EXTENDED TO FEBRUARY 15, 2018

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury

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

► Information about Form 990 and its instructions is at www.irs.gov/form990.

2017 A For the 2016 calendar year, or tax year beginning APR 1, 2016 and ending MAR 31, Check if applicable: C Name of organization D Employer identification number Address change ACLU FOUNDATION OF MARYLAND, INC. Name change 23-7209538 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 3600 CLIPPER MILL ROAD #350 410-889-8555 City or town, state or province, country, and ZIP or foreign postal code 1,983,862. **G** Gross receipts \$ Amended return 21211 BALTIMORE, MD H(a) Is this a group return Applica-tion pending F Name and address of principal officer: COLEMAN BAZELON for subordinates? Yes X No 3600 CLIPPER MILL RD #350, BALTIMORE, MD 21 H(b) Are all subordinates included? Tax-exempt status: \mathbf{X} 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or 527 If "No," attach a list. (see instructions) J Website: ► WWW.ACLU-MD.ORG **H(c)** Group exemption number ▶ K Form of organization: X Corporation Association Other > L Year of formation: 1969 M State of legal domicile: MD Trust Part I Summary Briefly describe the organization's mission or most significant activities: THE MARYLAND ACLU WORKS **Activities & Governance** ENSURE THAT ALL PEOPLE IN THE STATE OF MARYLAND ARE FREE TO THINK if the organization discontinued its operations or disposed of more than 25% of its net assets. 21 3 Number of voting members of the governing body (Part VI, line 1a) 21 Number of independent voting members of the governing body (Part VI, line 1b) 4 26 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 34 7b 0. **Prior Year Current Year** 1,656,351. 1,858,940. Contributions and grants (Part VIII, line 1h) 8 520,478. 80,001. Program service revenue (Part VIII, line 2g) 57,994. 44.921. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 0. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 11 1,983,862 2,234,823. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 1,907,547. 1,788,122. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 541,110. 571,414. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,448,657. 2,359,536. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -213,834. -375,674. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 4,077,652. 3,879,287. 20 Total assets (Part X, line 16) 401,909. 409,593. 21 Total liabilities (Part X, line 26) 三年 675,743. 469,694 22 Net assets or fund balances. Subtract line 21 from line 20 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. Signature of officer Date Sign COLEMAN BAZELON, BOARD PRESIDENT Here Type or print name and title Date PTIN Check Print/Type preparer's name Preparer's signature 02/15/18 self-employed P00440640 PATRICK M. HANTSKE, CPA Paid WIMBISH & STONE, Firm's name MULLEN, SONDBERG, PAFirm's EIN ▶ 52-1197902 Preparer Firm's address 2553 HOUSLEY ROAD, SUITE 200 Use Only Phone no. 410 - 224 - 4920 ANNAPOLIS, MD 21401 X Yes May the IRS discuss this return with the preparer shown above? (see instructions) No

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Form 990 (2016)

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
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? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		_X_
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	77
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			37
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
46	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	4.0		v
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	ا مد ا		v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	ا مد ا		v
	complete Schedule G. Part III	19	000	X

Form **990** (2016)

Part IV Checklist of Required Schedules (continued)

20a DV the organization operate one or more hospital facilities? If "Yes," complete Schedule II 20b II "Yes" to 10e 28a, did the organization are than 45,000 of grants or other assistance to any domestic organization or commettic operation or domestic operation or domestic organization or operation or domestic organization or operation or operation or operation or operation or operation of the organization are post more than 55,000 of grants or other assistance to any domestic individuals on Part IX. column (A), line 27 if "Yes," complete Schedule I, Parts I and III 20 bit the organization amover "Yes" to Part VII, Section A, line 34, d. of a about compensation of the organization sourcet and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, Parts I and III 20 bit the organization amover "Yes" to Part VII, Section A, line 34, d. of about compensation of the organization sourcet and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule K. If				Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic powerment on Part X, column (A), line 27 if "Yes," complete Schedule I, Parts I and III 22 Line 27 Line 28 Line 27 Line 28 Line	20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		_X_
domestic government on Part IX, column (A), line 17 if Yes,* complete Schedule I, Parts I and if Part IX, column (A), line 27 if Yes,* complete Schedule I, Parts I and if Part IX, column (A), line 27 if Yes,* complete Schedule I, Parts I and if Part IX, column (A), line 27 if Yes,* complete Schedule I, Parts I and if Part IX, column (A), line 27 if Yes,* complete Schedule I, Parts I and if Part IX, column (A), line 27 if Yes,* complete Schedule I, Parts I and if Part IX, column (A), line 27 if Yes,* complete Schedule IX, column (A), line 27 if Yes,* complete Schedule IX, column (A), line 27 if Yes,* complete Schedule IX, column (A), line 27 if Yes,* complete Schedule IX, column (A), line 27 if Yes,* complete Schedule IX, column (A), line 27 if Yes,* complete Schedule IX, column (A), line 27 if Yes,* complete Schedule IX, column (A), line 27 if Yes,* complete Schedule IX, column (A), line 27 if Yes,* complete Schedule IX, column (A), line 27 if Yes,* complete Schedule IX, column (A), line 27 if Yes,* complete Schedule IX, column (A), line 27 if Yes,* complete Schedule IX, column (A), line 27 if Yes,* complete Schedule IX, part IX, column (A), line 27 if Yes,* complete Schedule IX, part IX, column (A), line 27 if Yes,* complete Schedule IX, part IX, column (A), line 28 if Yes,* complete Schedule IX, part IX, column (A), line 28 if Yes,* complete Schedule IX, part IX, column (A), line 28 if Yes,* complete Schedule IX, part IX, column (A), line 28 if Yes,* complete Schedule IX, part IX, column (A), line 28 if Yes,* complete Schedule IX, part IX, column (A), line 28 if Yes,* complete Schedule IX, part IX, column (A), line 28 if Yes,* complete Schedule IX, part IX, column (A), line 28 if Yes,* complete Schedule IX, part IX, column (A), line 28 if Yes,* complete Schedule IX, part IX, column (A), line 28 if Yes,* complete Schedule IX, part IX, complete Schedule IX, p	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
22 X 23 Id the organization report more than \$5,000 of grafts or other assistance to or for domestic individuals on Part IX, column (A), line 27 f */*es, *complete Schedule I, Part I and III 23 Id the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If */es,* *complete Schedule Is A through 24 and and complete Schedule Is A through 24 and and complete Schedule Is at day of the year, that was issued after December 31, 2002? If */es,* *answer lines 24b through 24d and complete Schedule Is It Is Not the year, that was issued after December 31, 2002? If */es,* *answer lines 24b through 24d and complete Schedule Is It Is Is It	21				
Part IX, column IA), line 27 if "Yes," complete Schedule I, Parts I and III 20 Of the organization on server "Yes" to Part IVI, Section A, line 3, 4, cf a baout compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, Part III and 10 of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule I, "No", go to line 25e 24a			21		<u>X</u>
23 Did the organization answer "Yes" to Part VII, Section A, Ine 3.4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I section 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 \$1,2002? If "Yes," answer lines 24b through 24d and complete Schedule II. If "Yes," or to line 25a any tax-exempt bonds are proceeded of tax-exempt bonds beyond a temporary period exception? 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? d Did the organization are as an 'on behalf of' issuer for bonds outstanding at any time during the year of the defease any tax-exempt bonds? d Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I., Part II g 25a X b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I., Part II g 25a X b Is the organization report any amount on Part X. line 5, 6, or 22 for receivables from or payables to any ournet or former officers, furstees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule I., Part II g 25b X 27 Did the organization report any amount on Part X. line 5, 6, or 22 for receivables from or payables to any ournet or former officer, furstees, key employee? If "Yes," complete Schedule I., Part IV instructions for applicable filling thresholds, conditions, and exceptions; a A current or former officer, furstees, or key employee? If "Yes," complete Schedule I., Part IV instructions for applicable filling thresholds, conditions, and exceptions; a A current or former officer, director, furstee, or key employee? If "Yes," complete Schedule II, Part IV	22				7.7
and former officers, directors, trustees, key employees, and highest compensated employees? # "Yes," complete Schedule J 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? # "Yes," answer lines 248 through 24d and complete Schedule K if "No", go to line 25s b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? d Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? d Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24c Section 501(28), 501(24), and 501(c)(28) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 4 b Is the organization aware that It engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? #*1"ves," complete Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, pridest compensated employees, or disqualified persons? #*Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of a current or former officer, director, trustee, or key employees, prides Schedule L, Part IV b A family member of a current or former officer, director, trustee,			22		<u> </u>
Schedule J. 24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule K. If "No", go to line 25a 24b Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax exempt bonds or than a refunding secrow at any time during the year to defease any tax exempt bonds and the organization gestrow at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	23				
Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," anawer lines 24b through 24d and complete Schedule K. If "No", go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24c 25a Saction 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization angein in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25b Did the organization has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I 27b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 27b Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27c Did the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28d Did the organization serve more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 28d Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization have a controlled entity within the meaning		, ,			37
stad day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete \$24b\$ b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year of defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any ourser or former offerers, directors, trustees, key employees, highest compensated employees, or disqualfied persons"? If "yes," complete Schedule L, Part II Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any oursert or former offerer, director, trustee, expended employees, or disqualfied persons"? If "yes," complete Schedule L, Part IV Instruction or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any or these persons? If "Yes," complete Schedule L, Part IV Instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If Yes," complete Schedule L, Part IV Instructions or the selection of the director, trustee, or key employee? If Yes," complete Schedule	•		23		
Schedule K. If 1/10*, go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year of defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person unit and transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I 25b If the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former differes, directors, trustees, key employees, or disqualified persons? if "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? if "Yes," complete Schedule L, Part IV 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 Was the organization enter of former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29 Did the organization enceive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes,"	24a				
b Did the organization minest any proceeds of tax-exempt bonds beyond a temporary period exception? 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? d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(6)3, 501(6)4, and 501(6)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I b Is the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule I, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule I, Part III Was the organization party to a business transaction with one of the following parties (see Schedule I, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I, Part IV 28a X b A family member of a current or former officer, director, trustee, or key employee? (or a family member was an officer, director, trustee, or key employee? If "Yes," complete Schedule II, Part IV 28b X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29a X Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule M, Part I 34a X 34b Was the organiz			040		v
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? 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Ses Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? #"'ves," complete Schedule L, Part I Ses Schedule L, Part	h	, •			
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d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a X 25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I I 26b Id the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, bighest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II I 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III II 27 Ax 28 Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive more than \$250,001 in non-ask contributions? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive more than \$250,001 in non-ask contributions? If "Yes," complete Schedule M 29 X 31 Did the organization of such as the such as a separate from the organization under Regulations sections \$01(0)(0) and \$01,7701-37 If "Yes," complete Schedule R, Part I II III 31 X 31 Did the organization have	C	, , , ,	240		
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		Note. All Form 990 filers are required to complete Schedule O	38		

Form 990 (2016) ACLU FOUNDATION OF MARYLAND, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b 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? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand		Check if Schedule O contains a response or note to any line in this Part V	<u></u>	·····	<u></u>		
b Etter the number of Forms W2G included in line 1a. Enter 0-if not applicable						Yes	No
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gramming) winnings to prize winners? 2 Enfort the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return 2 In the provision of the provi	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	6			
gamblingly winnings to prize winners? ■ 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 ### Index of the calendar year ending with or within the year covered by this return ### Index of the calendar year ending with or within the year covered by this return ### Note. If the sum of lines 1 and 2 is greater than 250, you may be required to e-file (see instructions) ### If "Yes," sum of lines 1 and 2 is greater than 250, you may be required to e-file (see instructions) ### It "Yes," and it flee a form 890 of 1 for this year "I" "hio," to file 89, provide an explanation in Schedule 0 ### A 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)? ### A 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 accounts (FBAR). ### Was the organization appraty to a prohibited tax shelter transaction at any time during the tax year? ### Was the organization appraty to a prohibited tax shelter transaction at any time during the tax year? ### If "Yes," other so fast, did the organization that it was or is a party to a prohibited tax shelter transaction of the "Yes," other than 1 was or is a party to a prohibited tax shelter transaction at any time during the tax year? ### If "Yes," other so fast, did the organization that it was or is a party to a prohibited tax shelter transaction? #### Organizations have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not ax deductible as charitable contributions? #### If "Yes," other than 3 was according to the solicit and a contributio	b		1b	0			
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tiled for the calendary year ending with or within the year covered by this return 1		(gambling) winnings to prize winners?			1c	X	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 30 bit the organization have unrelated business give greater than 250, you may be required to e-rife (see instructions) 31 bit the organization have unrelated business gross income of \$1,000 or more during the year? 32 a X 33 b If "Yes," has it field a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 35 d A At any time during the celandar 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)? 36 b If "Yes," enter the mane of the foreign country. 37 See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 38 Ses the organization a party to a prohibited tax shelter transaction at any time during the tax year? 39 b If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 30 c If "Yes," to line 5a or 5b, did the organization final it was or is a party to a prohibited tax shelter transaction? 30 c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 30 c If "Yes," to line 5a or 5b, did the organization include with every solicitation an express statement than \$100,000, and did the organization solicit any contributions that were not tax deductibles contributions? 30 c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles? 31 c A Y 32 c A Y 33 c A Y 34 c A Y 35 c A Y 36 c A Y 37 c A Y 38 c A Y 39 c A Y 39 c A Y 30 c A Y 31 c A Y 32 c A Y 33 c A Y 34 c A Y 35 c A Y 36 c A Y 37 c A Y 38 c A Y 39 c A Y 39 c A Y 30	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
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c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 76			vices p	rovided to the payor?			
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d if "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand	С		as requ	iirea	7.		v
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organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c							
c Enter the amount of reserves on hand	b		 				
			13c		4.6		X
3 7 7					14a		
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	a	ir "yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	e ()			990	(2016)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 21 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 21 **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? Х 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c in Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х Did the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official Х 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶MD Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Another's website X Upon request ___ Other (explain in Schedule O) Own website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: SUSAN GOERING - 410-889-8550

Form **990** (2016)

3600 CLIPPER MILL ROAD #350, BALTIMORE.

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per	(do box	not c	Pos heck	ition	than o	one n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer Officer	Key employee	Highest compensated snat-		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) COLEMAN BAZELON	1.00			,,					^	0
PRESIDENT	1 00	Х		Х				0.	0.	0.
(2) STEPHANIE JOSEPH	1.00	.,		,,					_	0
VICE PRESIDENT	1 00	Х		Х				0.	0.	0.
(3) JEFFREY MILLER TREASURER	1.00	Х		х				0.	0.	0.
(4) WALAKEWON BLEGAY	1.00									
SECRETARY		Х		Х				0.	0.	0.
(5) DAVIS BOBROW	1.00									_
DIRECTOR		Х						0.	0.	0.
(6) EMRIED COLE, JR.	1.00									
DIRECTOR		Х						0.	0.	0.
(7) ROLAND DANIELS	1.00									
DIRECTOR		Х						0.	0.	0.
(8) AARON DEGRAFFENREIDT	1.00									
DIRECTOR		Х						0.	0.	0.
(9) BRETT FELTER	1.00									
AFFIRMATIVE ACTION OFFICER		Х		Х				0.	0.	0.
(10) DOREEN GETSINGER	1.00									
DIRECTOR		Х						0.	0.	0.
(11) SALLY GRANT	1.00									
DIRECTOR		Х						0.	0.	0.
(12) JOHN HENDERSON	1.00	1								
DIRECTOR		Х						0.	0.	0.
(13) GARLAND NIXON	1.00	ļ								_
DIRECTOR	1 22	Х						0.	0.	0.
(14) AJMEL QUERESHI	1.00	 								_
DIRECTOR	1 00	Х						0.	0.	0.
(15) JOHN SONDHEIM	1.00								_	_
DIRECTOR	1 00	Х	_		_	_		0.	0.	0.
(16) JESSICA WEBER	1.00	٠,							_	_
DIRECTOR	1 00	Х				_		0.	0.	0.
(17) SANA JAVED	1.00	3,7							_	_
DIRECTOR		X			l			0.	0.	0.

632007 11-11-16

Form **990** (2016)

Part VII Section A. Officers, Directors, Trus		oloy	ees,			ghes	st C		,				
(A)	(B) (C) Average Position					,		(D)	(E)			(F)	
Name and title	Average hours per		not c	heck	more	than		Reportable	Reportable		l .	timate	
	week					is botl or/trus		compensation from	compensation from related		i an	nount other	
	(list any	tor						the	organizations		com	pensa	
	hours for	director				D.		organization	(W-2/1099-MISC	C)	l	om th	
	related	tee or	ustee			ensate		(W-2/1099-MISC)	•	·	org	anizat	ion
	organizations	lltrus	nal tr		oyee	d woo					an	d relat	ed
	below line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	anizati	ons
/10 LOUDDEG MONTEG GREENAN	1.00	Pu.	l s	#0	Ke	E E	For				<u> </u>		
(18) LOURDES MONTES-GREENAN DIRECTOR	1.00	х						0.		0.			0.
(19) ERIC S. GILLMAN	1.00					\vdash				٠.			<u> </u>
DIRECTOR	1.00	х						0.		0.			0.
(20) HOMAYRA ZIAD	1.00	<u></u>				H				-			
DIRECTOR		Х						0.		0.			0.
(21) SARA MOVAHED	1.00												
DIRECTOR		Х						0.		0.	1		0.
(22) SUSAN GOERING	60.00												
EXECUTIVE DIRECTOR				Х				108,035.		0.	3	4,0	11.
(23) DONNELL SCOTT	50.00]											
FINANCE DIRECTOR		<u> </u>		Х				59,015.		0.	1	4,4	<u> 19.</u>
(24) DEBORAH JEON	50.00	1								_			
LEGAL DIRECTOR	60.00			Х	_	├		94,902.		0.	2	9,8	25.
(25) BEVERLY VERDERY	60.00	-		٦,				106 277		^	1	4 0	0.5
EDUCATION REFORM PROGRAM D				Х		-		106,277.		0.	<u> </u>	4,8	00.
		1											
1h Sub-total		<u> </u>			<u> </u>	<u> </u>		368,229.		0.	9	3,1	40.
1b Sub-total c Total from continuation sheets to Part VI	I Section A							0.		0.		- , -	0.
d Total (add lines 1b and 1c)								368,229.		0.	9	3,1	
2 Total number of individuals (including but n							o re	· · · · · · · · · · · · · · · · · · ·	000 of reportable			•	
compensation from the organization						,		,	,				2
												Yes	No
3 Did the organization list any former officer,	director, or tru	uste	e, ke	y en	nplo	yee,	or I	highest compensated er	nployee on				
line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	J f	or such individual			4		X
5 Did any person listed on line 1a receive or a	•				,			•					
rendered to the organization? If "Yes," com	plete Schedul	e J f	or su	ıch ı	pers	on					5		X
Section B. Independent Contractors		1					41	t : t t	1100 000 - 1				
Complete this table for your five highest co the organization. Report compensation for	•	•							,	ensa	tion tro	om	
(A)	trie caleridar ye	ear e	riuii	ig w	/ILIT C	ואי וכ	<u> </u>	(B)	ear.		(0	·)	
Name and business address NONE								Description of s	ervices	С	Compe		n
							\dashv						

Form **990** (2016)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (**D)** Revenue excluded from tax under (B) (C) Unrelated Total revenue Related or exempt function business sections 512 - 514 revenue revenue 1 a Federated campaigns Contributions, Gifts, Grants and Other Similar Amounts **b** Membership dues c Fundraising events d Related organizations e Government grants (contributions) **f** All other contributions, gifts, grants, and similar amounts not included above 1f 1,858,94096,383. g Noncash contributions included in lines 1a-1f: \$ 1,858,940. h Total. Add lines 1a-1f **Business Code** 75,600. 2 a ATTORNEY FEES 900099 75,600 Program Service b SPEAKING FEES 900099 4,401. 4,401. Revenue С f All other program service revenue 80,001. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 44,921 44,921 other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses c Rental income or (loss) **d** Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a **b** Less: direct expenses **c** Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a b d All other revenue e Total. Add lines 11a-11d **▶** 1,983,862. 80,001 44,921. Total revenue. See instructions.

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b or Par VIVI Total expenses Program service Program servi	Sect	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons		•	nplete column (A).	
and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current orificers, directors, trustees, and key employees Compensation of current orificers, directors, trustees, and key employees Compensation of current orificers, directors, trustees, and key employees Compensation of current orificers, directors, trustees, and key employees Compensation of current orificers, directors, trustees, and key employees Persion plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes 118, 458. 11		not include amounts reported on lines 6b,	(A)	(B) Program service	Management and	(D) Fundraising expenses
2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under scient on 4958(c)(3)(B) 7 Other salaries and wages 9 Pension plan acruals and contributions (include section 401(k), and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): 11 Fees for services (non-employees): 12 Advantaling and promotion 15 Legal 2, 796. 2, 796. 16 Lobbying 25, 394. 20, 283. 2, 479. 2, 6 17 Investment management fees 9 Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 17 Travel 10 Coupancy 209, 945. 167, 687. 20, 496. 21, 777. Travel 11 Payments to affiliates 19 Conferences, conventions, and meetings 10 Interest 20 Depreciation, depletion, and amortization 21 payments to affiliates 20 Depreciation, depletion, and amortization 21 payments to affiliates 21 Payments to affiliates 22 Depreciation, depletion, and amortization 21 payments to affiliates 24 expenses on Schotlu C) a TELEPHONE AND COMMUNICOA 44, 792. 35, 776. 4, 373. 4, 6 DIJES AND SUBSCRIPTIONS 10 Advance in a control of control of control of control of the Coupancy 24, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20	1	Grants and other assistance to domestic organizations				·
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3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16 . 4 Benefits paid to or for members . 5 Compensation of current orficers, directors, trustees, and key employees	2	Grants and other assistance to domestic				
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					2,3134	1,010
J 1					682.	724.
						286.
e All other expenses			2,,02.	2,200.	270	200•
			2,359,536.	1,889,660.	222.089.	247,787.
26 Joint costs. Complete this line only if the organization			_, ,	_, _ , _ , _ , _ , _ ,		,
reported in column (B) joint costs from a combined		, , ,				
educational campaign and fundraising solicitation.						
Check here ▶ if following SOP 98-2 (ASC 958-720)		. —				

Form **990** (2016)

<u>Par</u>	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to any	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			386,738.	1	216,651.
	2	Savings and temporary cash investments			426,081.	2	427,068.
	3	Pledges and grants receivable, net			550,000.	3	460,000.
	4	Accounts receivable, net				4	702,032.
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensa	ited em	plovees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquality					
		section 4958(f)(1)), persons described in section	•	,			
		employers and sponsoring organizations of sect	•	/ · / · / ·			
ß		employees' beneficiary organizations (see instr).				6	
Assets	7	Notes and loans receivable, net				7	
Ass	8	Inventories for sale or use				8	
	9	B			8,838.	9	14,620.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	85,520.			
	b	Less: accumulated depreciation	10b	44,852.	53,623.	10c	40,668.
	11	Investments - publicly traded securities			53,623. 2,642,862.	11	40,668.
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			9,510.	15	9,510.
	16	Total assets. Add lines 1 through 15 (must equal			4,077,652.	16	3,879,287.
	17	Accounts payable and accrued expenses			369,336.	17	377,290.
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I				21	
ģ	22	Loans and other payables to current and former	officers	s, directors, trustees,			
litie		key employees, highest compensated employee	s, and	disqualified persons.			
Liabilities		Complete Part II of Schedule L				22	
ן כ	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated	third p	parties		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	17-24)	. Complete Part X of			
		Schedule D			32,573.	25	32,303. 409,593.
	26	Total liabilities. Add lines 17 through 25			401,909.	26	409,593.
		Organizations that follow SFAS 117 (ASC 958		k here ▶ X and			
es		complete lines 27 through 29, and lines 33 an			0 405 000		0 510 406
ů.	27	Unrestricted net assets			2,487,993.	27	2,518,406. 951,288.
3ala	28			·····	1,187,750.	28	951,288.
힏	29					29	
ᆵ		Organizations that do not follow SFAS 117 (A	SC 958), check here			
٥		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or ed				31	
et	32	Retained earnings, endowment, accumulated in			2 675 742	32	2 460 604
_	33	Total net assets or fund balances			3,675,743.	33	3,469,694.
	34	Total liabilities and net assets/fund balances			4,077,652.	34	3,879,287.

Form **990** (2016)

	1930 (2010) 11920 1 001(2111101(01 111111111112) 11101		, _ 0 , 0		ı u	<u>gc</u>
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1				62.
2	Total expenses (must equal Part IX, column (A), line 25)	2				36.
3	Revenue less expenses. Subtract line 2 from line 1	3				74.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,			43.
5	Net unrealized gains (losses) on investments	5		16	9,6	25.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	3,	46	9,6	94.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		[
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.	_			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate					
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin		it			
	Act and OMB Circular A-133?	-		За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audi	t			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization **Employer identification number** ACLU FOUNDATION OF MARYLAND, 23-7209538 INC. Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
	etion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4						
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	•	,			12	
13	First five years. If the Form 990 is for	· ·			•	. , . ,	. —
Sec	organization, check this box and stop	c Support Per	rcentage				P
	Public support percentage for 2016 (li	•••		oolumn (f))		14	0/
	Public support percentage from 2015	, ,,	•	.,,		15	<u>%</u>
	33 1/3% support test - 2016. If the o						
100	stop here. The organization qualifies a						. .
b	33 1/3% support test - 2015. If the o		•				
~	and stop here. The organization quali	-					
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fact	-	-				
	meets the "facts-and-circumstances" t			=	=	-	
b	10% -facts-and-circumstances test						
	more, and if the organization meets th	-	-				
	organization meets the "facts-and-circ						>
18	Private foundation. If the organization	n did not check a	box on line 13, 16	sa, 16b, 17a, or 17l	b, check this box a	and see instruction	s >
					Sch	edule A (Form 990	or 990-EZ) 2016

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

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

Sed	ction A. Public Support	, = ==://p					
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	1570464.	1740181.	1938867.	1656351.	1858940.	8764803.
	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	719,034.	605,127.	2186910.	520,250.	75,600.	4106921.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	2289498.	2345308.	4125777.	2176601.	1934540.	12871724.
7 <i>a</i>	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c	Add lines 7a and 7b						0.
	Public support. (Subtract line 7c from line 6.)						12871724.
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 6	2289498.	2345308.	4125777.	2176601.	1934540.	12871724.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	27,199.	24,085.	44,863.	57,994.		199,062.
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	27,199.	24,085.	44,863.	57,994.	44,921.	199,062.
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1. 2316698.	25. 2369418.	200. 4170840.	228. 2234823.	4,401.	4,855.
	Total support. (Add lines 9, 10c, 11, and 12.)						13075641.
14	First five years. If the Form 990 is for	· ·			•		auon,
Sec	check this box and stop here ction C. Computation of Publi	c Support Per			***************************************		P
	Public support percentage for 2016 (li			olumn (fl)		15	98.44 %
	Public support percentage from 2015					16	98.53 %
_	ction D. Computation of Inves					- 1	- 70
17	Investment income percentage for 20	16 (line 10c, colun	nn (f) divided by lin	e 13, column (f))		17	1.52 %
	Investment income percentage from 2					18	1.46 %
	33 1/3% support tests - 2016. If the					3 1/3%, and line 1	
	more than 33 1/3%, check this box ar						
b	33 1/3% support tests - 2015. If the line 18 is not more than 33 1/3%, che						
	mile to is not more than 33 1/3%, che	CK (1115 DOX 8110 S1	op nere. The orga	unzauon quaimes a	as a publicly suppo	nteu organization	~

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Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	•		
	2		
	3a		
	3b		
	3c		
	4a		
	48		
	4b		
	1,12		
	4c		
	5a		
	- 1-		
	5b		_
	5c		
	6		
	7		
	8		
	00		
	9a		
	9b		
	9с		
	10a		
	10b		
_		O E71	0040

Pai	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	а		
b	A family member of a person described in (a) above?	b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	С		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.			
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).			
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).			
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard			
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction	ns)		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.			
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
-	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	,		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
-	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>			
b				
~	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	,		

Pa	Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organ	izations	10 / 10 / 10 / 10 / 10 / 10 / 10 / 10 /
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on I	Nov. 20, 1970 (explain in F	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must c	omplete Se	ctions A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrate	ed Type III supporting orga	nization (see
	instructions).			•

Schedule A (Form 990 or 990-EZ) 2016

Par	rt V │ Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)	
Secti	ion D - Distributions		,	Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	he organization is responsive		
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	T	Τ	
		(i) Excess Distributions	(ii) Underdistributions	(iii) Distributable
Secti	ion E - Distribution Allocations (see instructions)		Pre-2016	Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013			
d	From 2014			
е	From 2015			
f_	Total of lines 3a through e			
<u>g</u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2016 distributable amount			
<u>_i</u>	Carryover from 2011 not applied (see instructions)			
<u>_i</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
6	than zero, explain in Part VI. See instructions			
0	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
7	Part VI. See instructions Excess distributions carryover to 2017. Add lines 3j			
•	and 4c			
8	Breakdown of line 7:			
<u>-</u> а				
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ.

Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2016

OMB No. 1545-0047

Open to Public Inspection

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

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

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

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

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

Tax) (see separate instructions), then				
	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.			
Nan	ne of organization				mployer identification number
_	ACLU FO	UNDATION OF MARYL	AND, INC.		23-7209538
Pa	art I-A Complete if the org	anization is exempt under	section 501(c) or	r is a section 527	organization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures		1	
Pa	art I-B Complete if the org	anization is exempt under	section 501(c)(3)).	
1	Enter the amount of any excise tax	incurred by the organization under	section 4955		> \$
2	Enter the amount of any excise tax	incurred by organization managers			
	If the organization incurred a sectio				
	Was a correction made?				
	If "Yes." describe in Part IV.				
Pa	art I-C Complete if the org	anization is exempt under	section 501(c), e	except section 50	1(c)(3).
1	Enter the amount directly expended	by the filing organization for secti	on 527 exempt functio	n activitiesl	> \$
2	Enter the amount of the filing organ	ization's funds contributed to othe	r organizations for sec	tion 527	
	exempt function activities				> \$
3	Total exempt function expenditures	. Add lines 1 and 2. Enter here and	d on Form 1120-POL,		
	line 17b				> \$
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5	Enter the names, addresses and en	nployer identification number (EIN)	of all section 527 polit	ical organizations to w	hich the filing organization
	made payments. For each organization	tion listed, enter the amount paid f	rom the filing organiza	tion's funds. Also ente	r the amount of political
	contributions received that were pro				arate segregated fund or a
	political action committee (PAC). If	additional space is needed, provid	e information in Part IV	<u>/. </u>	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro filing organization' funds. If none, enter	s contributions received and

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

Schedule C (Form 990 or 990-EZ) 2016

LHA

632041 11-10-16

Schedule C (Form 990 or 990-EZ) 2016	ACIJI FOIINDA	ФТОМ ОЕ М АРУ	VI.AND TNC	23-7	209538 Page 2			
Part II-A Complete if the org section 501(h)).	anization is exer	npt under section	501(c)(3) and file	d Form 5768 (ele	ction under			
	tion belongs to an affi	liated group (and list in	Part IV each affiliated	group member's name	address FIN			
	re of excess lobbying		Ture to odom animatou	group momber o name	, add 655, E111,			
. — ' '	, 0	nd "limited control" pro	visions apply.					
Limi	ts on Lobbying Expe			(a) Filing organization's totals	(b) Affiliated group totals			
1a Total lobbying expenditures to influ	uence public opinion (grass roots lobbying)		16,776.				
b Total lobbying expenditures to influ				34,618.				
c Total lobbying expenditures (add li	•			51,394.				
d Other exempt purpose expenditure				2,320,587.				
	Total exempt purpose expenditures (add lines 1c and 1d)							
f Lobbying nontaxable amount. Ente	2,371,981. 268,599.							
If the amount on line 1e, column (a) o		bying nontaxable am						
Not over \$500,000								
Over \$500,000 but not over \$1,000	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000.							
Over \$1,000,000 but not over \$1,5	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.							
Over \$1,500,000 but not over \$17,	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.							
Over \$17,000,000								
g Grassroots nontaxable amount (en	ter 25% of line 1f)			67,150.				
h Subtract line 1g from line 1a. If zer	o or less, enter -0-			0.				
i Subtract line 1f from line 1c. If zero	o or less, enter -0			0.				
j If there is an amount other than ze	ro on either line 1h or	line 1i, did the organiza	ation file Form 4720	_				
reporting section 4911 tax for this	year?				Yes No			
(Some organizations the	nat made a section 5 See the separ	ate instructions for lin	nave to complete all ones 2a through 2f.)	of the five columns be	elow.			
	Lobbying Expe	nditures During 4-Yea	r Averaging Period		Т			
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total			
2a Lobbying nontaxable amount	272,190.	273,841.	272,433.	268,599.	1,087,063.			
b Lobbying ceiling amount (150% of line 2a, column(e))					1,630,595.			
c Total lobbying expenditures	104,350.	120,871.	73,215.	51,394.	349,830.			
d Grassroots nontaxable amount	68,048.	68,461.	68,108.	67,150.	271,767.			

Schedule C (Form 990 or 990-EZ) 2016

16,776.

407,651.

61,047.

18,824.

15,916.

9,531.

e Grassroots ceiling amount

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2016 ACLU FOUNDATION OF MARYLAND, INC. 23-72095 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line answered "Yes."	ing the year, did the filing organization attempt to influence foreign, national, state or al legislation, including any attempt to influence public opinion on a legislative matter eferendum, through the use of: unteers? did a dstaff or management (include compensation in expenses reported on lines 1c through 1i)? did advertisements? lilings to members, legislators, or the public? lolications, or published or broadcast statements? lilings to members, legislators, or the public? lolications, or published or broadcast statements? lilings to members, legislators, their staffs, government officials, or a legislative body? lies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? les demonstrations, seminars, conventions, speeches, lectures, or any similar means? les demonstrations, seminars, conventions, speeches, lectures, or any similar means? les demonstrations in line 1 cause the organization to be not described in section 501(c)(3)? les, demonstrations in line 1 cause the organization to be not described in section 501(c)(3)? les, demonstrations in line 1 cause the organization managers under section 4912 les filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Sol1(c)(6). Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." Sol (c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." Longe of the organization of the section 527(f) tax was paid). The remaining of the section 527(f) tax was paid). The remaining of the section 527(f) tax was paid). The remaining of the section 527(f) tax was paid). The remaining of the section 527(f) tax was paid).	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local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. 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Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(8)? b If "Yes," enter the amount of any tax incurred under section 4912 d If the filing organization incurred a section 4912 tax, did If lile Form 4720 for this year? 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The part of the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c	or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. 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does the organization agree to carryover to the reasonable estimate of pendeductible labbying and political		Taxable amount of lobbying and political expenditures (see instructions) To it IV Supplemental Information Supplemental Information Find the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see	Were substantially all (90% of Did the organization make of Did the organization agree to the substantially all (90% of Did the organization agree to the substantial that is answered "Yes Dues, assessments and similar Section 162(e) nondeductible expenses for which the second Current year Carryover from last year Total Aggregate amount reported	nly in-house lobbying expenditures of \$2,000 or less? o carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section the either (a) BOTH Part III-A, lines 1 and 2, are answere so." lar amounts from members the lobbying and political expenditures (do not include amounts of position 527(f) tax was paid). in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	the prior year? ion 501(c)(5 d "No," OR	2 3 3), or sec (b) Part	etion	
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	otices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	Supplemental Information vide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see	Solic)(6). Were substantially all (90% of Did the organization make of Did the organization agree to Cart III-B Complete if the Solic)(6) and if answered "Yest Dues, assessments and similar Section 162(e) nondeductible expenses for which the section 162(e) represents the Carryover from last year to Carryover from last year to Total Aggregate amount reported If notices were sent and the	nly in-house lobbying expenditures of \$2,000 or less? coarry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section the companization is exempt under section 501(c)(4), section to an exempt under section 501(c)(4), section to an exempt under section to an e	the prior year? ion 501(c)(5 d "No," OR	2 3 3), or sec (b) Part	etion	
	otices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess es the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see	Were substantially all (90% of Did the organization make of Did the organization agree to art III-B Complete if the 501(c)(6) and if answered "Yes Dues, assessments and similar Section 162(e) nondeductible expenses for which the sec a Current year b Carryover from last year c Total Aggregate amount reported If notices were sent and the does the organization agree	nly in-house lobbying expenditures of \$2,000 or less? be carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 101(c)(4), sect	the prior year? ion 501(c)(5 d "No," OR litical	2 3 3), or sec (b) Part	etion	
expenditure next year?	otices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess es the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political penditure next year?		Were substantially all (90% of Did the organization make of Did the organization agree to art III-B Complete if the 501(c)(6) and if answered "Yes Dues, assessments and similar Section 162(e) nondeductible expenses for which the sec a Current year b Carryover from last year c Total Aggregate amount reported If notices were sent and the does the organization agree expenditure next year?	nly in-house lobbying expenditures of \$2,000 or less? c carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section the first that the control of	the prior year? ion 501(c)(5 d "No," OR litical	2 3 3), or sec (b) Part	etion	
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expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Cart IV Supplemental Information	obtices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess set the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political penditure next year? 4 sable amount of lobbying and political expenditures (see instructions) 5 Supplemental Information	structions), and Part II-B, line 1. Also, complete this part for any additional information.	501(c)(6). 1 Were substantially all (90% of 2 Did the organization make of 3 Did the organization agree to 2 Did the organization agree to 2 Did the organization agree to 3 Did the organization agree to 4 Did the organization agree to 2 Did the organization agree to 2 Did the organization agree to 2 Did the organization agree expenditure next year? 5 Taxable amount of lobbying 2 Did the organization agree or 2 Did the organization agree oxpenditure next year? 5 Taxable amount of lobbying 2 Did the organization agree oxpenditure next year?	nly in-house lobbying expenditures of \$2,000 or less? coarry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section to a section is exempt under section 501(c)(4), section to a section is exempt under section 501(c)(4), section to a s	the prior year? ion 501(c)(5 d "No," OR litical	2 3 3 5), or sec (b) Part 2 2 2 2 2 3 3 4 5 5	tion III-A, line	
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expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5 Supplemental Information rovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see	ortices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess set the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political penditure next year? A Supplemental Information		501(c)(6). 1 Were substantially all (90% of 2 Did the organization make of 3 Did the organization agree to 2 Total 2 Section 162(e) nondeductible expenses for which the s	nly in-house lobbying expenditures of \$2,000 or less? o carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 101(c)(4), secti	the prior year? ion 501(c)(5 d "No," OR litical	2 3 3 5), or sec (b) Part 2 2 2 2 2 3 3 4 5 5	tion III-A, line	
expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5 Part IV Supplemental Information	ortices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess set the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political penditure next year? (able amount of lobbying and political expenditures (see instructions) Supplemental Information The descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see		1 Were substantially all (90% of 2 Did the organization make of 3 Did the organization agree to 2 Did the organization agree to 2 Did the organization agree to 3 Did the organization agree to 4 Did the organization agree to 501(c)(6) and if answered "Yest 1 Dues, assessments and siming 2 Section 162(e) nondeductible expenses for which the sect a Current year box Carryover from last year control of 1 Did to 2 Did to 3 Did to 4 Did to 4 Did to 4 Did to 5 Did to 6 Did t	nly in-house lobbying expenditures of \$2,000 or less? o carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 101(c)(4), secti	the prior year? ion 501(c)(5 d "No," OR litical	2 3 3 5), or sec (b) Part 2 2 2 2 2 3 3 4 5 5	tion III-A, line	

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

ACLU FOUNDATION OF MARYLAND, INC.

Employer identification number 23-7209538

Par	t I Organizations Maintaining Donor Advised	Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	_	
	are the organization's property, subject to the organization's ex		
6	Did the organization inform all grantees, donors, and donor ad	visors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose	
Da			
Par			Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or ed	. —	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	ed conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а			
b	, , , , , , , , , , , , , , , , , , , ,		
С	Number of conservation easements on a certified historic structure.		
d	Number of conservation easements included in (c) acquired aff		
_	listed in the National Register		
3	Number of conservation easements modified, transferred, release	ased, extinguished, or terminated by the	e organization during the tax
4	year ▶ Number of states where property subject to conservation ease	ement is legated	
5	Does the organization have a written policy regarding the period	· · · · · · · · · · · · · · · · · · ·	
3	violations, and enforcement of the conservation easements it h		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h		
Ū	b	and ing of violations, and officioning con-	servation easements daring the year
7	Amount of expenses incurred in monitoring, inspecting, handli	ng of violations, and enforcing conserva	ition easements during the year
-	▶ \$		men cacements adming 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)?		
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	·	
	conservation easements.		ğ ç
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Form S	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC	958), not to report in its revenue stater	nent and balance sheet works of art,
	historical treasures, or other similar assets held for public exhil	bition, education, or research in furthera	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describe	es these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC	958), to report in its revenue statement	t and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edu	ucation, or research in furtherance of pu	blic service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
			L .
2	If the organization received or held works of art, historical treas	sures, or other similar assets for financia	
	the following amounts required to be reported under SFAS 116	6 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		

632051 08-29-16

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		85,520.	44,852.	40,668.
e Other				
Total. Add lines 1a through 1e. (Column (d) must eq		mn (B). line 10c.)		40,668.

2016 ACLU FOUND

	Complete if the organization answered "Yes"	on Form 990 Part IV	ine 11b See Form 990	Part X line 12	
a) Descript	tion of security or category (including name of security)	(b) Book value			nd-of-year market value
	ll derivatives	(1)	(,,		, , , , , , , , , , , , , , , , , , ,
	hald an Shakaraka				
Other	neid equity interests				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H))				
tai. (601. (8 Part VIII	n) must equal Form 990, Part X, col. (B) line 12.) Investments - Program Related.				
art VIII	_				
	Complete if the organization answered "Yes" (a) Description of investment	(b) Book value			nd-of-year market value
	(a) Description of investment	(b) book value	(C) Metriod or v	aluation. Cost or el	nu-or-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
otal. (Col. (b	n) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Accete				
artix	Other Assets.				
artix	Complete if the organization answered "Yes"		ine 11d. See Form 990,	Part X, line 15.	
art IX	Complete if the organization answered "Yes"	on Form 990, Part IV, Description	ine 11d. See Form 990,	Part X, line 15.	(b) Book value
(1)	Complete if the organization answered "Yes"		ine 11d. See Form 990,	Part X, line 15.	(b) Book value
	Complete if the organization answered "Yes"		ine 11d. See Form 990,	Part X, line 15.	(b) Book value
(1)	Complete if the organization answered "Yes"		ine 11d. See Form 990,	Part X, line 15.	(b) Book value
(1)	Complete if the organization answered "Yes"		ine 11d. See Form 990,	Part X, line 15.	(b) Book value
(1) (2) (3)	Complete if the organization answered "Yes"		ine 11d. See Form 990,	Part X, line 15.	(b) Book value
(1) (2) (3) (4)	Complete if the organization answered "Yes"		ine 11d. See Form 990,	Part X, line 15.	(b) Book value
(1) (2) (3) (4) (5)	Complete if the organization answered "Yes"		ine 11d. See Form 990,	Part X, line 15.	(b) Book value
(1) (2) (3) (4) (5) (6)	Complete if the organization answered "Yes"		ine 11d. See Form 990,	Part X, line 15.	(b) Book value
(1) (2) (3) (4) (5) (6) (7)	Complete if the organization answered "Yes"		ine 11d. See Form 990,	Part X, line 15.	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization answered "Yes" (a)	Description	ine 11d. See Form 990,	Part X, line 15.	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization answered "Yes"	Description	ine 11d. See Form 990,	Part X, line 15.	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Colum	Complete if the organization answered "Yes" (a) (a) (b) must equal Form 990, Part X, col. (B) line Other Liabilities.	Description			
(1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Colum	Complete if the organization answered "Yes" (a) (a)	Description			
(1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Colum	Complete if the organization answered "Yes" (a) mn (b) must equal Form 990. Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description	ine 11e or 11f. See Form		
(1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Columnation X	Complete if the organization answered "Yes" (a) mn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability eral income taxes	Description	ine 11e or 11f. See Form (b) Book value		
(1) (2) (3) (4) (5) (6) (7) (8) (9) Otal. (Columno Part X	Complete if the organization answered "Yes" (a) mn (b) must equal Form 990. Part X. col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability eral income taxes	Description 2.15.) on Form 990, Part IV,	ine 11e or 11f. See Form		
(1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column X) (1) Feeder (2) DU	Complete if the organization answered "Yes" (a) mn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability eral income taxes	Description 2.15.) on Form 990, Part IV,	ine 11e or 11f. See Form (b) Book value		
(1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Columnor X) (1) Fedde (2) DUI (3) (4)	Complete if the organization answered "Yes" (a) mn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability eral income taxes	Description 2.15.) on Form 990, Part IV,	ine 11e or 11f. See Form (b) Book value		
(1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Columnation X) (1) Fedda (2) DU: (3) (4) (5)	Complete if the organization answered "Yes" (a) mn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability eral income taxes	Description 2.15.) on Form 990, Part IV,	ine 11e or 11f. See Form (b) Book value		
(1) (2) (3) (4) (5) (6) (7) (8) (9) Otal. (Column Part X (1) Fede (2) DU (3) (4) (5) (6)	Complete if the organization answered "Yes" (a) mn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability eral income taxes	Description 2.15.) on Form 990, Part IV,	ine 11e or 11f. See Form (b) Book value		
(1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Colur Part X (1) Fede (2) DU (3) (4) (5) (6) (7)	Complete if the organization answered "Yes" (a) mn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability eral income taxes	Description 2.15.) on Form 990, Part IV,	ine 11e or 11f. See Form (b) Book value		
(1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Columnary) (2) DUI (3) (4) (5) (6) (7) (8)	Complete if the organization answered "Yes" (a) mn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability eral income taxes	Description 2.15.) on Form 990, Part IV,	ine 11e or 11f. See Form (b) Book value		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (1) Fedde (2) DU (3) (4) (5) (6) (7) (8) (9)	Complete if the organization answered "Yes" (a) mn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability eral income taxes	Description 2 15.) on Form 990, Part IV,	ine 11e or 11f. See Form (b) Book value		

Pa	Reconciliation of Revenue per Audited Financial Sta	itements witi	i Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.			
1	Total revenue, gains, and other support per audited financial statements			1	3,291,812.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	, ,			
а	Net unrealized gains (losses) on investments	2a	169,625.		
b	Donated services and use of facilities	2b	1,138,325.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	1,307,950.
3	Subtract line 2e from line 1			3	1,983,862.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		_	
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	2.)		5	1,983,862.
Pa	rt XII Reconciliation of Expenses per Audited Financial St		th Expenses per I	Returi	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.			
1	Total expenses and losses per audited financial statements			1	3,497,861.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1			
а	Donated services and use of facilities	2a	1,138,325.	_	
b	Prior year adjustments	2b		_	
С	Other losses	2c		_	
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	1,138,325.
3	Subtract line 2e from line 1			3	2,359,536.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part VIII.)				
	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	<u>0.</u> 2,359,536.

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE ORGANIZATION ANALYZES TAX POSITIONS TAKEN, INCLUDING THOSE RELATED TO THE REQUIREMENTS SET FORTH IN IRC SEC. 501(C) TO QUALIFY AS A TAX EXEMPT ORGANIZATION, ACTIVITIES PERFORMED BY VOLUNTEERS AND BOARD MEMBERS, REPORTING OF UNRELATED BUSINESS INCOME, AND ITS STATUS AS A TAX-EXEMPT ORGANIZATION UNDER MARYLAND STATE STATUTE. THE ORGANIZATION DOES NOT KNOW OF ANY TAX BENEFITS ARISING FROM UNCERTAIN TAX POSITIONS ARE THERE WAS NO EFFECT ON THE ORGANIZATION'S FINANCIAL POSITION OR CHANGES IN NET ASSETS AS A RESULT OF ANALYZING ITS TAX POSITIONS. FISCAL YEARS ENDING ON OR AFTER MARCH 31, 2014 REMAIN SUBJECT TO EXAMINATION BY FEDERAL AND STATE AUTHORITIES.

Schedule D (Form 990) 2016	ACLU	FOUNDATION	OF	MARYLAND,	INC.	23-7209538	Page 5
Schedule D (Form 990) 2016 Part XIII Supplemental Inform	mation	(continued)					
		,					

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

ACLU FOUNDATION OF MARYLAND, INC. **Employer identification number** 23-7209538

Par	ti Typ	es of Property								
			(a) Check if applicable	(b) Number of contributions or	(c) Noncash contribut amounts reported			(d) d of determi ontribution a	_	
				items contributed	Form 990, Part VIII, I	<u>ne 1g</u>				
1		of art								
2		cal treasures	I							
3	Art - Fractio	nal interests								
4	Books and	oublications								
5	Clothing and	d household goods								
6	Cars and ot	her vehicles								
7	Boats and p	olanes								
8	Intellectual									
9	Securities -	Publicly traded	Х	5	96,3	83.				
10		Closely held stock								
11		Partnership, LLC, or								
	trust interes	ts								
12	Securities -	Miscellaneous								
13		nservation contribution -								
	Historic stru	ictures								
14		nservation contribution - Other								
15		- Residential								
16		- Commercial								
17		- Other	I							
18										
19		ory								
20		nedical supplies								
21										
22		tifacts								
23		pecimens								
24		al artifacts								
2 5		(LEGAL	X	147		0 -	DONATED	HOITES	ттмі	 2.S
26		(· / 	1 1 1		•	DOMATED	110010	1 1111	<u> </u>
	Other									
27		(·							
28	Other •	Tarma 2000 received by the are)	the tay year for a	entributions	\top				
29		Forms 8283 received by the org e organization completed Form	,							
	IOI WITICIT III	e organization completed Form	1 0203, Part IV, I	Donee Acknowledg	jernent	9			Voc	No
20-	During the	year did the every justion vession	ra bur aantribustia	n any nyanasty yan	artad in Dart Llinaa 1	th vo o	sh 00 that it		Yes	No
30a		rear, did the organization receivers at least three years from the								
		or at least three years from the		•	•			00-		Х
		poses for the entire holding per						30a		$\overline{}$
		scribe the arrangement in Part l ganization have a gift acceptan		auiroo tha ravia	of any nanatandard as	المانيون	tions?	6.1		X
31								31		
32a	contribution	ganization hire or use third part is?		_	· ·			32a		X
b	If "Yes," des	scribe in Part II.								
33	If the organi	zation didn't report an amount	in column (c) for	a type of property	for which column (a)	is che	cked,			
	describe in	Part II.								
I HA	For Pape	rwork Reduction Act Notice.	see the Instruct	tions for Form 990).		Sched	lule M (Forn	n 990) (2016)

632142 08-23-16

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

16 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Employer identification number 23-7209538 ACLU FOUNDATION OF MARYLAND, INC. FORM 990, PART LINE 1, DESCRIPTION OF ORGANIZATION MISSION: AND SPEAK AS THEY CHOOSE AND CAN LEAD THEIR LIVES FREE FROM DISCRIMINATION AND UNWARRANTED GOVERNMENT INTRUSION. FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS ARE ENTITLED TO ELECT THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION A, LINE 7B: DECISIONS ARE MADE BY THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION B, LINE 11B: THE 990 IS REVIEWED AND APPROVED BY THE EXECUTIVE DIRECTOR AND DESIGNATED MEMBERS OF THE ORGANIZATION'S BUDGET AND FINANCE COMMITTEE OF THE GOVERNING

FORM 990, PART VI, SECTION B, LINE 12C:

GOVERNING BODY FOR REVIEW PRIOR TO FILING.

MEMBERS OF THE BOARD OF DIRECTORS AND KEY EMPLOYEES ARE PROVIDED WITH A COPY OF THE CONFLICT OF INTEREST POLICY AND REQUESTED TO COMPLETE AND SIGN AND RETURN TO THE EXECUTIVE DIRECTOR A COPY OF APPENDIX A OF THE POLICY ANNUALLY. EACH INDIVIDUAL IS UNDER A CONTINUING OBLIGATION TO DISCLOSE ANY POTENTIAL CONFLICT OF INTEREST THAT ARISES DURING THE COURSE OF THE YEAR TO THE PRESIDENT OF THE BOARD OF DIRECTORS.

BODY AND A COPY IS DISTRIBUTED ELECTRONICALLY TO ALL MEMBERS OF THE

FORM 990, PART VI, SECTION B, LINE 15:

THE EXECUTIVE COMMITTEE AND THE BOARD REVIEWS AVAILABLE INFORMATION AND LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2016)

632211 08-25-16

ACLU FOUNDATION OF MARYLAND, INC.	23-7209538
MAKES A RECOMMENDATION FOR THE FULL BOARD TO CONSIDER AND	APPROVE THE
EXECUTIVE DIRECTOR'S SALARY.	
FORM 990, PART VI, SECTION C, LINE 18:	
THE ORGANIZATION'S FORM 990 IS AVAILABLE UPON REQUEST AT T	HE ORGANIZATION'S
HEADQUARTERS. THE ORGANIZATION HAS A PUBLIC DISCLOSURE POL	
DESCRIBES THE ALLOWABLE FORMS WHICH CAN BE GIVEN TO THE GE	NERAL PUBLIC.
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION HAS A PUBLIC DISCLOSURE POLICY WHICH DESC	RIBES THE
ALLOWABLE FORMS WHICH CAN BE GIVEN TO THE GENERAL PUBLIC.	
FORM 990, PART XII, LINE 2C:	
THE AUDIT IS REVIEWED BY THE BOARD OF DIRECTORS. THIS PRO	CESS HAS NOT
CHANGED FROM THE PRIOR YEAR.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

ACLU FOUNDATION OF MARYLAND, INC.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

23-7209538

(a)	(b)	(c)	(d)	(e)		(f)		
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state of foreign country)	or Total inco	otal income End-of-yea				g
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ganizations. Complete if the organizations	tion answered "Yes" on Form 990), Part IV, line 34 b	ecause it had one	or more r	elated tax-exer	npt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section		(f) et controlling entity	cont	g) 512(b)(13) rolled tity?
				501(c)(3))			Yes	No
		I						
ACLU OF MARYLAND, INC - 52-0746271 3600 CLIPPER MILL ROAD		WARM AND	501 (G) (A)		h. 7 / 2			37
3600 CLIPPER MILL ROAD	CIVIL LIBERTIES	MARYLAND	501(C)(4)		N/A			х
3600 CLIPPER MILL ROAD	CIVIL LIBERTIES	MARYLAND	501(C)(4)		N/A			х
	CIVIL LIBERTIES	MARYLAND	501(C)(4)		N/A			Х

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

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)		
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of end-of-year assets	Dienroportionata		Dienroportionata		Code V-UBI	General c	Percentage
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes No	<u> </u>		
	1												
	1												
	1												
	1												
	1			1					1				

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

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

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

Yes No

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

1	During the tax year, did the organization engage in any of the following transactions wi	ith one or more re	lated organizations listed i	n Parts II-IV?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		Х	
	Gift, grant, or capital contribution to related organization(s)						Х	
С	Gift, grant, or capital contribution from related organization(s)				1c		Х	
							Х	
е	Loans or loan guarantees by related organization(s)						Х	
f	Dividends from related organization(s)				. 1f		X	
	Sale of assets to related organization(s)						X	
h	Purchase of assets from related organization(s)				. 1h		X	
i	Exchange of assets with related organization(s)				. 1i		X	
j	Lease of facilities, equipment, or other assets to related organization(s)				<u>1j</u>		X	
	Lease of facilities, equipment, or other assets from related organization(s)						X	
	Performance of services or membership or fundraising solicitations for related organization						X	
	m Performance of services or membership or fundraising solicitations by related organization(s)							
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)								
o Sharing of paid employees with related organization(s)								
р	Reimbursement paid to related organization(s) for expenses				1 p		X	
q	Reimbursement paid by related organization(s) for expenses				1q		X	
	Other transfer of cash or property to related organization(s)						X	
	Other transfer of cash or property from related organization(s)				1s		X	
2	If the answer to any of the above is "Yes," see the instructions for information on who	must complete th	is line, including covered r	elationships and transaction thresholds.				
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount	involved			
1) 2	ACLU OF MARYLAND, INC.	N	4,058.	COST				
2) 2	ACLU OF MARYLAND, INC.	0	12,705.	COST				
3)								
4)								
5)								
				I				

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Dispretion allocat	opor- late tions?		General manage partner	(k) Percentage ownership
	-									
									\prod	
	_							Ochodolo		

Form **8868**

(Rev. January 2017)

Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

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

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

				Enter file	er's identifying	number
Type or	Name of exempt organization or other filer, see instru-	Employer identification number (Ell				
print						
File by the	ACLU FOUNDATION OF MARYLAND	23-7209538				
due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, so 3600 CLIPPER MILL ROAD, NO.		ions.	Social se	ecurity number	(SSN)
instructions.	City, town or post office, state, and ZIP code. For a for BALTIMORE, MD 21211	oreign addı	ress, see instructions.			
Enter the	Return Code for the return that this application is for (file	e a separat	e application for each return)			0 1
Applicati	ion	Return	Application			Return
Is For		Code	Is For			Code
Form 990	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990)-BL	02	Form 1041-A			08
Form 472	20 (individual)	Form 4720 (other than individual)			09	
Form 990)-PF					
Form 990	0-T (sec. 401(a) or 408(a) trust)		11			
Form 990	0-T (trust other than above)	12				
• If the	prone No. \blacktriangleright $410-889-8550$ organization does not have an office or place of business is for a Group Return, enter the organization's four digit \bigcirc . If it is for part of the group, check this box \blacktriangleright	Group Exe	mption Number (GEN) I	f this is fo	r the whole gro	
	equest an automatic 6-month extension of time until		15 0010		npt organization	
	the organization named above. The extension is for the c		<u> </u>	the exem	ipi organizatio	return
	calendar year or X tax year beginning APR 1, 2016 ne tax year entered in line 1 is for less than 12 months, cl Change in accounting period	, an		Final retur	<u> </u>	
3a If th	nis application is for Forms 990-BL, 990-PF, 990-T, 4720,	, or 6069, e	enter the tentative tax, less any			
	nrefundable credits. See instructions.			3a	\$	0.
b If the	his application is for Forms 990-PF, 990-T, 4720, or 6069), enter any	refundable credits and			
		a tacania	owod as a crodit	3b	\$	_
	imated tax payments made. Include any prior year overp	ayment all	owed as a credit.	30	- -	0.
est	imated tax payments made. Include any prior year overp lance due. Subtract line 3b from line 3a. Include your pa	_		35		0.

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

Form 8868 (Rev. 1-2017)