line 4b from line 2b		NONE		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount - see instructions		NONE		
e Undistributed income for 2023. Subtract line 4a from line 2a. Taxable amount - see instructions			NONE	
f Undistributed income for 2024. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2025.				NONE
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8 Excess distributions carryover from 2019 not applied on line 5 or line 7 (see instructions) . . .	494,469.			
9 Excess distributions carryover to 2025. Subtract lines 7 and 8 from line 6a	7,726,926.			
10 Analysis of line 9:				
a Excess from 2020	788,993.			
b Excess from 2021	1,159,708.			
c Excess from 2022	1,474,922.			
d Excess from 2023	1,954,191.			
e Excess from 2024	2,349,112.			

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9)

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2024, enter the date of the ruling 04/28/2020

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year				(e) Total
	(a) 2024	(b) 2023	(c) 2022	(d) 2021	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed	377,606.	304,691.	205,146.	134,431.	1,021,874.
b 85% (0.85) of line 2a	320,965.	258,987.	174,374.	114,266.	868,592.
c Qualifying distributions from Part XI, line 4, for each year listed	2,349,112.	1,954,191.	1,474,922.	1,159,708.	6,937,933.
d Amounts included in line 2c not used directly for active conduct of exempt activities	171,230.	104,760.	70,695.	108,950.	455,635.
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	2,177,882.	1,849,431.	1,404,227.	1,050,758.	6,482,298.
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets	24,918,380.	9,686,062.	9,186,107.	10,597,874.	54,388,423.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					NONE
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed	391,782.	305,567.	328,341.	285,946.	1,311,636.
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					NONE
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					NONE
(3) Largest amount of support from an exempt organization					NONE
(4) Gross investment income					NONE

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

SEE STATEMENT 30

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

N/A

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<i>a Paid during the year</i> SEE STATEMENT 31				171,230.
Total				3a 171,230.
<i>b Approved for future payment</i>				
Total				3b

**FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL SHORT-TERM COMMON TRUST FUND AND PARTNERSHIP, S CORPORATION, AND OTHER ESTATES OR TRUST GAIN OR LOSS					7,075.	
		TOTAL LONG-TERM COMMON TRUST FUND AND PARTNERSHIP, S CORPORATION, AND OTHER ESTATES OR TRUST GAIN OR LOSS					152,214.	
		TOTAL CAPITAL GAIN DISTRIBUTIONS					192,919.	
628,486.		PUBLICALLY TRADED SECURITIES PROPERTY TYPE: SECURITIES 619,255.				P	VARIOUS	VARIOUS
146,030.		US TREASURY PROPERTY TYPE: SECURITIES 145,020.				P	09/07/2023	01/23/2024
2,875,145.		PUBLICALLY TRADED SECURITIES PROPERTY TYPE: SECURITIES 2,643,951.				P	VARIOUS	VARIOUS
TOTAL GAIN(LOSS)							----- 594,227. =====	

**Schedule B
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Name of the organization

Employer identification number

NATURE SACRED

42-1263576

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization <p style="text-align: center;">NATURE SACRED</p>	Employer identification number <p style="text-align: center;">42-1263576</p>
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FIDELITY CHARITABLE P.O. BOX 770001 CINCINNATI, OH 45277-0053	\$ 1,025,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	THE BALTIMORE COMMUNITY FOUNDATION 11 E MT ROYAL AVENUE, FLOOR 2 BALTIMORE, MD 21202	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	THE JACOB & HILDA BLAUSTEIN FDN ONE SOUTH STREET, SUITE 2900 BALTIMORE, MD 21202	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	PASCAL AND SU MITTERMAIER 46 GUNNING POINT ROAD, APT 1 FALMOUTH, MA 02540-1876	\$ 25,526.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5	CLAYTON BAKER TRUST 1600 W 41ST STREET, SUITE 700 BALTIMORE, MD 21211	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	BROWN ADVISORY 901 S. BOND STREET, SUITE 400 BALTIMORE, MD 21231	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <p style="text-align: center;">NATURE SACRED</p>	Employer identification number <p style="text-align: center;">42-1263576</p>
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	ALAN R. AND ELIZABETH GRIFFITH 300 PINEY POINT FARM LANE CENTREVILLE, MD 21617-1817	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	FRANCIS P CHIARAMONTE, MD FAMILY FDN 44 CANAL CENTER PLAZA #325 ALEXANDRIA, VA 22314	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	THE BLACKBURN FOUNDATION INC. 228 S. WASHINGTON STREET, SUITE 110 ALEXANDRIA, VA 22314	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	COMMUNITY FOUNDATION OF GREATER MEMPHIS 1900 UNION AVENUE MEMPHIS, TN 38104	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	RICHARD L. FRANYO 29 1/2 EASTERN AVENUE ANNAPOLIS, MD 21403-3315	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	ARTHUR W. EDWARDS, JR. 6 NORWOOD ROAD ANNAPOLIS, MD 21401-1227	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <p style="text-align: center;">NATURE SACRED</p>	Employer identification number <p style="text-align: center;">42-1263576</p>
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	LANDCARE 5295 WESTVIEW DRIVE, SUITE 100 FREDERICK, MD 21703	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	NATIONAL PHILANTHROPIC TRUST 165 TOWNSHIP LINE ROAD, SUITE 1200 JENKINTOWN, PA 19046	\$ 350,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	AMERICAN ENDOWMENT FOUNDATION 5700 DARROW ROAD, SUITE 118 HUDSON, OH 44236	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16	THE BUNTING FAMILY FOUNDATION 217 INTERNATIONAL CIRCLE COCKEYSVILLE, MD 21030	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17	HARTFORD FOUNDATION FOR PUBLIC GIVING 10 COLUMBUS BOULEVARD, 8TH FLOOR HARTFORD, CT 06106	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18	LOCKHART VAUGHAN FOUNDATION, INC. 1600 W 41ST STREET #700 BALTIMORE, MD 21211	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization NATURE SACRED	Employer identification number 42-1263576
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	T. ROWE PRICE PROGRAM FOR CHARITABLE P.O. BOX 17115 BALTIMORE, MD 21297	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20	WHITING-TURNER 300 EAST JOPPA ROAD BALTIMORE, MD 21286	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21	BEVERLY DALE, PH.D. 245 DEL MONTE AVENUE LOS ALTOS, CA 94022-1206	\$ 9,996.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
22	THOMAS H. STONER ESTATE C/O BAI, 901 S. BOND STREET, SUITE 400 BALTIMORE, MD 21231	\$ 15,245,872.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
23	MADONNA REHABILITATION HOSPITAL 5401 SOUTH STREET LINCOLN, NE 68506	\$ 70,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
24	MIKE AND REBECCA BOGAN 13525 CALAIS DRIVE DEL MAR, CA 92014	\$ 24,749.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <p style="text-align: center;">NATURE SACRED</p>	Employer identification number <p style="text-align: center;">42-1263576</p>
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	THE OROKAWA FOUNDATION 1 W PENNSYLVANIA AVENUE, SUITE 800 TOWSON, MD 21204-5032	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
26	GREATER WASHINGTON COMMUNITY FOUNDATION 1750 H ST NW SUITE 800, WASHINGTON, DC 20006	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
27	R.S. EVANS FOUNDATION, INC. 455 NE 5TH AVENUE, SUITE D 347 DELRAY BEACH, FL 33483	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
28	BRADFORD FAMILY FOUNDATION 30 LENOX PLACE SAINT LOUIS, MO 63108-1902	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
29	THE ASSOCIATED 101 W MOUNT ROYAL AVENUE BALTIMORE, MD 21201	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
30	ANONYMOUS CORPORATION 105 ANNAPOLIS STREET ANNAPOLIS, MD 21401	\$ 9,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <p style="text-align: center;">NATURE SACRED</p>	Employer identification number <p style="text-align: center;">42-1263576</p>
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Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
4	820 SHARES INTEL CORP _____ _____ _____	\$ 25,526.	06/20/2024
21	16 SHARES VANGUARD INFORMATION EFT _____ _____ _____	\$ 9,996.	12/31/2024
21	VARIOUS LIMITED PARTNERSHIPS _____ _____ _____	\$ 13,791,125.	12/01/2024
24	41 SHARES META PLATFORMS INC _____ _____ _____	\$ 24,749.	12/24/2024
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization <p style="text-align:center;">NATURE SACRED</p>	Employer identification number <p style="text-align:center;">42-1263576</p>
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Part III **Exclusively** religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	

FORM 990PF, PART I - OTHER INCOME
 =====

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME
-----	-----	-----	-----
SCH K-1 PTE INCOME	80,740.	-7,539.	80,740.
FEEES FOR SERVICES	70,000.		70,000.
BOOK SALES	10,987.		10,987.
OTHER INCOME	5,150.		
	-----	-----	-----
TOTALS	166,877.	-7,539.	161,727.
	=====	=====	=====

FORM 990PF, PART I - LEGAL FEES
 =====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	ADJUSTED NET INCOME -----	CHARITABLE PURPOSES -----
LEGAL FEES	16,838.			14,361.
TOTALS	16,838.	NONE	NONE	14,361.
	=====	=====	=====	=====

FORM 990PF, PART I - ACCOUNTING FEES
 =====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	ADJUSTED NET INCOME -----	CHARITABLE PURPOSES -----
ACCOUNTING FEES	47,798.	1,399.		47,638.
TOTALS	47,798.	1,399.	NONE	47,638.
	=====	=====	=====	=====

FORM 990PF, PART I - OTHER PROFESSIONAL FEES
 =====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	ADJUSTED NET INCOME -----	CHARITABLE PURPOSES -----
COMMUNICATIONS	196,405.			196,388.
FUNDRAISING CONSULTING	63,730.			58,300.
INVESTMENT MGMT FEES	43,865.	43,865.		
OTHER CONSULTING	14,350.			16,150.
STRATEGIC DEVELOPMENT	116,188.			104,063.
STRAGIC PLAN	688.			688.
FUNDRAISING TECH SUPPORT	4,136.			4,136.
HEALTH CARE CONSULTANT				10,017.
TOTALS	----- 439,362. =====	----- 43,865. =====		----- 389,742. =====

FORM 990PF, PART I - TAXES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
INCOME TAXES	45,888.	
FOREIGN TAX PAID - DIVIDENDS		1,267.
TOTALS	----- 45,888. =====	----- 1,267. =====

FORM 990PF, PART I - OTHER EXPENSES
 =====

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
-----	-----	-----	-----	-----
COMMUNITY HEALING	438,312.			452,676.
BENCH COSTS	85,792.		85,792.	
FEES FOR SERVICES	58,901.			58,444.
FIRESOUL NETWORK FUNDING	55,762.			55,762.
PHOTOGRAPHY	51,755.			46,790.
NATURE FOR WELLNESS	46,916.			55,839.
OFFICE TECH/SUBSCRIPTION	35,106.			35,106.
OFFICE EXPENSES	30,470.			31,279.
MARKETING & MATERIALS	24,558.			24,558.
DONOR CULTIVATION /STEWARDSHIP	14,326.			14,362.
BENCH STORAGE FEES	13,470.			13,470.
RESEARCH PROJECTS	12,500.			12,500.
BENCH TALK EVENTS	11,660.		11,660.	
OFFICE MEALS	9,437.			9,437.
INSURANCE	7,007.			7,007.
BOARD MEALS	6,557.			6,557.
STATE CHARITY REGISTRATION	6,034.			6,034.
BOOK EXPENSES	5,265.		5,265.	
TELEPHONE & CONNECTIVITY	4,889.			4,889.
SP PROJECT MATERIALS	3,672.			3,672.
NS BUSINESS DEVELOPMENT	3,403.			3,403.
BOARD EXPENSES	1,874.			1,874.
SOLICITATION MATERIALS	1,348.			1,348.
FUNDRAISING ADMINISTRATION	439.			439.
POSTAGE OR SHIPPING	421.			421.
ADVERTISING	408.			408.
DONOR CAMPAIGNS	36.			36.
PARTNERSHIP DEDUCTIONS		15,003.		
TOTALS	930,318.	15,003.	102,717.	846,311.
	=====	=====	=====	=====

FORM 990PF, PART II - PREPAID EXPENSES AND DEFERRED CHARGES

=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
PREPAID EXPENSES	14,249.	14,249.
PREPAID INSURANCE	4,842.	4,842.
TOTALS	----- 19,091. =====	----- 19,091. =====

NATURE SACRED

42-1263576

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS

=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
US GOV'T SECURITIES - US BANK	1,557,013.	1,557,013.
US OBLIGATIONS TOTAL	1,557,013.	1,557,013.
	=====	=====

NATURE SACRED

42-1263576

FORM 990PF, PART II - CORPORATE STOCK

=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
EQUITY FUNDS - US BANK	8,085,115.	8,085,115.
FOREIGN STOCK - US BANK	757,093.	757,093.
TOTALS	----- 8,842,208. =====	----- 8,842,208. =====

NATURE SACRED

42-1263576

FORM 990PF, PART II - CORPORATE BONDS

=====

DESCRIPTION	ENDING BOOK VALUE	ENDING FMV
-----	-----	---
FIXED INCOME FUNDS - US BANK	3,039,672.	3,039,672.
MUNICIPAL BONDS	1,913,970.	1,913,970.
TOTALS	----- 4,953,642. =====	----- 4,953,642. =====

FORM 990PF, PART II - OTHER INVESTMENTS

=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
REAL ESTATE FUNDS - US BANK	2,343,686.	2,343,686.
PRIVATE EQUITIES - US BANK	4,947,770.	4,947,770.
TOTALS	----- 7,291,456. =====	----- 7,291,456. =====

FORM 990PF, PART II - OTHER ASSETS

=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
TRADEMARK	1,000.	1,000.
TOTALS	1,000.	1,000.
	=====	=====

FORM 990PF, PART II - OTHER LIABILITIES

=====

DESCRIPTION -----	ENDING BOOK VALUE -----
DUE TO CREDIT CARD	15,000.
TOTALS	----- 15,000. =====

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES
=====

DESCRIPTION -----	AMOUNT -----
UNREALIZED GAIN ON INVESTMENT	452,820.

TOTAL	452,820.
	=====

NATURE SACRED

42-1263576

FORM 990PF, PART VI-A, LINE 10 - NEW SUBSTANTIAL CONTRIBUTORS

=====

NAME AND ADDRESS

THOMAS H. STONER ESTATE
C/O BAI, 901 S. BOND STREET, SUITE 400
BALTIMORE, MD 21231

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:
PASCAL MITTERMAIER

ADDRESS:
105 ANNAPOLIS STREET
D
ANNAPOLIS, MD 21401

TITLE:
BOARD CHAIR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2.00

COMPENSATION NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES NONE

OFFICER NAME:
KATHARINE E. STONER

ADDRESS:
105 ANNAPOLIS STREET
D
ANNAPOLIS, MD 21401

TITLE:
VICE CHAIR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 5.00

COMPENSATION NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS NONE

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

EXPENSE ACCOUNT AND OTHER ALLOWANCES NONE

OFFICER NAME:
DICK BLACKBURN

ADDRESS:
105 ANNAPOLIS STREET
D
ANNAPOLIS, MD 21401

TITLE:
TREASURER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1.00

COMPENSATION NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES NONE

OFFICER NAME:
FRED SMITH

ADDRESS:
105 ANNAPOLIS STREET
D
ANNAPOLIS, MD 21401

TITLE:
SECRETARY

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0.10

COMPENSATION NONE

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES NONE

OFFICER NAME:
NICHOLE BATTLE

ADDRESS:
105 ANNAPOLIS STREET
D
ANNAPOLIS, MD 21401

TITLE:
DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0.10

COMPENSATION NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES NONE

OFFICER NAME:
MIKE BOGAN

ADDRESS:
105 ANNAPOLIS STREET
D
ANNAPOLIS, MD 21401

TITLE:
DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0.10

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

COMPENSATION	NONE
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	NONE
EXPENSE ACCOUNT AND OTHER ALLOWANCES	NONE

OFFICER NAME:
 THE HONORABLE MARY K. BUSH

ADDRESS:
 105 ANNAPOLIS STREET
 D
 ANNAPOLIS, MD 21401

TITLE:
 DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0.10

COMPENSATION	NONE
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	NONE
EXPENSE ACCOUNT AND OTHER ALLOWANCES	NONE

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:
EDDIE DUNN

ADDRESS:
105 ANNAPOLIS STREET
D
ANNAPOLIS, MD 21401

TITLE:
DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0.10

COMPENSATION	NONE
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	NONE
EXPENSE ACCOUNT AND OTHER ALLOWANCES	NONE

OFFICER NAME:
JON EISNER

ADDRESS:
105 ANNAPOLIS STREET
D
ANNAPOLIS, MD 21401

TITLE:
DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0.10

COMPENSATION	NONE
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	NONE

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

EXPENSE ACCOUNT AND OTHER ALLOWANCES NONE

OFFICER NAME:
AMANDA FARRAND

ADDRESS:
105 ANNAPOLIS STREET
D
ANNAPOLIS, MD 21401

TITLE:
DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0.10

COMPENSATION NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES NONE

OFFICER NAME:
MIKE HANKIN

ADDRESS:
105 ANNAPOLIS STREET
D
ANNAPOLIS, MD 21401

TITLE:
DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0.10

COMPENSATION NONE

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES NONE

OFFICER NAME:
LAUREN MARSHALL

ADDRESS:
105 ANNAPOLIS STREET
D
ANNAPOLIS, MD 21401

TITLE:
DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0.10

COMPENSATION NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES NONE

OFFICER NAME:
EMILY MOORE

ADDRESS:
105 ANNAPOLIS STREET
D
ANNAPOLIS, MD 21401

TITLE:
DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0.10

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

COMPENSATION	NONE
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	NONE
EXPENSE ACCOUNT AND OTHER ALLOWANCES	NONE

OFFICER NAME:
 GLEN STEWART

ADDRESS:
 105 ANNAPOLIS STREET
 D
 ANNAPOLIS, MD 21401

TITLE:
 DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0.10

COMPENSATION	NONE
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	NONE
EXPENSE ACCOUNT AND OTHER ALLOWANCES	NONE

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:
ALDEN STONER

ADDRESS:
105 ANNAPOLIS STREET
D
ANNAPOLIS, MD 21401

TITLE:
CHIEF EXECUTIVE OFFICER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION:	40.00
COMPENSATION	163,604.
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	27,445.
EXPENSE ACCOUNT AND OTHER ALLOWANCES	NONE

OFFICER NAME:
ERIN ROBERTSON

ADDRESS:
105 ANNAPOLIS STREET
D
ANNAPOLIS, MD 21401

TITLE:
CHIEF PROGRAMS OFFICER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION:	40.00
COMPENSATION	119,674.
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	31,104.

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

EXPENSE ACCOUNT AND OTHER ALLOWANCES NONE

TOTAL COMPENSATION: 283,278.
=====

TOTAL CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS: 58,549.
=====

EXPENSE ACCOUNT AND OTHER ALLOWANCES: NONE
=====

990PF, PART VII - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

=====

EMPLOYEE NAME:
HANNAH M SPIRT-JONES

ADDRESS:
105 ANNAPOLIS STREET D
ANNAPOLIS, MD 21401

TITLE:
PROGRAMS MANAGER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 40.00

COMPENSATION 62,261.

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES NONE

EMPLOYEE NAME:
NEHA SRINIVASAN

ADDRESS:
105 ANNAPOLIS STREET D
ANNAPOLIS, MD 21401

TITLE:
PROJECT MANAGER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 40.00

COMPENSATION 70,889.

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS 9,044.

990PF, PART VII - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

=====

EMPLOYEE NAME:
DANIEL GREENSPAN

ADDRESS:
105 ANNAPOLIS STREET D
ANNAPOLIS, MD 21401

TITLE:
VP, DESIGN & PLACES

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 40.00

COMPENSATION 137,248.

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS 12,890.

TOTAL COMPENSATION: 270,398.
=====

TOTAL CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS: 21,934.
=====

EXPENSE ACCOUNT AND OTHER ALLOWANCES: NONE
=====

990PF, PART VII-COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALS

NAME:
MATTER, LLC

ADDRESS:
8517 VICTORY LANE
POTOMAC, MD 20854

TYPE OF SERVICE:
CONSULTING

COMPENSATION 203,677.

NAME:
FLOURA TEETER

ADDRESS:
800 NORTH CHARLES STREET, SUITE 300
BALTIMORE, MD 21201

TYPE OF SERVICE:
DESIGN ARCHITECT FEE

COMPENSATION 150,083.

NAME:
GOMES & ASSOCIATES

ADDRESS:
15 OAK HILL CT
OWINGS MILLS, MD 21117

TYPE OF SERVICE:
DEVELOPMENT CONSULT

COMPENSATION 117,829.

990PF, PART VII-COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALS

NAME:

CONFLUENCE, INC.

ADDRESS:

525 17TH ST,
DES MOINES, IA 50309

TYPE OF SERVICE:

DESIGN ARCHITECT FEE

COMPENSATION 88,314.

NAME:

MELISSA SANDOR CONSULTING

ADDRESS:

2840 NEW YORK 17B
COCHECTON, NY 12726

TYPE OF SERVICE:

FUNDRAISING CONSULTI

COMPENSATION 55,000.

TOTAL COMPENSATION: 614,903.
=====

FORM 990PF, PART XIV - INFORMATION REGARDING FOUNDATION MANAGERS
=====

KATHARINE E. STONER
RICHARD BLACKBURN

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

AMAZING GRACE LUTHERAN CHURCH

ADDRESS:

2424 MCELDERRY STREET

BALTIMORE, MD 21205

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,500.

RECIPIENT NAME:

ANNAPOLIS LIGHT HOUSE

ADDRESS:

10 HUDSON STREET

ANNAPOLIS, MD 21401

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
ANNAPOLIS MARITIME MUSEUM, INC.
ADDRESS:
723 SECOND STREET

ANNAPOLIS, MD 21403

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,000.

RECIPIENT NAME:
ASYLEE WOMEN ENTERPRISE
ADDRESS:
4500 FRANKFORD AVENUE

BALTIMORE, MD 21206

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:
BACKYARD BASECAMP, INC.
ADDRESS:
4706 MONROVIA ROAD

BALTIMORE, MD 21206
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 15,500.

RECIPIENT NAME:
BALTIMORE CLAYWORKS
ADDRESS:
5707 SMITH AVENUE

BALTIMORE, MD 21209
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
BALTIMORE WASHINGTON MEDICAL CENTER FOUNDATION
ADDRESS:
255 HOSPITAL DRIVE SUITE 408

GLEN BURNIE, MD 21061
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,000.

RECIPIENT NAME:
BON SECOURS COMMUNITY WORKS
ADDRESS:
26 N FULTON AVENUE

BALTIMORE, MD 21223
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
BON SECOURS RETREAT & CONFERENCE CENTER
ADDRESS:
1525 MARRIOTTSVILLE ROAD

MARRIOTTSVILLE, MD 21104
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,000.

RECIPIENT NAME:
BON SECOURS URBAN FARM
ADDRESS:
1803 VINE ST,

BALTIMORE, MD 21223
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
BROOKLYN GREENWAY INITIATIVE
ADDRESS:
135 COLUMBIA STREET

BROOKLYN, NY 11231
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 11,000.

RECIPIENT NAME:
CADVC AT UMBC
ADDRESS:
1000 HILLTOP CIRCLE

BALTIMORE, MD 21250
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
CHESAPEAKE REGION ACCESSIBLE BOATING INC,
ADDRESS:
7040 BEMBE BEACH ROAD

ANNAPOLIS, MD 21403-3769

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 500.

RECIPIENT NAME:
COMMUNITY FOUNDATION OF NORTHEAST ALABAMA
ADDRESS:
1130 QUINTARD AVENUE #100

ANNISTON, AL 36201

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 8,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
COOPERATIVE COMMUNITY DEVELOPMENT
ADDRESS:
4004 FREDERICK AVENUE

BALTIMORE, MD 21229
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 500.

RECIPIENT NAME:
EPIPHANY EPISCOPAL CHAPEL
ADDRESS:
1419 ODENTON ROAD

ODENTON, MD 21113
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
FILBERT STREET GARDEN
ADDRESS:
1321 FILBERT STREET

BALTIMORE, MD 21226

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 3,000.

RECIPIENT NAME:
FRIENDS OF KIRBY LANE PARK
ADDRESS:
1825 W SARATOGA STREET

BALTIMORE, MD 21223-1607

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 15,500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

FRIENDS OF PATTERSON PARK

ADDRESS:

27 S PATTERSON PARK AVENUE

BALTIMORE, MD 21231

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 16,500.

RECIPIENT NAME:

FRIENDS OF WANGARI GARDENS

ADDRESS:

PO BOX 43081

WASHINGTON, DC 20010

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 3,500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
FRIENDS OF WYMAN PARK DELL
ADDRESS:
2929 N CHARLES STREET

BALTIMORE, MD 21218
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,000.

RECIPIENT NAME:
GEDCO
ADDRESS:
401 WOODBOURNE AVENUE

BALTIMORE, MD 21212
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 7,500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
GOVAN PRESBYTERIAN CHURCH
ADDRESS:
5828 YORK ROAD

BALTIMORE, MD 21212
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 500.

RECIPIENT NAME:
GREENMOUNT WEST COMMUNITY CENTER FOUNDATION
ADDRESS:
2116 HARFORD ROAD

BALTIMORE, MD 21218
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:
HOSPITALITY HUB MEMPHIS
ADDRESS:
590 WASHINGTON AVENUE

MEMPHIS, TN 38105

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,000.

RECIPIENT NAME:
INTERSECTION OF CHANGE
ADDRESS:
1947 PENNSYLVANIA AVENUE

BALTIMORE, MD 21217

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 9,730.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
JACKSONVILLE STATE UNIVERSITY
ADDRESS:
700 PELHAM RD N

JACKSONVILLE, AL 36265

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

RECIPIENT NAME:
JOHNS HOPKINS BAYVIEW MEDICAL CENTER
ADDRESS:
4940 EASTERN AVENUE

BALTIMORE, MD 21224

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
LANGTON GREEN COMMUNITY FARM
ADDRESS:
844 GENERALS HIGHWAY

MILLERSVILLE, MD 21108
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

FOR THE USE OF LANGTON GREEN COMMUNITY FARM

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 500.

RECIPIENT NAME:
MARIAN HOUSE, INC.
ADDRESS:
949 GORSUCH AVE

BALTIMORE, MD 21218
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 8,500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
MARYLAND HALL
ADDRESS:
801 CHASE STREET

ANNAPOLIS, MD 21401
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 4,000.

RECIPIENT NAME:
MCCORD CROSSROADS HOMEMAKERS CLUB
ADDRESS:
7290 COUNTY ROAD 16

CENTRE, AL 35960
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 3,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
NORTHWELL HEALTH FOUNDATION
ADDRESS:
450 LAKEVILLE ROAD

NEW HYDE PARK, NY 11042
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 500.

RECIPIENT NAME:
OPPORTUNITY BUILDERS, INC.
ADDRESS:
8855 VETERANS HIGHWAY

MILLERSVILLE, MD 21108
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:
PARKS & PEOPLE FOUNDATION
ADDRESS:
2100 LIBERTY HEIGHTS AVE

BALTIMORE, MD 21217

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 500.

RECIPIENT NAME:
PELL CITY GATEWAY
ADDRESS:
3705 MAYS BEND ROAD

PELL CITY, AL 35128

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
PIDEMONT HEALTH CARE CENTER
ADDRESS:
30 ROUNDTREE DRIVE

PIEDMONT, AL 36272

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,500.

RECIPIENT NAME:
REBUILD JOHNSON SQUARE NEIGHBORHOOD ASSOCIATION
ADDRESS:
700 EAST CHASE STREET

BALTIMORE, MD 21202

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 3,500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
S.A.F.E SYLACAUGA
ADDRESS:
78 BETSY ROSS LANE

SYLACAUGA, AL 35150
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,500.

RECIPIENT NAME:
ST. JAMES DEVELOPMENT CORPORATION
ADDRESS:
1020 W LAFAYETTE AVENUE

BALTIMORE, MD 21217
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
ST. TIMOTHYS SCHOOL
ADDRESS:
8400 GREENSPRING AVENUE

STEVENSON, MD 21153
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,000.

RECIPIENT NAME:
TALLADEGA COLLEGE
ADDRESS:
627 BATTLE ST W

TALLADEGA, AL 35160
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
THE KEY SCHOOL
ADDRESS:
534 HILLSMERE DRIVE

ANNAPOLIS, MD 21403
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 500.

RECIPIENT NAME:
THE LEAGUE FOR PEOPLE WITH DISABILITIES
ADDRESS:
1111 E COLD SPRING LANE

BALTIMORE, MD 21239
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
UNIVERSITY OF MARYLAND
ADDRESS:
1000 HILLTOP CIRCLE

COLLEGE PARK, MD 20742
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,000.

RECIPIENT NAME:
VILLAGE LEARNING PLACE
ADDRESS:
2521 ST PAUL STREET

BALTIMORE, MD 21218
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 8,500.

TOTAL GRANTS PAID: 171,230.
=====

**SCHEDULE D
(Form 1041)**

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

Attach to Form 1041, Form 5227, or Form 990-T.
Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.
Go to www.irs.gov/Form1041 for instructions and the latest information.

OMB No. 1545-0092

2024

Name of estate or trust

Employer identification number

NATURE SACRED

42-1263576

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Note: Form 5227 filers need to complete **only** Parts I and II.

Part I Short-Term Capital Gains and Losses - Generally Assets Held 1 Year or Less (see instructions)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked.				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked.				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked.	774,516.	764,275.	584.	10,825.
4 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824				4
5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts				5 7,075.
6 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2023 Capital Loss Carryover Worksheet				6 ()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on Part III, line 17, column (3).				7 17,900.

Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than 1 Year (see instructions)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked.				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked.				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked.	2,875,145.	2,643,951.		231,194.
11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts.				12 152,214.
13 Capital gain distributions.				13 192,919.
14 Gain from Form 4797, Part I.				14
15 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2023 Capital Loss Carryover Worksheet				15 ()
16 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on Part III, line 18a, column (3).				16 576,327.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2024

Part III Summary of Parts I and II		(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
Caution: Read the instructions before completing this part.				
17	Net short-term gain or (loss)	17		17,900.
18	Net long-term gain or (loss):			
a	Total for year	18a		576,327.
b	Unrecaptured section 1250 gain (see line 18 of the worksheet)	18b		
c	28% rate gain	18c		
19	Total net gain or (loss). Combine lines 17 and 18a.	19		594,227.

Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Schedule A (Form 990-T), Part I, line 4a). If lines 18a and 19, column (2), are net gains, go to Part V, and **don't** complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

Part IV Capital Loss Limitation		20
20	Enter here and enter as a (loss) on Form 1041, line 4 (or Schedule A (Form 990-T), Part I, line 4c, if a trust), the smaller of: a The loss on line 19, column (3); or b \$3,000	()

Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 23 (or Form 990-T, Part I, line 11), is a loss, complete the **Capital Loss Carryover Worksheet** in the instructions to figure your capital loss carryover.

Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part **only** if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 23, is more than zero.

Caution: Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if:

- Either line 18b, column (2), or line 18c, column (2), is more than zero;
- Both Form 1041, line 2b(1), and Form 4952, line 4g, are more than zero; or
- There are amounts on lines 4e and 4g of Form 4952.

Form 990-T trusts. Complete this part **only** if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, Part I, line 11, is more than zero. Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if either line 18b, column (2), or line 18c, column (2), is more than zero.

21	Enter taxable income from Form 1041, line 23 (or Form 990-T, Part I, line 11)	21		
22	Enter the smaller of line 18a or 19 in column (2) but not less than zero.	22		
23	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)	23		
24	Add lines 22 and 23	24		
25	If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0-	25		
26	Subtract line 25 from line 24. If zero or less, enter -0-	26		
27	Subtract line 26 from line 21. If zero or less, enter -0-	27		
28	Enter the smaller of the amount on line 21 or \$3,150	28		
29	Enter the smaller of the amount on line 27 or line 28	29		
30	Subtract line 29 from line 28. If zero or less, enter -0-. This amount is taxed at 0%	30		
31	Enter the smaller of line 21 or line 26	31		
32	Subtract line 30 from line 26	32		
33	Enter the smaller of line 21 or \$15,450	33		
34	Add lines 27 and 30	34		
35	Subtract line 34 from line 33. If zero or less, enter -0-	35		
36	Enter the smaller of line 32 or line 35	36		
37	Multiply line 36 by 15% (0.15)	37		
38	Enter the amount from line 31	38		
39	Add lines 30 and 36	39		
40	Subtract line 39 from line 38. If zero or less, enter -0-	40		
41	Multiply line 40 by 20% (0.20)	41		
42	Figure the tax on the amount on line 27. Use the 2024 Tax Rate Schedule for Estates and Trusts. See the Schedule G instructions in the Instructions for Form 1041	42		
43	Add lines 37, 41, and 42	43		
44	Figure the tax on the amount on line 21. Use the 2024 Tax Rate Schedule for Estates and Trusts. See the Schedule G instructions in the Instructions for Form 1041	44		
45	Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, Part I, line 1a (or Form 990-T, Part II, line 2)	45		

Department of the Treasury
 Internal Revenue Service

Go to www.irs.gov/Form8949 for instructions and the latest information.

Name(s) shown on return NATURE SACRED	Social security number or taxpayer identification number 42-1263576
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Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (B) Short-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (C) Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column (e)</i> in the separate instructions.	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
						(f) Code(s) from instructions	(g) Amount of adjustment	
	PUBLICALLY TRADED SECURITIES	VARIOUS	VARIOUS	628,486.00	619,255.00	W	584.00	9,815.00
	US TREASURY	09/07/2023	01/23/2024	146,030.00	145,020.00			1,010.00
2 Totals.	Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked)			774,516.	764,275.		584.	10,825.

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or taxpayer identification number

NATURE SACRED

42-1263576

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E)** Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (F)** Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column (e)</i> in the separate instructions.	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
						(f) Code(s) from instructions	(g) Amount of adjustment	
	PUBLICALLY TRADED SECURITIES	VARIOUS	VARIOUS	2,875,145.00	2,643,951.00			231,194.00
2 Totals.	Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) . . .			2,875,145.	2,643,951.			231,194.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

FEDERAL FOOTNOTES

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PART VIII-A, SUMMARY OF DIRECT CHARITABLE ACTIVITIES

IN 2024, NATURE SACRED OPENED 10 NEW SACRED PLACE SITE, WITH 14 SITES UNDER ACTIVE CONSTRUCTION. ADDITIONALLY, NATURE SACRED DELIVERED 11 FINAL COMMUNITY-LED DESIGNS FOR FORTHCOMING SACRED PLACES. AN ADDITIONAL 19 BEGAN THE DESIGN PROCESS FOR SACRED PLACES. 14 BENCHES WERE DELIVERED TO SACRED PLACES. FIRESOUL PROGRAM CONDUCTED 23 NETWORKING EVENTS AND LEARNING SESSIONS.