Form 8879-TF

IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2022, or fiscal year beginning APR 1 , 2022, and ending MAR 31 , 20 23

OMB No. 1545-0047

Department of the Treasury

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879TE for the latest information. Internal Revenue Service EIN or SSN Name of filer 23-7209538 ACLU FOUNDATION OF MARYLAND, INC. HOMAYRA ZIAD Name and title of officer or person subject to tax BOARD PRESIDENT Type of Return and Return Information Part I Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. **b Total revenue,** if any (Form 990, Part VIII, column (A), line 12) ______ **1b** _____ **2 , 386 , 556 .** Form 990 check here 1a **b Total revenue,** if any (Form 990-EZ, line 9) _______ **2b** 2a Form 990-EZ check here Form 1120-POL check here b Total tax (Form 1120-POL, line 22) 3a Tax based on investment income (Form 990-PF, Part V, line 5) 4a Form 990-PF check here Form 8868 check here b Balance due (Form 8868, line 3c) 5b 5a Form 990-T check here **b Total tax** (Form 990-T, Part III, line 4) 6a 7a Form 4720 check here b Total tax (Form 4720, Part III, line 1) 7b 8a Form 5227 check here **b** FMV of assets at end of tax year (Form 5227, Item D) Form 5330 check here **b** Tax due (Form 5330, Part II, line 19) 9a 9b Form 8038-CP check here **b** Amount of credit payment requested (Form 8038-CP, Part III, line 22) 10b 10a **Declaration and Signature Authorization of Officer or Person Subject to Tax** Under penalties of perjury, I declare that X I am an officer of the above entity or I I am a person subject to tax with respect to (name and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only X | authorize MULLEN, SONDBERG, WIMBISH & STONE, PA to enter my PIN 09538 Enter five numbers, but ERO firm name do not enter all zeros as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. **Certification and Authentication** Part III ERO's EFIN/PIN. Enter your six-digit electronic filing identification 52140797902 number (EFIN) followed by your five-digit self-selected PIN. I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. 01/22/24 ERO's signature **ERO Must Retain This Form - See Instructions** Do Not Submit This Form to the IRS Unless Requested To Do So Form **8879-TE** (2022) LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

202521 12-16-22

Form **8868**

(Rev. January 2022)

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.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

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/e-file-providers/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. Type or Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) print ACLU FOUNDATION OF MARYLAND, INC. 23-7209538 File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your 3600 CLIPPER MILL ROAD, #350 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions BALTIMORE, MD 21211 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Is For Code Code Form 990 or Form 990-EZ Form 1041-A 01 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) DANA VICKERS SHELLEY Telephone No. ► 410-889-8550 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box 🕨 🔙 and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until FEBRUARY 15, 2024, to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year , and ending MAR 31, 2023 ► X tax year beginning APR 1, 2022 Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions

223841 04-01-22

LHA

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

Form 8868 (Rev. 1-2022)

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

A F	or the	\pm 2022 calendar year, or tax year beginning \pm APR \pm 1 , \pm \pm \pm 2 \pm 2 and ending	<u> MAR 31, 2</u>	<u> 1023</u>	
	Check if pplicable	C Name of organization	D Employer i	dentific	ation number
Г	Addres	ACLU FOUNDATION OF MARYLAND, INC.			
	Name		23-72	20953	38
Ē	Initial	Number and street (or P.O. box if mail is not delivered to street address) Room/			
	Final	3600 CLIPPER MILL ROAD #350	410-8	389-8	3555
	termin ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts	\$	3,222,487.
	Ameno	BALLIMORE, MD ZIZII	H(a) Is this a 🤉	group ret	
	Application pending	F Name and address of principal officer: HOMATKA ZIAD	for subor		·····= =
		3600 CLIPPER MILL RD #350, BALTIMORE, MD	H(b) Are all subor	dinates inc	luded? Yes No
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or			ist. See instructions
	Nebsit		H(c) Group ex		
	orm of	organization: X Corporation Trust Association Other L Summary	Year of formation: 15	169 M	State of legal domicile; MD
ГС		-	NITZAMION E	VTCT	е по
ė		Briefly describe the organization's mission or most significant activities: $\begin{tabular}{c} ${ t THE}$ & { t ORGI} \ { t EMPOWER}$ & { t MARYLANDERS}$ & { t TO}$ & { t EXERCISE}$ & { t THEIR}$ & { t RIGHTS}$ \end{tabular}$			
Governance	l	Check this box if the organization discontinued its operations or disposed of r			
verr	l		nore than 25% or its	1 - 1	13
Ĝ	1	Number of independent voting members of the governing body (Part VI, line 1b)			13
ფ		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			50
ij		Total number of volunteers (estimate if necessary)			125
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12			0.
_ ⋖		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
			Prior Year		Current Year
Ф	8	Contributions and grants (Part VIII, line 1h)	3,242,5		1,529,989.
eun	1	Program service revenue (Part VIII, line 2g)	1,463,8		824,616.
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	9,6	543.	31,951.
ш.	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4 516 6	0.	0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,716,0		2,386,556.
	I	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	1	Benefits paid to or for members (Part IX, column (A), line 4)	3,712,3	0.	<u>0.</u> 3,881,238.
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,114,3	0.	3,001,230.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 458,430.		-0.	<u> </u>
Ĕ	17	Total fundraising expenses (Part IX, column (D), line 25) 458,430. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,202,8	₹33.	1,380,886.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,915,2		5,262,124.
		Revenue less expenses. Subtract line 18 from line 12	-199,1		-2,875,568.
Or Ps			Beginning of Curren		End of Year
ets	20	Total assets (Part X, line 16)	5,973,5	97.	2,978,437.
ASS	21	Total liabilities (Part X, line 26)	776,8	26.	678,242.
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 20	5,196,7	71.	2,300,195.
Pa	art II	Signature Block			
		lties of perjury, I declare that I have examined this return, including accompanying schedules and st		-	knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which pre	parer has any knowledo	je.	
		Signature of officer	 Date		
Sig			Date		
Her	е	HOMAYRA ZIAD, BOARD PRESIDENT Type or print name and title			
		Print/Type preparer's name Prepager's signature	Date	Check	PTIN
Paid			A 01/22/24	; L	
	arer	Firm's name MULLEN, SONDBERG, WIMBISH & STONE, P.			2-1197902
-	Only	Firm's address 888 BESTGATE ROAD, SUITE 310			
	•	ANNAPOLIS, MD 21401	Phone	no.410	0-224-4920
May	the IF	RS discuss this return with the preparer shown above? See instructions	1		X Yes No

Page 2

Pai	Oback / Ochack de Occastrica a reasonance at the smaller in this Back !!	
_	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>
1	Briefly describe the organization's mission: THE ORGANIZATION EXISTS TO EMPOWER MARYLANDERS TO EXERCISE THEI	R
	RIGHTS SO THAT THE LAW VALUES AND UPLIFTS THEIR HUMANITY	
2	Did the organization undertake any significant program services during the year which were not listed on the	
_	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expectations are required to report the amount of grants and allocations to others, the total expectations are required to report the amount of grants and allocations to others, the total expectations are required to report the amount of grants and allocations to others, the total expectations are required to report the amount of grants and allocations to others, the total expectations are required to report the amount of grants and allocations to others, the total expectations are required to report the amount of grants and allocations to others, the total expectations are required to report the amount of grants and allocations to others.	•
	revenue, if any, for each program service reported.	tperioco, una
4a	(Code:) (Expenses \$4 , 078 , 103including grants of \$) (Revenue \$	824,616.)
	THE ORGANIZATION HAS VARIOUS PROGRAMS TO SUPPORT CONSTITUTIONAL	
	CIVIL RIGHTS THROUGH LITIGATION, PUBLIC ADVOCACY, LEGISLATIVE OF COMMUNITY ENGAGEMENT, AND PUBLIC EDUCATION. THE WORK OF THESE	
	COMMUNITY ENGAGEMENT, AND PUBLIC EDUCATION. THE WORK OF THESE PROGRAMS IS GREATLY EXPANDED BY A SUBSTANTIAL PRO BONO PROGRAM	<u> </u>
	INVOLVING THE PRIVATE BAR. THE VALUE OF THOSE SERVICES FOR 202	2 WAS
	\$3,450,471 WHICH IS REPORTED ON THE SCHEDULE D OF THE 990.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	/ (Expended —) (Expended —) (Note that 4	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 4,078,103.	
		Form 990 (2022)

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? See instructions	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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? 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		<u> X</u>
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		<u> X</u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		37	
	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		<u> </u>
a	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	444	Х	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	-21	
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	Х	
19a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	Schedule D, Parts XI and XII	12a		х
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	12u		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			7.7
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		X

Form 990 (2022) ACLU FOUNDATION OF Part IV Checklist of Required Schedules (continued)

	i (continuos)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		163	140
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	, , , , , , , , , , , , , , , , , , ,	23	х	
24.5	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	- 21	
24 a	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
		24a		Х
h	Schedule K. If "No," go to line 25a	24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
·		24c		
ч	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	270		
ZJa	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	23a		
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
		25b		Х
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
		26		Х
27	controlled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
u		28a		Х
h	"Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>	200		
·	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
00	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	 •		
02	, ,	32		Х
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
٠.	Part V, line 1	34	х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	х	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
-	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		_	
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
_	(gambling) winnings to prize winners?	1c	Х	
232004	‡ 12-13-22	Form	990	(2022)

Form 990 (2022) ACLU FOUNDATION OF MARYLAND, INC.

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

Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendary year ending with or within the year covered by this return 2		o d d dominaco)				Yes	No
filed for the calendary year ending with or within the year convent by this return b if all least on its reported on line 22, did the organization file all required federal employment tax returns? 3b Id the organization have unrelated business gross income of \$1,000 or more during the year? 3c Id Wash if Yeas, "fast filed a form 950 of for this year? "A vive for size, provide an explanation on Schedule 0 4c Atary time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account? If a foreign country (such as a bank account, securities account, or other financial account)? 5c If if year, it may be a provided the organization have an interest in, or a signature or other authority over, a financial account of the foreign country. 5c If if year to line is or 5b, did the organization that it was or is a party to a profibilited tax sheller transaction? 5c If if if year to line is or 5b, did the organization that it was or is a party to a profibilited tax sheller transaction? 5c If if if year to line is or 5b, did the organization that it was or is a party to a profibilited tax sheller transaction? 5d If if year, if did the organization include with every solicitation an express statement that such contributions solicit any contributions that were not tax to deductible a charatable contributions? 7d Organizations that may receive deductible contributions under section 170(c). 8d If if year, if did the organization include with every solicitation and express statement that such contributions or gifts were not tax deductible as fained party as a continuous party or goods and services provided? 7d Organizations that may receive deductible contributions under section 170(c). 8d If if year, if did the organization in express statement that such contributions or gifts were not tax deductible as fained party as a colititation and party for goods and services provided? 7d If If year, if year is the contribution of the value of the goods or servic	22	Enter the number of employees reported on Form W.3. Transmittal of Wage and Tay Statements	1	1		163	NO
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	23200				Form	990	(2022)

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 on Schedule O. See instructions.

0	Cneck if Schedule O contains a response or note to any line in this Part VI			Δ
Sec	tion A. Governing Body and Management			Г
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	4		
	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 on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 13	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
-	persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	1.5		
а	The governing body?	8a	Х	
a h		8b	X	
b	• • • • • • • • • • • • • • • • • • • •	OD	21	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		x
800	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Λ
366	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		V	N.
40-	Did the every instinct have level about on hypothese or efficience.	40-	Yes X	No
	Did the organization have local chapters, branches, or affiliates?	10a	Λ	
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	40.	v	
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		37	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed MD			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	DANA VICKERS SHELLEY - 410-889-8550			
	3600 CLIPPER MILL ROAD #350, BALTIMORE, MD 21211			

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

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

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

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

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
- Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 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 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. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	(do box		Pos heck	ition	than o	one n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) DANA VICKERS SHELLEY	50.00			,,				205 704	0	0 607
(2) DEBORAH JEON	45.00			Х		_		205,794.	0.	9,687.
(2) DEBORAH JEON LEGAL DIRECTOR	45.00	1			х			15/ 100	0.	22 602
(3) CRAIG LEE	45.00				^			154,108.	0.	33,692.
FINANCE AND OPERATIONS DIRECTOR	43.00	1		х				128,173.	0.	24,533.
(4) FRANK PATINELLA	45.00			^				120,175.	0.	24,333.
SENIOR PUBLIC POLICY ADVOCATE	±3.00	1				x		118,054.	0.	29,866.
(5) MEREDITH CURTIS GOODE	45.00							110,031.		2370001
COMMUNICATIONS DIRECTOR		1				x		120,284.	0.	23,055.
(6) DAVID ROCAH	45.00									
SENIOR STAFF ATTORNEY						x		123,518.	0.	17,525.
(7) YANET AMNUEL	45.00									-
PUBLIC POLICY DIRECTOR						Х		125,294.	0.	12,488.
(8) SERGIO ESPANA	45.00									
ENGAGEMENT AND MOBILIZATION DIRECTOR						X		125,113.	0.	12,133.
(9) VERONICA DUNLAP	45.00									
DEPUTY EXECUTIVE DIRECTOR		Х		Х				51,761.	0.	1,867.
(10) HOMAYRA ZIAD	1.00								_	_
PRESIDENT		Х		Х				0.	0.	0.
(11) CHINYERE OKONKWO	1.00									
DIRECTOR	1 00	Х				_		0.	0.	0.
(12) ERIC S. GILLMAN	1.00	3,7		,,					0	0
FINANCE CHAIR	1 00	Х		Х				0.	0.	0.
(13) AIMY AVILA PENA	1.00	Х						0.	0	0
01RECTOR (14) TONI HOLNESS	1.00	Δ						0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(15) JOHN SONDHEIM	1.00	77						0.	0.	<u></u>
DIRECTOR	1.00	х						0.	0.	0.
(16) BRIAN SMITH	1.00								J •	<u>·</u>
DIRECTOR		х						0.	0.	0.
(17) SARA MOVAHED	1.00	ļ								
NOMINATING CHAIR		Х						0.	0.	0.
232007 12-13-22	•	-				•		•		Form 990 (2022)

232007 12-13-22

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Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average hours per week	box	not ch unles cer an	ss per	more son i	than o	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) COLEMAN BAZELON	1.00									
DIRECTOR		Х						0.	0.	0.
(19) BOATEMAA NITIRI-REID DIRECTOR	1.00	Х						0.	0.	0.
(20) COREY STOTTLEMYER	1.00							•		
DIRECTOR		Х						0.	0.	0.
(21) NATALIA BACCHUS	1.00							-	-	-
DIRECTOR		Х						0.	0.	0.
(22) SHEILA GRAHAM AFFILIATE EQUITY OFFICER	1.00	х		х				0.	0.	0.
(23) TOLU SOSANYA	1.00							•	•	•
VICE PRESIDENT	1.00	х		Х				0.	0.	0.
(24) LAURA HOWELL SECRETARY	1.00	х		х				0.	0.	0.
1b Subtotal	1	<u> </u>				<u> </u>	l	1,152,099.	0.	164,846.
c Total from continuation sheets to Part VI								0.	0.	0.
d Total (add lines 1b and 1c)								1,152,099.	0.	164,846.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Yes No

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

and digarization: Hoport compensation for the calculating with or within	tine organization o tax year.	
(A) Name and business address	(B) Description of services	(C) Compensation
GLASTECHS LLC	2333743333333333	2
1248 CARMIA WAY #1200, RICHMOND, VA 23235	IT ASSISTANCE	177,094.
ALMAS ALCHEMY DBA JEAN LLOYD CONSULTING		
3600 CLIPPER MILL ROAD, BALTIMORE, MD 21211	CONSULTING	108,000.
2 Total number of independent contractors (including but not limited to those listed	above) who received more than	

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8

\$100,000 of compensation from the organization

Part VIII Statement of Revenue								
			Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
			•	-	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
						lanction revenue	basiness revenue	sections 512 - 514
र इ	1	a	Federated campaigns 1a					
an			Membership dues 1b					
Ω.			Fundraising events 1c					
, Gifts, Grants nilar Amounts			Related organizations 1d					
niis Bis			Government grants (contributions) 1e					
Sig			All other contributions, gifts, grants, and					
buti				,529,989.				
Ē			Noncash contributions included in lines 1a-1f	24,733.				
Contributions, Gift and Other Similar		h	Total. Add lines 1a-1f		1,529,989.			
				Business Code				
Φ	2	а	LEGAL AWARDS	900099	824,366.	824,366.		
Program Service Revenue		b	MISC FEES	900099	250.	250.		
Ser		С						
am		d						
ogra Re		е						
Pro		f	All other program service revenue					
		g	Total. Add lines 2a-2f		824,616.			
	3		Investment income (including dividends, inter					
			other similar amounts)		31,892.			31,892.
	4 Income from investment of tax-exempt bond prod							
	5 Royalties							
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a					
		b	Less: rental expenses 6b					
		С	Rental income or (loss) 6c					
		d						
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a 835,990					
		b	Less: cost or other basis					
ne			and sales expenses 7b 835,931 Gain or (loss) 7c 59					
Revenue		С	Gain or (loss)					
			Net gain or (loss)	·····	59.			59.
Other	8		Gross income from fundraising events (not					
δ			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18					
			Less: direct expenses 8)				
			Net income or (loss) from fundraising events					
	9		Gross income from gaming activities. See					
			Part IV, line 19		-			
			Less: direct expenses 9	0				
			Net income or (loss) from gaming activities					
	10		Gross sales of inventory, less returns					
			and allowances 10					
			Less: cost of goods sold 10					
	-	<u>. </u>	Net income or (loss) from sales of inventory	Business Code				
s n	11 :	2		Dusiness sode				
neo we		a b						
Miscellaneous Revenue		C						
isce			All other revenue					
Σ			Total. Add lines 11a-11d					
	12		Total revenue. See instructions		2,386,556.	824,616.	0.	31,951.

Secti	on 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All othe	er organizations must con	nplete column (A).	
	Check if Schedule O contains a respons			, x y.	
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	407,048.	118,406.	276,493.	12,149.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,549,194.	2,141,062.	168,687.	239,445.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	306,733.	246,055.	33,197.	27,481. 36,251.
9	Other employee benefits	403,619.	325,456.	41,912.	36,251.
10	Payroll taxes	214,644.	165,727.	30,458.	18,459.
11	Fees for services (nonemployees):				
а	Management				
b	Legal	37,643.	29,064.	5,342.	3,237. 1,911.
С	Accounting	22,225.	17,160.	3,154.	1,911.
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	006 001	160 446	00 550	12 006
	column (A), amount, list line 11g expenses on Sch O.)	206,031.	169,446.	22,779.	13,806.
12	Advertising and promotion	105 156	150 404	10 724	14 010
13	Office expenses	185,176.	152,424.	18,734.	14,018.
14	Information technology	472,374.	364,720.	67,030.	40,624.
15	Royalties	261,503.	201,906.	37,108.	22 400
16	Occupancy	37,942.	29,295.	5,384.	22,489. 3,263.
17	Travel	37,942.	29,295.	3,304.	3,203.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	50,988.	31,731.	2,017.	17,240.
19	Conferences, conventions, and meetings	30,300.	31,/31.	4,011.	1/,440.
20	Interest Payments to offiliates				
21	Payments to affiliates	4,564.	3,523.	648.	393.
22	Depreciation, depletion, and amortization	4,304.	3,343.	040.	333.
23 24	Other expenses. Itemize expenses not covered				
24	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	TELEPHONE AND COMMUNICA	81,856.	63,201.	11,615.	7,040.
a b	DUES AND SUBSCRIPTIONS	12,941.	12,941.	11,013.	7,040•
C	POSTAGE	4,951.	3,908.	651.	392.
d	MISCELLANEOUS	2,692.	2,078.	382.	232.
	All other expenses	2,002.	2,0,00	302.	202•
25	Total functional expenses. Add lines 1 through 24e	5,262,124.	4,078,103.	725,591.	458,430.
26	Joint costs. Complete this line only if the organization	3, = 3 = , = = 1 •	_, ,	. = 0 , 0 0 = 1	
_0	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
_					

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Part X | Balance Sheet

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or	note to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			704,434.	1	297,635.
	2	Savings and temporary cash investments			782,628.	2	676,201.
	3	Pledges and grants receivable, net	2,025,000.	3	65,000.		
	4	Accounts receivable, net		1,632,577.	4	543,699.	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, su	bstantial o	contributor, or 35%			
		controlled entity or family member of any of t		5			
	6	Loans and other receivables from other disqu	ualified pe	rsons (as defined			
		under section 4958(f)(1)), and persons describ	bed in sec	tion 4958(c)(3)(B)		6	
छ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ĕ	9	Donner of all accompanies are all all of comments all all accompanies			76,564.	9	57,146.
	10a	Land, buildings, and equipment: cost or other	r				
		basis. Complete Part VI of Schedule D	10a	86,722. 76,389.			
	b	Less: accumulated depreciation	10b	76,389.	14,897.	10c	10,333. 891,600.
	11	Investments - publicly traded securities		723,430.	11	891,600.	
	12	Investments - other securities. See Part IV, Iir		12			
	13	Investments - program-related. See Part IV, lii		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	14,067.	15	436,823.		
	16	Total assets. Add lines 1 through 15 (must e			5,973,597.	16	2,978,437.
	17	Accounts payable and accrued expenses		689,031.	17	492,104.	
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple				21	
es	22	Loans and other payables to any current or fo					
Ħ		trustee, key employee, creator or founder, su					
Liabilities		controlled entity or family member of any of t				22	
_	23	Secured mortgages and notes payable to uni				23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on li			87,795.	05	186,138.
	06			······	776,826.	25 26	678,242.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, or	hook hor	e X	770,020.	20	070,242.
S		and complete lines 27, 28, 32, and 33.	HECK HE	e [21]			
ž	27	• , , ,			4,986,877.	27	2 220 769.
sala	28				209,894.	28	2,220,769. 79,426.
Ā	20	Organizations that do not follow FASB ASC		ock here	203,0311	20	73,1200
Ξ		and complete lines 29 through 33.	<i>3</i> 330, cm	JOK HOTE			
ō	29	Capital stock or trust principal, or current fun	ds	1		29	
ets	30	Paid-in or capital surplus, or land, building, or				30	
Ass	31	Retained earnings, endowment, accumulated		Г		31	
Net Assets or Fund Balances	32			or other funds	5,196,771.	32	2,300,195.
Z	33	Total liabilities and net assets/fund balances			5,973,597.	33	2,978,437.
		. The habilities and thet decetor faile balarious			-,-:-,		Form 990 (2022)

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Pa	t XI Reconciliation of Net Assets				ugo
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,3	86,	556.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,2	62,	124.
3	Revenue less expenses. Subtract line 2 from line 1	3			568.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			771.
5	Net unrealized gains (losses) on investments	5			008.
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 on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	2,3	00,	195.
Pa	rt XII Financial Statements and Reporting	•	-		
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Ye	
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 on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	а	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?		2	ьΧ	[
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis 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?		2	c X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		<u> </u> 3	а	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				
			Fo	_{rm} 99	0 (2022)

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SCHEDULE A

(Form 990)

<u>Total</u>

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Inspection

Employer identification number

		ACLU	FOUNDATIO	N OF MARYLANI	O, INC	C.		2	3-'	7209538
Pa	rt I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions	S.		
Γhe	organ	ization is not a private found	ation because it is: (F	For lines 1 through 12, cl	heck only	one box.)				
1	Ш	A church, convention of chi	urches, or associatio	n of churches described	in sectio	n 170(b)(1	I)(A)(i).			
2	Щ	A school described in secti	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	า 990).)					
3	Ш	A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	i).			
4		A medical research organization	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)	(iii). Enter	the h	nospital's name,
		city, and state:								
5	Ш	An organization operated for	or the benefit of a col	lege or university owned	or operate	ed by a go	vernmental ur	nit describe	ed in	
		section 170(b)(1)(A)(iv). (C	Complete Part II.)							
6	Щ	A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).			
7		An organization that norma	lly receives a substar	ntial part of its support fr	om a gove	ernmental i	unit or from th	e general p	oublio	c described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)							
8	\sqsubseteq	A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Part	t II.)					
9	Ш	An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	land-grant	colle	ge
		or university or a non-land-g	grant college of agrice	ulture (see instructions).	Enter the i	name, city	, and state of t	the college	or	
		university:								
10	X	An organization that norma								
		activities related to its exem		•					-	
		income and unrelated busin		(less section 511 tax) fro	m busines	ses acquii	red by the org	anization a	ıfter .	June 30, 1975.
		See section 509(a)(2). (Cor	•							
11	\mathbb{H}	An organization organized a	· ·	•	•					_
12		An organization organized a	· ·	· · ·	-			•		
		more publicly supported org	-						ineci	k the box on
		lines 12a through 12d that	* *					-		
а			· · · · · · · · · · · · · · · · · · ·	•	•	-			-	-
		the supported organization			majority o	of the direc	tors or trustee	s of the su	ıppoı	ting
		organization. You must o	-					(-) le : le e :		
b		☐ Type II. A supporting org	•				-	•	-	ــا
		control or management o			ame perso	ns that coi	ntroi or manag	e the supp	orte	a
_		organization(s). You mus			in connect	المناسمة	and franctional	into avata	ائند ام	lla.
С			-					y integrate	u wii	,
d		its supported organization Type III non-functionally		·				od organi	zation	2(c)
u		that is not functionally int	= ::					-		* *
		requirement (see instructi	-	•	•		-	an allenin	/61163	55
е		Check this box if the orga	•	-				I Type III		
·		functionally integrated, or					Type I, Type I	i, Type iii		
f	Ente	er the number of supported o	vacnizations	iany integrated supporting		ation.				
a		vide the following information	•						_	
		(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	nization listed ng document?	(v) Amount of	monetary	(v	i) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see in	structions)	supp	oort (see instructions)

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3)	
	organization, check this box and stop						
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2022 (I	ine 6, column (f), d	livided by line 11,	column (f))		14	%
	Public support percentage from 2021					15	%
16a	33 1/3 % support test - 2022. If the o	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2021. If the	-			line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	•					
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact				*	VI how the organiz	zation
	meets the facts-and-circumstances te	-	•		-		
b	10% -facts-and-circumstances test	-					10% or
	more, and if the organization meets the				-		
	organization meets the facts-and-circu		-		•		
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a		
						Schodulo A	(Form 990) 2022

232022 12-09-22

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.)

Sec	qualify under the tests listed be ction A. Public Support		•				
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and	(4) = 3 · 3	(2) 20 10	(6) 2525	(4) === :	(0) = 0 = 1	(1) 10101
	membership fees received. (Do not						
	include any "unusual grants.")	2729235.	7478454.	2390333.	2921957.	1529989.	17049968.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	128,716.	258,759.	103,650.			1479611.
2	Gross receipts from activities that	120,7100	23077331	103/0301	103/0700	021,0101	11/3011
J	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5	2857951.	7737213.	2493983.	3085827.	2354605.	18529579.
7a	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.
8	Public support. (Subtract line 7c from line 6.)						18529579.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	,						
	Amounts from line 6	2857951.	7737213.	2493983.	3085827.	2354605.	18529579.
9		2857951. 35,030.	7737213.	<pre>2493983. 5,209.</pre>	9,079.		18529579.
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties,	35,030.	21,190.	5,209.	9,079.	31,892.	102,400.
9 10a b	Amounts from line 6						
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 on line 10b, whether or not the business is recoularly carried on	35,030.	21,190.	5,209.	9,079.	31,892.	102,400.
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital	35,030.	21,190.	5,209.	9,079.	31,892.	102,400.
9 10a b 11 12	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	35,030. 35,030. 2892981.	21,190. 21,190. 7758403.	5,209. 5,209. 2499192.	9,079.	31,892.	102,400. 102,400. 18631979.
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here	35,030. 35,030. 2892981. pe organization's fire	21,190. 21,190. 7758403. st, second, third, f	5,209. 5,209. 2499192. ourth, or fifth tax y	9,079. 9,079. 3094906. rear as a section 5	31,892. 31,892. 2386497. O1(c)(3) organization	102,400. 102,400.
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)	35,030. 35,030. 2892981. pe organization's fire	21,190. 21,190. 7758403. st, second, third, f	5,209. 5,209. 2499192. ourth, or fifth tax y	9,079. 9,079. 3094906. rear as a section 5	31,892. 31,892. 2386497. O1(c)(3) organization	102,400. 102,400. 18631979. on,
9 10a b 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here	35,030. 35,030. 2892981. ne organization's fire	21,190. 21,190. 7758403. st, second, third, f	5,209. 5,209. 2499192. ourth, or fifth tax y	9,079. 9,079. 3094906. rear as a section 5	31,892. 31,892. 2386497. O1(c)(3) organization	102,400. 102,400. 18631979. on, 99.45 %
9 10a b c 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here Extion C. Computation of Public Public support percentage from 2021	35,030. 35,030. 2892981. ne organization's fir c Support Per ine 8, column (f), d Schedule A, Part	21,190. 21,190. 7758403. st, second, third, for the centage vided by line 13, colling 15	5,209. 5,209. 2499192. ourth, or fifth tax y	9,079. 9,079. 3094906. rear as a section 50	31,892. 31,892. 2386497. 01(c)(3) organization	102,400. 102,400. 18631979. Don,
9 10a b c 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here	35,030. 35,030. 2892981. ne organization's fir c Support Per ine 8, column (f), d Schedule A, Part	21,190. 21,190. 7758403. st, second, third, for the centage vided by line 13, colling 15	5,209. 5,209. 2499192. ourth, or fifth tax y	9,079. 9,079. 3094906. rear as a section 50	31,892. 31,892. 2386497. 01(c)(3) organization	102,400. 102,400. 18631979. 00, 99.45 %
9 10a b 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here Extion C. Computation of Public Public support percentage from 2021	35,030. 35,030. 35,030. 2892981. The organization's firmulation (f), do some second second (f), do some second second (f), do some second (f),	21,190. 21,190. 7758403. st, second, third, for the centage (vided by line 13, colling line 15). Percentage	5,209. 5,209. 2499192. ourth, or fifth tax y	9,079. 9,079. 3094906. rear as a section 50	31,892. 31,892. 2386497. 01(c)(3) organization	102,400. 102,400. 18631979. on, 99.45 % 99.42 % .55 %
9 10a b 11 12 13 14 Sec 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here Etion C. Computation of Public support percentage for 2022 (I Public support percentage from 2021 etion D. Computation of Inves	35,030. 35,030. 35,030. 2892981. The organization's firme 8, column (f), do schedule A, Part in the street in come 1022 (line 10c, column 10c, col	21,190. 21,190. 7758403. st, second, third, formula to the centage vided by line 13, continue 15. Percentage III, line 15. Percentage In (f), divided by line	5,209. 5,209. 2499192. ourth, or fifth tax y olumn (f))	9,079. 9,079. 3094906. rear as a section 50	31,892. 31,892. 2386497. 01(c)(3) organization	102,400. 102,400. 18631979. on, 99.45 % 99.42 %
9 10a b c 11 12 13 14 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here Etion C. Computation of Public support percentage for 2022 (Inpublic support percentage from 2021 extion D. Computation of Investinest income percentage for 2021 investment income percentage for 2021.	35,030. 35,030. 35,030. 2892981. The organization's firmulation of the second of t	21,190. 21,190. 7758403. st, second, third, f centage vided by line 13, c ll, line 15 Percentage on (f), divided by line Part III, line 17	5,209. 5,209. 2499192. ourth, or fifth tax y olumn (f))	9,079. 9,079. 3094906. rear as a section 50	31,892. 31,892. 31,892. 2386497. 01(c)(3) organization	102,400. 102,400. 18631979. on, 99.45 % 99.42 % .55 % .58 %
9 10a b 11 12 13 14 Sec 15 16 Sec 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here Extion C. Computation of Public support percentage from 2021 (Public support percentage from 2021 (Investment income percentage from 233 1/3% support tests - 2022. If the more than 33 1/3%, check this box ar	35,030. 35,030. 35,030. 2892981. The organization's firmer s, column (f), do schedule A, Part street Income 1022 (line 10c, column 10c) (line 10c, column 10c) (line 10c) (l	21,190. 21,190. 21,190. 7758403. st, second, third, for the second stage of the sec	5,209. 5,209. 2499192. ourth, or fifth tax y olumn (f)) ne 13, column (f)) on line 14, and line lies as a publicly si	9,079. 9,079. 3094906. Year as a section 50. 15 is more than 33. upported organization.	31,892. 31,892. 31,892. 2386497. 01(c)(3) organization 15 16 17 18 3 1/3%, and line 1 in	102,400. 102,400. 18631979. 0n, 99.45 % 99.42 % .55 % .58 % 7 is not X
9 10a b 11 12 13 14 Sec 15 16 Sec 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Public support percentage from 2021 Ction D. Computation of Inves Investment income percentage from 2021 Investment income percentage Investment Income percentage Investment Income percentage Investment Income 2021 Investment Income Investment Income 2022 Interpretation	35,030. 35,030. 35,030. 2892981. The organization's firmer second (f), do schedule A, Part (street Income 22) (line 10c, column 2021 Schedule A, organization did not stop here. The organization did not stop here.	21,190. 21,190. 21,190. 7758403. st, second, third, formula the second stricts of the	5,209. 5,209. 2499192. ourth, or fifth tax y olumn (f)) ne 13, column (f)) on line 14, and line ies as a publicly si line 14 or line 19a	9,079. 9,079. 3094906. rear as a section 50. 15 is more than 33. upported organizate, and line 16 is more	31,892. 31,892. 31,892. 2386497. 01(c)(3) organization 15 16 17 18 3 1/3%, and line 10 cition re than 33 1/3%, a	102,400. 102,400. 102,400. 18631979. on, 99.45 % 99.42 % .55 % .58 % 7 is not X

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

 If "Yes." complete Part I of Schedule L (Form 990).
- 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 on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **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		
За		
Sa		
3b		
0-		
3с		
4a		
4-		
4b		
4c		
5a		
Eh		
5b 5c		
6		
-		
7		
8		
9a		
9b		
9с		
10a		
.54		
10b		

Par	t IV 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 on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	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 officers, directors, or trustees were allocated among the			
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported	1		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Seci	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
3	the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a	2		
	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.	3		
Sect	ion 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 instruction	ıs).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instruction		Ι
2	Activities Test. Answer lines 2a and 2b 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.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	01		
•	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	2-		
h	trustees of each of the supported organizations? <i>If</i> "Yes" or "No" provide details in Part VI. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a		
IJ	and the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

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Schedule A (Form 990) 2022

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	ig Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	ov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	t complete S	Sections A through E.	
Sect	on 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	on 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	lly integrated	d Type III supporting orga	nization (see
	instructions).	. •		•

Schedule A (Form 990) 2022

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations _{(continue}	ed)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	i	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
с	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i_	Carryover from 2017 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
<u>a</u>	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2018				
b	Excess from 2019				
С	Excess from 2020				
d	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

SCHEDULE C (Form 990)

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. OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information. If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

Political Campaign and Lobbying Activities

- 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

• Section 501(c)(4), (5), or (6) organization	ions. Complete Part III.			
Name of organization			E	mployer identification number
ACLU FO	UNDATION OF MARY	LAND, INC.		23-7209538
Part I-A Complete if the org	anization is exempt und	ler section 501(c)	or is a section 527	organization.
 Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai 	ures			
Part I-B Complete if the org	anization is exempt und	ler section 501(c)(3).	
1 Enter the amount of any excise tax	incurred by the organization und	der section 4955		\$
2 Enter the amount of any excise tax				
3 If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was a correction made?				
b If "Yes," describe in Part IV.				
Part I-C Complete if the org	anization is exempt und	ler section 501(c),	except section 50	1(c)(3).
1 Enter the amount directly expended	by the filing organization for se	ection 527 exempt func	tion activities	. \$
2 Enter the amount of the filing organ	ization's funds contributed to of	ther organizations for se	ection 527	
exempt function activities				\$
3 Total exempt function expenditures	. Add lines 1 and 2. Enter here a	and on Form 1120-POL	,	
line 17b				
4 Did the filing organization file Form				
5 Enter the names, addresses and en				
made payments. For each organiza				· · · · · · · · · · · · · · · · · · ·
contributions received that were propositical action committee (PAC). If				arate segregated fund or a
			1	
(a) Name	(b) Address	(c) EIN	(d) Amount paid fro	1 ' '
			funds. If none, enter	
			,	delivered to a separate
				political organization. If none, enter -0
				in Horie, errei o :

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

Schedule C (Form 990) 2022

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Sche	dule C (Form 990) 2022	ACLU FOUNDA	TION OF MAR	VIJAND TNC.	23-7	'209538 Page 2
	t II-A Complete if the org section 501(h)).	anization is exen	npt under section	1501(c)(3) and file	ed Form 5768 (ele	ection under
A (Check if the filing organiza	tion belongs to an affil	liated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,
	expenses, and shar	re of excess lobbying e	expenditures).			
B (Check if the filing organiza	tion checked box A ar	nd "limited control" pro	visions apply.		
		ts on Lobbying Exper ditures" means amou	nditures ints paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influ	uence public opinion (grassroots lobbying)			
b	Total lobbying expenditures to influ	uence a legislative bod	ly (direct lobbying)			
С	Total lobbying expenditures (add li	nes 1a and 1b)				
d	Other exempt purpose expenditure	es				
е	Total exempt purpose expenditure	s (add lines 1c and 1d)			
f	Lobbying nontaxable amount. Enter	er the amount from the	e following table in both	n columns.		
	If the amount on line 1e, column (a) o	or (b) is: The lob	bying nontaxable am	ount is:		
	Not over \$500,000	20% of	the amount on line 1e.			
	Over \$500,000 but not over \$1,000	0,000 \$100,00	00 plus 15% of the exce	ess over \$500,000.		
	Over \$1,000,000 but not over \$1,5	00,000 \$175,00	00 plus 10% of the exce	ess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,	000,000 \$225,00	00 plus 5% of the exces	ss over \$1,500,000.		
	Over \$17,000,000	\$1,000,	000.			
g	Grassroots nontaxable amount (en	iter 25% of line 1f)				
h	Subtract line 1g from line 1a. If zero	o or less, enter -0				
i	Subtract line 1f from line 1c. If zero	o or less, enter -0				
j	If there is an amount other than ze	ro on either line 1h or l	line 1i, did the organiza	ation file Form 4720		
	reporting section 4911 tax for this	year?				Yes No
	(Some organizations the	hat made a section 50 See the separa	ate instructions for lir	nave to complete all ones 2a through 2f.)	of the five columns be	elow.
		Lobbying Exper	nditures During 4-Yea	r Averaging Period		
	Calendar year	(-) 0010	(L) 0000	(-) 0001	(4) 0000	(a) Takal

	Lobbying Expen	ditures During 4-Yea	ar Averaging Period		_
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount	335,612.				335,612.
b Lobbying ceiling amount (150% of line 2a, column(e))					503,418.
c Total lobbying expenditures	10,641.				10,641.
d Grassroots nontaxable amount	83,903.				83,903.
e Grassroots ceiling amount (150% of line 2d, column (e))					125,855.
f Grassroots lobbying expenditures	3,264.				3,264.

Schedule C (Form 990) 2022

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)).

or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(k	o)
the lobbying activity.	Yes	No	Amo	ount
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 1i				
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)(6).	on 501(c)(5),	or sec	tion	
301(0)(0).			Yes	N
		1	103	<u>``</u>
Mana and advantially, all (000) an areas along managed and advantial and areas areas				l
, , , , , , , , , , , , , , , , , , , ,				
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		. 2		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	ne prior year? on 501(c)(5),	2 3 or sec		0:-
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	ne prior year? on 501(c)(5), "No" OR (b	2 3 or sec) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members	ne prior year? on 501(c)(5), "No" OR (b	2 3 or sec) Part I		3, is
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SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Inspection

Name of the organization

ACLU FOUNDATION OF MARYLAND, INC.

Employer identification number 23-7209538

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		r Si	milar Funds o	r Ac	coun	ts. Complete if the
	organization anomorou neo orni orni oco, natriv, iiii	(a) Donor adv	vised	funds	(1	b) Fun	ds 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 v	vriting that the assets	held	d in donor advised	d fund	s	
	are the organization's property, subject to the organization's	-					Yes No
6	Did the organization inform all grantees, donors, and donor ad						
	for charitable purposes and not for the benefit of the donor or						
	impermissible private benefit?						
Par	t II Conservation Easements. Complete if the org	ganization answered "	Yes	" on Form 990, Pa	art IV,	line 7.	
1	Purpose(s) of conservation easements held by the organization	on (check all that appl	y).				
	Preservation of land for public use (for example, recreat	tion or education)		Preservation of a	a histo	rically	important land area
	Protection of natural habitat			Preservation of a	certif	fied his	storic structure
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation cont	ribu	tion in the form of	a cor	servat	
	day of the tax year.						Held at the End of the Tax Year
а	Total number of conservation easements					2a	
b						2b	
С	Number of conservation easements on a certified historic stru					2c	
d	Number of conservation easements included in (c) acquired a						
	historic structure listed in the National Register					2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, o	or te	rminated by the o	organiz	zation	during the tax
	year						
4	Number of states where property subject to conservation eas	_					
5	Does the organization have a written policy regarding the per						
	violations, and enforcement of the conservation easements it						Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, l	handling of violations,	, and	l enforcing conse	rvatioi	n ease	ments during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and	enfo	orcina conservatio	on eas	ement	ts during the vear
		,		J			,
8	Does each conservation easement reported on line 2(d) above	e satisfy the requireme	ents	of section 170(h)	(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?						Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its re	venu	ue and expense st	tateme	ent and	d
	balance sheet, and include, if applicable, the text of the footn	ote to the organization	n's f	inancial statemen	its tha	t desc	ribes the
Da	organization's accounting for conservation easements.	Aut Historiaal T		arrage ar Oth	- · · · ·	:1	w Accete
Pai	t III Organizations Maintaining Collections of		rea	sures, or Oth	er Si	ımııaı	r Assets.
	Complete if the organization answered "Yes" on Form						
1a	If the organization elected, as permitted under FASB ASC 956	•					
	of art, historical treasures, or other similar assets held for pub	•				ce of p	DUBLIC
	service, provide in Part XIII the text of the footnote to its finan						
b	If the organization elected, as permitted under FASB ASC 956	•					
	art, historical treasures, or other similar assets held for public	exhibition, education	, or	research in furthe	rance	of pub	olic service,
	provide the following amounts relating to these items:						•
	(i) Revenue included on Form 990, Part VIII, line 1						
•							\$
2	If the organization received or held works of art, historical treat				gain, p	rovide	•
_	the following amounts required to be reported under FASB AS						¢
a	Revenue included on Form 990, Part VIII, line 1						Φ
D	Assets included in Form 990, Part X						φ

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

Schedule D (Form 990) 2022

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		29,500.	29,500.	0.
d Equipment		57,222.	46,889.	10,333.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal	10,333.			

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 ACLU FOUNDAT	TION OF MARYL	AND, INC.	23-7209538 Page 3
Part VII Investments - Other Securities.			.
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11b. See Form 990, Part X,	line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuatio	n: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of			
(a) Description of investment	(b) Book value	(c) Method of valuatio	n: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" of		11d. See Form 990, Part X,	
	Description		(b) Book value
(1) DEPOSITS			14,517.
(2) ROU OPERATING LEASES			417,424.
(3) ROU - ACCUM. AMORT. OPERAT	'ING LEASES		-215,763.
(4) DUE FROM ACLU OF MARYLAND			220,645.
(5)			
(6)			
(7)			

(a) Description	(b) Book value
(1) DEPOSITS	14,517.
(2) ROU OPERATING LEASES	417,424.
(3) ROU - ACCUM. AMORT. OPERATING LEASES	-215,763.
(4) DUE FROM ACLU OF MARYLAND	220,645.
(5)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	436,823.

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) OPERATING LEASE ROU LIABILITY	186,138.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.)	186,138.

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the X organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2022

Jonicadic D	(1 01111 000	LOLL					
Schedule D	(Form 990	1 2022	ACLU	LOUNDATION	OF.	MARYLAND.	

rai	TAI Neconciliation of Nevertue per Addited Financial Statement	SIII AAII	ii nevellue per ne	turri.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a			
1	Total revenue, gains, and other support per audited financial statements			1	5,816,019.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-21,008.		
b	Donated services and use of facilities	2b	3,450,471.		
С	Recoveries of prior year grants	2c		_	
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	3,429,463.
3	Subtract line 2e from line 1			3	2,386,556.
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.)			5	2,386,556.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem		th Expenses per F	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a			
1	Total expenses and losses per audited financial statements			1	8,712,595.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	. 2a	3,450,471.	_	
b	Prior year adjustments	2b		_	
С	Other losses	. 2c		_	
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	3,450,471.
3	Subtract line 2e from line 1			3	5,262,124.
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 XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
_	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	5,262,124.

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 AND THERE WAS NO EFFECT ON THE ORGANIZATION'S FINANCIAL POSITION OR CHANGES IN NET ASSETS AS A RESULT OF ANALYZING ITS TAX POSITIONS.

Schedule D (Form 990) 2022 Part XIII Supplemental Infor	ACLU FOUNDA	TION OF	MARYLAND,	INC.	23-7209538	Page 5
Part XIII Supplemental Infor	mation (continued)					

SCHEDULE J (Form 990)

Compensation Information

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

2022

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

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

ACLU FOUNDATION OF MARYLAND, INC.

Employer identification number 23-7209538

	t I Questions Regarding Compensation			
			Yes	No
	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,		163	140
Ė	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
Ī	Travel for companions Payments for business use of personal residence			
Ė	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
Ė	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
L	Discretionally speciality account T crisonal services (such as maid, charical, one)			
b I	f any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	1.2		
	rustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
•	nations, and officers, including the OLO/Excounted Director, regularing the fection officers of the Fax	_		
3 li	ndicate which, if any, of the following the organization used to establish the compensation of the organization's			
	DEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
Ī	Compensation committee Written employment contract			
F	Independent compensation consultant Compensation survey or study			
F	Form 990 of other organizations X Approval by the board or compensation committee			
4 F	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
	Receive a severance payment or change-of-control payment?	4a		Х
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	f "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
C	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5 F	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
c	contingent on the revenues of:			
	The organization?	5a		X
	Any related organization?	5b		X
	f "Yes" on line 5a or 5b, describe in Part III.			
6 F	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
a T	The organization?	6a		Х
	Any related organization?	6b		Х
	f "Yes" on line 6a or 6b, describe in Part III.			
	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	nitial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
	f "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2022

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

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

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

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)		
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990		
(1) DANA VICKERS SHELLEY	(i)	205,794.	0.	0.	9,687.	0.	215,481.	0.		
	(ii)	0.	0.	0.	0.	0.	0.	0.		
(2) DEBORAH JEON	(i)	154,108.	0.	0.	33,692.	0.	187,800.	0.		
	(ii)	0.	0.	0.	0.	0.	0.	0.		
(3) CRAIG LEE	(i)	128,173.	0.	0.	6,354.	18,179.	152,706.	0.		
	(ii)	0.	0.	0.	0.	0.	0.	0.		
	(i)									
	(ii)									
	(i)									
	(ii)									
	(i)									
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	(i)									
	(ii)									
	(i)									
	(ii)									
	(i)									
	(ii)									
	(i)									
	(ii)									

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

ACLU FOUNDATION OF MARYLAND, INC.

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.

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

Employer identification number

	ACLU FOUNDAT	ION OF	MARYLAND	, INC.	23-7	2095	38	
Par	rt I Types of Property				•			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	eterminir	•	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	4	24,733.	FMV AT TIME	OF	TRA	ANS
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other (
29	Number of Forms 8283 received by the organi	ization during	the tax year for c	ontributions				
	for which the organization completed Form 82	283, Part V, D	onee Acknowledg	ement 29				
							Yes	No
30a	During the year, did the organization receive b	y contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least 3 years from the date of	the initial co	ntribution, and wh	ich isn't required to be used	for			
	exempt purposes for the entire holding period	?				30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that re	equires the review	of any nonstandard contribu	tions?	31		X
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash				
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in o	column (c) fo	r a type of property	for which column (a) is che	cked,			
	describe in Part II.							
LHA	For Paperwork Reduction Act Notice, see	the Instruct	tions for Form 990).	Schedule N	/I (Form	990)	2022

232141 09-09-22

232142 09-09-22

SCHEDULE 0 (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service Name of the organization

> ACLU FOUNDATION OF MARYLAND, INC.

Employer identification number

23-7209538 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: AND UPLIFTS THEIR HUMANITY FORM 990, PART VI, SECTION A, LINE 6: MEMBERS OF THE UNION HAVE THE RIGHT TO PARTICIPATE IN THE ORGANIZATION'S GOVERNANCE. FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS OF THE UNION HAVE THE POWER TO ELECT OR APPOINT ONE OR MORE MEMBERS OF THE GOVERNING BOARD. FORM 990, PART VI, SECTION B, LINE 11B: THE 990 IS REVIEWED AND APPROVED BY THE EXECUTIVE DIRECTOR AND THE FINANCE COMMITTEE OF THE GOVERNING BODY AND A COPY IS DISTRIBUTED ELECTRONICALLY TO ALL MEMBERS OF THE GOVERNING BODY FOR REVIEW PRIOR TO FILING. FORM 990, PART VI, SECTION B, LINE 12C: 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 THE POLICY ANNUALLY. 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. 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) 2022

232211 10-28-22

Schedule O (Form 990) 2022 Page 2

Name of the organization **Employer identification number** 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 POSTS THE AUDITED FINANCIAL STATEMENTS AND 990 ON ITS WEBSITE AS WELL AS ON OTHER PUBLIC WEBSITES. COPIES ARE ALSO AVAILABLE BY REQUEST. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION HAS A PUBLIC DISCLOSURE POLICY WHICH DESCRIBES THE ALLOWABLE FORMS WHICH CAN BE GIVEN TO THE GENERAL PUBLIC. PART XII, LINE 2C THE AUDIT IS REVIEWED BY THE BOARD OF DIRECTORS. THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR. FORM 990, PART I, 6 - NUMBER OF VOLUNTEERS TOTAL NUMBER OF VOLUNTEERS EQUALED 125. THE BREAKDOWN IS AS FOLLOWS: (1) OTHER PROGRAM VOLUNTEERS. (75) PRO-BONO ATTORNEYS. (0) VOLUNTEERS WHO SIT ON A COMMITTEE THAT DECIDES WHICH LAWSUITS ARE FILED. (49) VOLUNTEERS FOR NEW PROGRAM WHICH CONNECTS PEOPLE WHO ARE INCARCERATED TO LAWYERS TO HELP GET THEM PAROLED.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

ACLU FOUNDATI	ON OF MARYLAND, IN	rc.				23-72095	38	
Part I Identification of Disregarded Entities. Comp	lete if the organization answered "Ye	es" on Form 990, Part IV, line 3	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d) Or Total inco	me End-of-yea		Direct o	(f) controlling ntity	g
Part II Identification of Related Tax-Exempt Organizations during the tax year.	zations. Complete if the organizatio	on answered "Yes" on Form 990	D, Part IV, line 34, I	pecause it had one	or more	related 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) ct controlling entity	contr	g) 512(b)(13) trolled tity?
				501(c)(3))			Yes	No
ACLU OF MARYLAND, INC - 52-0746271 3600 CLIPPER MILL ROAD	_							
BALTIMORE, MD 21211	CIVIL LIBERTIES	MARYLAND	501(C)(4)		N/A			х

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

Schedule R (Form 990) 2022

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	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of end-of-year assets	Disprop	ortionata		General	Percentage
		foreign country)		sections 512-514)		assets	Yes	No	K-1 (Form 1065)	Yes N	
				,							
	1										
	1										
	1										
	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)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	Sec	i) ction
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership		tion b)(13) rolled tity?
		Couriery)						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	s with one or more re	elated organizations listed in	n Parts II-IV?						
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	у			1a		Х			
b	Gift, grant, or capital contribution to related organization(s)				1b		Х			
С	c Gift, grant, or capital contribution from related organization(s)									
	Loans or loan guarantees to or for related organization(s)						Х			
	Loans or loan guarantees by related organization(s)						Х			
f	Dividends from related organization(s)				. 1f		Х			
g	Sale of assets to related organization(s)						Х			
h	Purchase of assets from related organization(s)						X			
i	Exchange of assets with related organization(s)						X			
i	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х			
•										
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		Х			
1	Performance of services or membership or fundraising solicitations for related organ	nization(s)			11		Х			
n	Performance of services or membership or fundraising solicitations by related organ						X			
	Sharing of facilities, equipment, mailing lists, or other assets with related organization					Х				
Sharing of paid employees with related organization(s)										
р	Reimbursement paid to related organization(s) for expenses				1p		Х			
a a	Reimbursement paid by related organization(s) for expenses				1q		Х			
•										
r	Other transfer of cash or property to related organization(s)				1r		Х			
	Other transfer of cash or property from related organization(s)						Х			
	If the answer to any of the above is "Yes," see the instructions for information on w									
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount	involved					
1) .	ACLU OF MARYLAND, INC.	N	118,980.	COST						
2) .	ACLU OF MARYLAND, INC.	0	182,806.	COST						
3)										
4)										
5)										

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	Disprition allocat	opor- late tions?	General manage partner	(k) Percentage ownership
									000) 0000