		***PUBLIC DISCLOSURE COPY	* * *							
	Ω	OO Return of Organization Exempt From	n Income Tax	OMB No. 1545-0047						
Forr	n Y	YU Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code	e (except private foundations)	2019						
•		Do not enter social security numbers on this form as it n	nay be made public.	Open to Public						
Depa Interr	ntment nal Reve	of the Treasury enue Service Go to www.irs.gov/Form990 for instructions and the la	atest information.	Inspection						
AF	or th	e 2019 calendar year, or tax year beginning and ending	9							
B Check if applicable: D Employer identification num										
		BALTIMORE YEARLY MEETING OF THE								
	Address RELIGIOUS SOCIETY OF FRIENDS INC.									
	_chang	pe Doing business as	52-0856309)						
	Initial returr									
	Final returr termii	n-	301-774-76							
	ated]Amer	City or town, state or province, country, and ZIP or foreign postal code SANDY SPRING, MD 20860-1267	G Gross receipts \$	2,767,038.						
	_lreturr]Appli	· · ·	H(a) Is this a group return							
	tion pendi	SAME AS C ABOVE	for subordinates?							
<u> </u>	-22-02	empt status: X 501(c)(3) \Box 501(c) () \triangleleft (insert no.) \Box 4947(a)(1) or \Box	527 If "No," attach a list							
		te: ► WWW • BYM-RSF • ORG	H(c) Group exemption n	. ,						
			Year of formation: 1968 M S							
	art I	Summary								
-	1	Briefly describe the organization's mission or most significant activities: PROMOTE	RELIGIOUS, CHAF	RITABLE,						
& Governance		AND EDUCATIONAL INTERESTS OF ITS MEMBERS AND								
srne	2	Check this box if the organization discontinued its operations or disposed of	ts.							
OVE	3	Number of voting members of the governing body (Part VI, line 1a)	9							
ي م	4	Number of independent voting members of the governing body (Part VI, line 1b)	9							
es	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)		134						
Activities	6	Total number of volunteers (estimate if necessary)		350						
Act		Total unrelated business revenue from Part VIII, column (C), line 12		0.						
	b	Net unrelated business taxable income from Form 990-T, line 39		0.						
			Prior Year 953, 312.	Current Year						
iue	8	Contributions and grants (Part VIII, line 1h)	1,008,099.	882,058. 1,028,841.						
Revenue	9	Program service revenue (Part VIII, line 2g)	24,125.	334,081.						
Re		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	18,005.	22,323.						
	11	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,003,541.	2,267,303.						
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	64,352.	69,931.						
		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.						
s			1,111,307.	1,179,118.						
Expenses	16a	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 146,221.	0.	0.						
be	b	Total fundraising expenses (Part IX, column (D), line 25) 146, 221.								
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	721,023.	807,543.						
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,896,682.	2,056,592.						
	19	Revenue less expenses. Subtract line 18 from line 12	106,859.	210,711.						
Net Assets or Fund Balances			Beginning of Current Year	End of Year						
sset	20	Total assets (Part X, line 16)	4,510,045.	4,601,333.						
at As	21	Total liabilities (Part X, line 26)	405,398.	393,639.						
		Net assets or fund balances. Subtract line 21 from line 20	4,104,647.	4,207,694.						
_	art II									
Und	er pen	alties of perjury, I declare that I have examined this return, including accompanying schedules and si	tatements, and to the best of my kr	lowledge and belief, it is						

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer JIM RILEY, TREASURER Type or print name and title		Date
Paid	Print/Type preparer's name JENNIFER SOLOT	Preparer's signature	Date PTIN 10/8/20 ref-employed P00749373
Preparer	Firm's name 🍗 BBD , LLP		Firm's EIN ▶ 23-2896692
Use Only	Firm's address 1835 MARKET STR PHILADELPHIA, P	Phone no. 215 – 567 – 7770	
May the IF	RS discuss this return with the preparer shown a	bove? (see instructions)	X Yes No
932001 01-2	LHA For Paperwork Reduction Act No	tice, see the separate instructions.	Form 990 (2019)

	BALTIMORE YEARLY MEETING OF THE		
	1990 (2019) RELIGIOUS SOCIETY OF FRIENDS INC. 52-0850	5309	Page 2
Ра	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		📖
1	Briefly describe the organization's mission: PROMOTE RELIGIOUS, CHARITABLE, AND EDUCATIONAL INTERESTS OF ITS	2	
	MEMBERS AND CONSTITUENT MONTHLY MEETINGS.	,	
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	XNo
	If "Yes," describe these new services on Schedule O.		
3	3 3 3 3 3 3 3 3	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 exponential and the sector of	penses, a	nd
40	revenue, if any, for each program service reported. (code:) (Expenses \$ 1,118,993. including grants of \$) (Revenue \$	874,	581.
44	OPERATION OF FOUR QUAKER SUMMER CAMPS FOR APPROXIMATELY 600 CAN		
	SIX WEEKEND FAMILY CAMPS AND ONE WEEKEND CAMP REUNION, EACH SE		
	TO 30 MEMBERS.		-
<u>4</u> b	(Code:) (Expenses \$ 67,107. including grants of \$) (Revenue \$	90 ()50.)
40	ANNUAL SESSION IS A WEEKLONG PROGRAM ATTENDED BY APPROXIMATELY		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	MEMBERS FROM VARIOUS MONTHLY MEETINGS. MEMBERS CONDUCT THE BUS		OF
	THE YEARLY MEETING, ATTEND WORKSHOPS AND WORSHIP TOGETHER DURIN	IG THI	3
	WEEK.		
4c	(Code:) (Expenses \$ 228,531. including grants of \$ 69,931.) (Revenue \$	69	504.)
40	(Code:) (Expenses \$220,551 including grants of \$09,951) (Revenue \$) (Revenue \$] OTHER PROGRAMS THROUGHOUT THE YEAR FOR THE BENEFIT OF VARIOUS 1		
	INCLUDE 25 WEEKEND AND DAY LONG EVENTS FOR: HIGH SCHOOL AND MIL		-12
	SCHOOL CHILDREN, WOMEN'S RETREAT, RELIGIOUS EDUCATION, PEACE &	SOCI	۸L
	JUSTICE, CLERKING, UNITY WITH NATURE AND SPIRITUAL GROWTH. THE	NUMBI	
	OF MEMBERS SERVED VARIES FOR EACH EVENT.		
A!	Other program can lippe (Deparities on Schedule C.)		
4d)	
4e	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses > 1,414,631.)	
+0		Form 9	90 (2019)
93200	2 01-20-20		(2013)
20200	2 01-20-20		

BALTIMORE YEARLY MEETING OF THE	LTIMORE	YEARLY	MEETING	\mathbf{OF}	\mathbf{THE}
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 Form 990 (2019)
 RELIGIOUS
 SOCIETY

 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)?		103	
•	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	~		
Ŭ		3		x
4	public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i> 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			
Ŭ	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
Ŭ	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	-		
Ŭ	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
Ū	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		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	114		
D.	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ь	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			
ŭ	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
۹	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		x
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
1Lu	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
~	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b				
~	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		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	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	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<u> </u>
	complete Schedule G, Part III	19		x
20a	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?	20a		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			<u> </u>
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
93200				(2019)
	3			()

3 13181008 793760 4146 2019.04030 BALTIMORE YEARLY MEETING OF 4146___1

BALTIMORE YEARLY MEETING OF THE Form 990 (2019) RELIGIOUS SOCIETY OF FRIENDS INC. Part IV Checklist of Required Schedules (continued) Continued) Continued Continued

52-0856309 Page 4		52-	085	6309	Page 4
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the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on t IX, column (A), line 2? If "Yes," <i>complete Schedule I, Parts I and III</i> the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current I former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," <i>complete nedule J</i> the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the eadule <i>J</i> the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? the organization and the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease tax-exempt bonds? the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? the organization act as an "on behalf of" issuer? <i>Complete Schedule L, Part I</i> he organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? <i>If</i> "Yes," <i>complete edule L, Part I</i> the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current ormer officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% throlled entity	22 23 24a 24b 24c 24d 25a 25b 26	X	x
If ormer officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes," <i>complete</i> <i>nedule J</i> the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the aday of the year, that was issued after December 31, 2002? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete</i> <i>nedule K. If</i> "No," <i>go to line 25a</i> the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? the organization maintain an escrow account other than a refunding escrow at any time during the year to defease tax-exempt bonds? the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? the organization aware that it engaged in an excess benefit transaction engage in an excess benefit the action with a disqualified person during the year? <i>If</i> "Yes," <i>complete Schedule L, Part I</i> the organization has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If</i> "Yes," <i>complete</i> <i>nedule L, Part I</i> the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current ormer officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% trolled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i> the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, ator or founder, substantial contributor or e	24a 24b 24c 24d 25a 25b		x
the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the inday of the year, that was issued after December 31, 2002? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete medule K. If</i> " <i>No</i> ," <i>go to line 25a</i>	24a 24b 24c 24d 25a 25b		x
day of the year, that was issued after December 31, 2002? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete</i> <i>nedule K. If</i> " <i>No</i> ," <i>go to line 25a</i> the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? the organization maintain an escrow account other than a refunding escrow at any time during the year to defease tax-exempt bonds? the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? ction 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit asaction with a disqualified person during the year? <i>If</i> "Yes," <i>complete Schedule L, Part 1</i> he organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and t the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If</i> "Yes," <i>complete</i> <i>nedule L, Part 1</i> the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current ormer officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% throlled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i> the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, ator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	24b 24c 24d 25a 25b		
the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b 24c 24d 25a 25b		x
the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d 25a 25b		x
the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	25a 25b		X
hsaction with a disqualified person during the year? <i>If</i> "Yes," <i>complete Schedule L, Part I</i>	25b		x
the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and t the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If</i> "Yes," <i>complete</i> <i>nedule L, Part I</i> the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current ormer officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% throlled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i> the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, ator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	25b		
the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current ormer officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% trolled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i> the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, ator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			x
ormer officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% trolled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, ator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	26		
trolled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, ator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	26		
the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, ator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			X
	27		x
s the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
ructions, for applicable filing thresholds, conditions, and exceptions): urrent or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
s," complete Schedule L, Part IV	28a	<u> </u>	X
amily member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	┣—	X
5% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?If s," complete Schedule L, Part IV	28c		x
the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	200		X
the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation tributions? If "Yes," complete Schedule M	30		x
the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete nedule N, Part II	32		x
the organization own 100% of an entity disregarded as separate from the organization under Regulations			
tions 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
t V, line 1	34	X	
	35a	<u> </u>	X
	35b		
tion 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			x
the organization conduct more than 5% of its activities through an entity that is not a related organization			x
the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	07		
te: All Form 990 filers are required to complete Schedule O	38	X	
		Yes	No
er the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 7	7		
	4		
er the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0		v	
the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1c		<u> </u>
	the organization conduct more than 5% of its activities through an entity that is not a related organization that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? e: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V er the number reported in Box 3 of Form 1096. Enter -0- if not applicable the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming nbling) winnings to prize winners?	res" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity 35b iin the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b tion 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 res," complete Schedule R, Part V, line 2 36 the organization conduct more than 5% of its activities through an entity that is not a related organization 37 the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 37 et All Form 990 filers are required to complete Schedule O 38 Statements Regarding Other IRS Filings and Tax Compliance 1a 7 Check if Schedule O contains a response or note to any line in this Part V 1b 0 the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	res" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity 35b in the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 tion 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 is on plete Schedule R, Part V, line 2 36 the organization conduct more than 5% of its activities through an entity that is not a related organization 37 the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 e: All Form 990 filers are required to complete Schedule O 38 Statements Regarding Other IRS Filings and Tax Compliance 1a 7 Check if Schedule O contains a response or note to any line in this Part V 1b 0 er the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 7 the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1c X

Form	990 (2019) RELIGIOUS SOCIETY OF FRIENDS INC. 52-0856	309	P	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			_
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 134			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	NT /	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	A
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	_		
	sponsoring organization have excess business holdings at any time during the year? N/A	8		
9	Sponsoring organizations maintaining donor advised funds.	-		
a	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders N/A			
	Gross income from members or shareholders <u>N/A</u> <u>11a</u> Gross income from other sources (Do not net amounts due or paid to other sources against			
b				
100	amounts due or received from them.) [11b] Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	IZa		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		
a	Note: See the instructions for additional information the organization must report on Schedule O.	154		
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
D	organization is licensed to issue qualified health plans 13b			
c	Enter the amount of reserves on hand 13c			
14a		14a		X
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? <i>If</i> "No," <i>provide an explanation on Schedule O</i>	14a		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1-10		
	excess parachute payment(s) during the year?	15		x
	If "Yes," see instructions and file Form 4720, Schedule N.	15		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.			
	, <u>,,,</u>			

Form **990** (2019)

932005 01-20-20

13181008 793760 4146

Form 990 (2019)

BALTIMORE YEARLY MEETING OF THE RELIGIOUS SOCIETY OF FRIENDS INC.

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.						
	Check if Schedule O contains a response or note to any line in this Part VI			X			
Sec	tion A. Governing Body and Management			-			
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year						
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.						
b	Enter the number of voting members included on line 1a, above, who are independent 1b						
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	х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
а	The governing body?	8a	Х				
b	Each committee with authority to act on behalf of the governing body?	8b	Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the						
5	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	5					
			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a	103	X			
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100					
D	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b					
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х				
		11a					
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
12a							
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		v				
	in Schedule O how this was done	12c	X				
13	Did the organization have a written whistleblower policy?	13	X				
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	Х				
b	Other officers or key employees of the organization	15b		Х			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a						
	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 NONE						
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	B)s only) avail	able			
	for public inspection. Indicate how you made these available. Check all that apply.						
	Own website 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, ar	nd fina	ncial				
	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						
	THE ORGANIZATION - $301-774-7663$						
	17100 QUAKER LANE, SANDY SPRING, MD 20860-1267						
932004	5 01-20-20	Form	990	(2019)			
	6			()			

13181008 793760 4146

2019.04030 BALTIMORE YEARLY MEETING OF 4146___1

BALTIMORE	YEARLY	MEET	CING	OF	THE
RELIGIOUS	SOCIETY	OF	FRIE	ENDS	INC.

Form 990 (2	2019)	RELIGIOUS	SOCIETY	OF	FRIENDS	INC.	52-08
Part VII	Compensation	of Officers, Di	rectors, Trus	stees	, Key Employ	yees, Highes	t Compensated
	Employees, an	d Independent	Contractors	;			

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

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

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

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

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

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per week	box	not c , unle	ss pe	more rson	than is bot pr/trus	h 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)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) KENNETH STOCKBRIDGE TRUSTEE AND PRESIDING CLER	20.00	x		x				0.	0.	0.
(2) THOMAS C. HILL	13.00							0.	0.	0.
TRUSTEE AND TREASURER	10100	x		x				0.	0.	0.
(3) FREDERICK W. LEONARD	2.00									
TRUSTEE		Х						0.	0.	0.
(4) SUSAN KAUL TRUSTEE	1.00	x						0.	0.	0.
(5) BYRON SANFORD	2.00									
TRUSTEE		x						0.	0.	0.
(6) RICHARD LIVERSIDGE	2.00									
TRUSTEE		x						0.	0.	Ο.
(7) THOMAS FARQUHAR	1.00									
TRUSTEE EFF 8/2019		Х						0.	0.	0.
(8) CARLOTTA JOYNER	1.00								_	_
TRUSTEE EFF 8/2019		Х						0.	0.	0.
(9) KATHRYN SCHULTZ	1.00								0	•
TRUSTEE EFF 8/2019		Х						0.	0.	0.
(10) HELEN TASKER	1.00								0	0
RECORDING CLERK OF YEARLY	15.00			X				0.	0.	0.
(11) MARTHA BAKER SEITEL CLERK OF INTERIM MEETING	15.00			x				0.	0.	0.
(12) ARTHUR DAVID OLSON	2.00								0.	
REC. CLERK INTERIM MTG				x				0.	0.	0.
(13) JAMES T. RILEY	1.00									
ASSISTANT TREASURER		1		x				0.	Ο.	0.
(14) EDWARD W. STOWE III	44.00									
GENERAL SECRETARY				X				97,332.	0.	14,593.
		<u> </u>								
	-			-				-		Corm 000 (2010)

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932007 01-20-20

Form 990 (2019)

13181008 793760 4146

2019.04030 BALTIMORE YEARLY MEETING OF 4146___1

BALTIMORE	YEARLY	MEET	CING	OF	\mathbf{THE}
RELIGIOUS	SOCIETY	7 OF	FRTF	INDS	TNC

52-0856309 Page 8

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Name and title Name and title to those listed above) who received more than \$100,000 of compensated numbers NoNE Name and tusters address NoNE Name and tusters address None Stated above) who received more than \$100,000		990 (2019) RELIGIOU	S SOCIE:	ΓҮ	OF	۶ E	R.	IEN	1DS	S INC.	52-08	<u>563</u> (09	Page 8
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and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 X 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. (A) (C) (A) (B) (C) Compensation Name and business address NONE Description of services												🖵	3	X
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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. (B) (C) Name and business address NONE Description of services Compensation Image: Complete the independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization Image: Compensation Image: Compensation Image: Complete the independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization Image: Compensation Image: Compensation Image: Complete the independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization Image: Complete the independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization Image: Complete the independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization Image: Complete the independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization Image: Complete the independent contractors (including but not limited to those listed ab												L '	4	<u> </u>
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. (A) (B) (C) Name and business address NONE Description of services Compensation 0 0 0 0 0 0	5	Did any person listed on line 1a receive or a	accrue compe	nsat	ion f	rom	any	/ unr	elate	ed organization or indiv	idual for services			
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. (A) (B) (C) Name and business address NONE Description of services Compensation (B) (C) Compensation Compensation Compensation (C) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C)			plete Schedul	e J f	or sı	ıch	pers	son .					5	X
the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Name and business address NONE Description of services Compensation Image: Compensation of services Image: Compensation of services Compensation Image: Compensation of services Image: Compensation of services Compensation Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of the organization image: Compensation image: Compe	Sec	tion B. Independent Contractors												
(A) Name and business address NONE (B) Description of services (C) Compensation Image: Comparison of the service of the	1	Complete this table for your five highest co	mpensated in	depe	ende	nt c	ont	racto	ors th	nat received more than	\$100,000 of comp	ensati	ion fro	m
Name and business address NONE Description of services Compensation		the organization. Report compensation for	the calendar y	ear	endii	ng v	vith	or w	ithin	the organization's tax	year.			
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0						_						•		
\$100,000 of compensation from the organization		Name and business	address	N	ONE	6				Description of s	services	Con	npens	ation
\$100,000 of compensation from the organization														
\$100,000 of compensation from the organization														
\$100,000 of compensation from the organization														
\$100,000 of compensation from the organization														
\$100,000 of compensation from the organization									Τ					
\$100,000 of compensation from the organization														
\$100,000 of compensation from the organization									Τ					
\$100,000 of compensation from the organization														
\$100,000 of compensation from the organization														
\$100,000 of compensation from the organization														
\$100,000 of compensation from the organization	2	Total number of independent contractors (i	ncludina but n	ot li	mite	d to	tho	se lis	sted	above) who received n	nore than			
	-		•					~		,				
		. ,										Fc	orm 9 9	0 (2019)

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BALTIMORE YEARLY MEETING OF THE RELIGIOUS SOCIETY OF FRIENDS INC.

			BALTIMORE YEAR 2019) RELIGIOUS SOCI				52-0856	309 Page 9
Pa	π	VIII						
			Check if Schedule O contains a response or	r note to any lir	ie in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated	(D) Revenue excluded
Contributions, Gifts, Grants and Other Similar Amounts	1	b d e f	Fundraising events 1c Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f 3 Noncash contributions included in lines 1a-1f 1g \$ 1g		882,058.			
Program Service Revenue	2	a b c d		Business Code 611600 900099 600099	874,581. 90,050. 64,210.	874,581. 90,050. 64,210.		
Pro	3	g	All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interes		1,028,841.			
	4 5	Ļ	other similar amounts) Income from investment of tax-exempt bond pro Royalties	bceeds	41,723.			41,723
	6	b c	Gross rents(i) RealLess: rental expenses6a17,029.Bental income or (loss)6c17,029.	(ii) Personal	17,029.			17,029
enue	7	'a b	Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses 7b 495,595.	(ii) Other 332. 0.				17,029
		с	Gain or (loss) 7c 292,026.	332.				292,358
Other Rev	8	a	Net gain or (loss) Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 Less: direct expenses 8b	····· •	292,358.			292,358
	9	c a	Net income or (loss) from fundraising events Gross income from gaming activities. See 9a Part IV, line 19					
	10	c a	Less: direct expenses 9b Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances 10a Less: cost of goods sold 10b	▲,639. 4,140.				
			Net income or (loss) from sales of inventory		499.	499.		
Miscellaneous Revenue	11	a b	OTHER INCOME	Business Code 900099	4,795.	4,795.		
Misce Re		е	All other revenue		4,795.			
	12	2	Total revenue. See instructions	►	2,267,303.	µ,034,135.	0.	351,110

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BALTIMORE YEARLY MEETING OF THE RELIGIOUS SOCIETY OF FRIENDS INC.

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Form 990 (2019) RELIGIOUS SOC

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

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
			expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	31,525.	31,525.		
2	Grants and other assistance to domestic	51,525.	51,525.		
2	individuals. See Part IV, line 22	38,406.	38,406.		
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	111,925.	64,884.	35,320.	11,721
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	845,025.	489,868.	266,664.	88,493
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	26,489.	15,356.	8,359.	2,774 6,120
9	Other employee benefits	126,130.	72,681.	47,329.	6,120
0	Payroll taxes	69,549.	40,353.	21,669.	7,527
1	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting				
	Lobbying				
е	Professional fundraising services. See Part IV, line 17	6 810		6 810	
f	Investment management fees	6,710.		6,710.	
g	Other. (If line 11g amount exceeds 10% of line 25,		12.000	14 000	
	column (A) amount, list line 11g expenses on Sch 0.)	28,752.	13,860.	14,892.	
2	Advertising and promotion	145,301.	00 702	21 510	24 000
3	Office expenses	145,301.	88,793.	31,518.	24,990
4	Information technology				
5	Royalties	160,001.	151,399.	8,602.	
6		15,994.	11,265.	3,310.	1,419
7	Travel	13,394.	11,203.	5,510.	1,419
8	Payments of travel or entertainment expenses				
~	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
0	Interest				
1 2	Payments to affiliates	108,040.	101,017.	7,023.	
2 3		44,561.	34,623.	9,938.	
3 4	Other expenses. Itemize expenses not covered	11,5010	51/0251	575501	
4	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	FOOD	104,571.	102,848.	131.	1,592
h	VEHICLE EXPENSE	81,501.	81,453.	48.	_, = , = , = , = , = , = , = , = , = , =
c	EQUIPMENT EXPENSE	62,802.	34,528.	26,800.	1,474
d	MAINTENANCE	26,901.	22,739.	4,162.	, _ , _
	All other expenses	22,409.	19,033.	3,265.	111
5	Total functional expenses. Add lines 1 through 24e	2,056,592.	1,414,631.	495,740.	146,221
<u> </u>	Joint costs. Complete this line only if the organization			· -	, –
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

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BALTIMORE YEARLY MEETING OF THE RELIGIOUS SOCIETY OF FRIENDS INC.

NDS INC. 52-

52-0856309 Page 11

1 01		Dalance Oneet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			273,441.	1	185,525.
	2	Savings and temporary cash investments			66,876.	2	
	3	Pledges and grants receivable, net			115,445.	3	129,401.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes				5	
	6	Loans and other receivables from other disqualit					
		under section 4958(f)(1)), and persons described				6	
ţs	7	Notes and loans receivable, net			28,787.	7	12,453.
Assets	8	Inventories for sale or use				8	
βŝ	9	Prepaid expenses and deferred charges			57,194.	9	51,935.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	3,986,726.			
	b	Less: accumulated depreciation	10b	1,255,991.	2,683,066.	10c	2,730,735.
	11	Investments - publicly traded securities			1,285,236.	11	1,491,284.
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equa			4,510,045.	16	4,601,333.
	17	Accounts payable and accrued expenses			109,160.	17	116,283.
	18	Grants payable	-	18			
	19	Deferred revenue	28,285.	19	37,408.		
	20	Tax-exempt bond liabilities			-	20	
	21	Escrow or custodial account liability. Complete F				21	
ŝ	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subst					
abil		controlled entity or family member of any of thes				22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated			267,953.	24	239,948.
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines					
		of Schedule D				25	
	26				405,398.	26	393,639.
		Organizations that follow FASB ASC 958, che	ck her	e ▶ X			
ces		and complete lines 27, 28, 32, and 33.					
lan	27	Net assets without donor restrictions			2,993,303.	27	3,152,407.
Ba	28	Net assets with donor restrictions			1,111,344.	28	1,055,287.
pur		Organizations that do not follow FASB ASC 9	58, che	eck here 🕨 🗌			
ц		and complete lines 29 through 33.					
s o	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or eq				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in				31	
Net	32	Total net assets or fund balances			4,104,647.	32	4,207,694.
-	33	Total liabilities and net assets/fund balances			4,510,045.	33	4,601,333.
							E 000 (0010)

Form **990** (2019)

Form 990 (2019) RELIGIOUS SOC Part X Balance Sheet

	BALTIMORE YEARLY MEETING OF THE						
	1990 (2019) RELIGIOUS SOCIETY OF FRIENDS INC.	52-08	356309	Paç	ge 12		
Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>					
		1	2,267	7 3	03		
1	Total revenue (must equal Part VIII, column (A), line 12)	2	2,056	5 5	$\frac{03}{92}$		
2 3	Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1	3	2,030), <u>)</u>) 7	$\frac{52}{11}$		
3 4	Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,104				
	5 Net unrealized gains (losses) on investments						
6		6	-107	/ / 0	<u> </u>		
7	Donated services and use of facilities	7					
8	Investment expenses 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,						
10	column (B))	10	4,20	7.6	94.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.	-				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х		
	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 b		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,					
	consolidated basis, or both:						
	Separate basis 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	e audit,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c				
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch						
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	0					
	Act and OMB Circular A-133?		3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits						
			Form	9907	2010)		

Form **990** (2019)

932012 01-20-20

SC	HEDULE A								OMB No. 1545-0047		
(Form 990 or 990-FZ))				rity Status an					2010		
				nization is a section 50 ⁻ 47(a)(1) nonexempt cha			or a section		2013		
	tment of the Treasury			Attach to Form 990 or Form 990-EZ.							
	al Revenue Service		•	v/Form990 for instruction			nformation.		Inspection		
Nam	ne of the organizati		-	LY MEETING O					identification number		
Do	rt I Booon			ETY OF FRIEN			!		2-0856309		
Pa				All organizations must co				S.			
	T T T	•		(For lines 1 through 12, c		,					
1	<i>,</i>			on of churches described			1)(A)(I).				
2				(Attach Schedule E (Form			::)				
3 4	·			anization described in se onjunction with a hospital				Viiii) Entor	the hospital's name		
-	city, and stat	-		njunction with a nospital	described	a in Sectio			the hospital's hame,		
5			for the benefit of a co	ollege or university owned	d or opera	ted by a d	overnmental	unit describ	ed in		
•			Complete Part II.)								
6				mental unit described in s	section 17	70(b)(1)(A)	(v).				
7				antial part of its support f				he general	public described in		
	section 170(b)(1)(A)(vi). (0	Complete Part II.)		-			-			
8	A community	trust describ	bed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)						
9	An agricultur	al research or	rganization described	d in section 170(b)(1)(A)(ix) operate	ed in conju	unction with a	land-grant	college		
	or university	or a non-land-	-grant college of agrid	culture (see instructions).	Enter the	name, cit	y, and state o	f the colleg	e or		
	university:										
10				e than 33 1/3% of its sup							
				ect to certain exceptions,							
				e (less section 511 tax) fr	om busine	esses acqu	ired by the o	ganization	after June 30, 1975.		
			omplete Part III.)		(-)- O		20(-)(4)				
11 12		-	-	sively to test for public sa	•			orm (out the	numpered of one or		
12	-	-		sively for the benefit of, to ed in section 509(a)(1) o	-			-			
				of supporting organizatio							
а		•	• •	supervised, or controlled		-		-	aivina		
				egularly appoint or elect a	•						
	organizatio	n. You must	complete Part IV, S	ections A and B.							
b	Type II. As	supporting or	ganization supervise	d or controlled in connec	tion with i	ts support	ed organizatio	on(s), by ha	ving		
	control or r	nanagement	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or mana	age the sup	ported		
	organizatio	n(s). You mu	st complete Part IV,	Sections A and C.							
С	••	-	•	ng organization operated				lly integrate	ed with,		
		U		s). You must complete I	,						
d	••			porting organization oper				•	.,		
		-		zation generally must sat	•		-	d an attenti	veness		
				mplete Part IV, Sections							
е			•	written determination fro onally integrated support			а турет, туре	n, rype n			
f	Enter the number	-		many integrated support							
g			on about the support								
	(i) Name of supp		(ii) EIN	(iii) Type of organization	(iv) Is the orga	inization listed ing document?	(v) Amount o	monetary	(vi) Amount of other		
	organizatior	1		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)		
Tota											
		duction Act	Notice see the Inst	ructions for Form 990 o	r 990-F7	932021 09	25-19 Sche	dule A (For	m 990 or 990-F7) 2019		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 932021 09-25-19 Schedule A (Form 990 or 990-EZ) 2019 13

Schedule A (Form 990 or 990-EZ) 2019 RELIGIOUS SOCIETY OF FRIENDS INC.

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support					_	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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.						
	tion B. Total Support			•	·	•	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 instructi	ons)			12	
13	First five years. If the Form 990 is for	the organization'				on 501(c)(3)	
_	organization, check this box and stop						>
Sec	ction C. Computation of Publ						
14	Public support percentage for 2019 (I					14	%
15	Public support percentage from 2018					15	%
1 6a	33 1/3% support test - 2019. If the c	-					
	stop here. The organization qualifies						
b	33 1/3% support test - 2018. If the c	•					
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes	-					
	more, and if the organization meets the				• •		
	organization meets the "facts-and-circ		•	• •	,		
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16	6a, 16b, 17a, or 17	b, check this box a	and see instruction	IS ►

Schedule A (Form 990 or 990-EZ) 2019

932022 09-25-19

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Schedule A (Form 990 or 990-EZ) 2019 RELIGIOUS SOCIETY OF FRIENDS INC. 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.)

	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
ŀ	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
5	Total. Add lines 1 through 5						
'a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
	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						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6	(1) 2010		(0) = 0	(0, 2010		(1) 1010
0a	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 in 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.)		<u> </u>		l		·
4	First five years. If the Form 990 is for	-			•		anization,
	chack this hay and stan hara						
	check this box and stop here	e Cunnert De	reentere				
ec	tion C. Computation of Publ	ic Support Pe	ercentage			1 1	
5	tion C. Computation of Publ Public support percentage for 2019 (I	i c Support Pe ine 8, column (f), c	rcentage divided by line 13,	column (f))		15	
ес 5 6	tion C. Computation of Publ Public support percentage for 2019 (I Public support percentage from 2018	ic Support Pe ine 8, column (f), o Schedule A, Part	ercentage divided by line 13, : III, line 15	column (f))		15 16	
ес 5 6 ес	tion C. Computation of Publ Public support percentage for 2019 (I Public support percentage from 2018 tion D. Computation of Invest	ic Support Pe ine 8, column (f), o Schedule A, Part Stment Incom	rcentage divided by line 13, III, line 15 Percentage	column (f))		16	
5 6 6 7	tion C. Computation of Publ Public support percentage for 2019 (I Public support percentage from 2018 tion D. Computation of Invest Investment income percentage for 20	ic Support Pe ine 8, column (f), o Schedule A, Part stment Incom 19 (line 10c, colur	rcentage divided by line 13, i III, line 15 e Percentage mn (f), divided by l	column (f))		16 17	%
5 6 6 7 8	tion C. Computation of Publ Public support percentage for 2019 (I Public support percentage from 2018 tion D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2	ic Support Pe ine 8, column (f), o Schedule A, Part stment Incom 19 (line 10c, colur 2018 Schedule A,	rcentage divided by line 13, III, line 15 Percentage mn (f), divided by I Part III, line 17	column (f))		16 17 18	% %
5 6 6 7 8	tion C. Computation of Publ Public support percentage for 2019 (I Public support percentage from 2018 tion D. Computation of Invest Investment income percentage for 20	ic Support Pe ine 8, column (f), o Schedule A, Part stment Incom 19 (line 10c, colur 2018 Schedule A,	rcentage divided by line 13, III, line 15 Percentage mn (f), divided by I Part III, line 17	column (f))		16 17 18	% %
iec 15 6 6 7 8 9 9 a	tion C. Computation of Publ Public support percentage for 2019 (I Public support percentage from 2018 tion D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2	ine 8, column (f), o Schedule A, Part Stment Incom 19 (line 10c, colur 2018 Schedule A, organization did r	rcentage divided by line 13, III, line 15 Percentage mn (f), divided by l Part III, line 17 not check the box	column (f)) ine 13, column (f)) on line 14, and line	e 15 is more than (16 17 18 33 1/3%, and line	% %
iec 15 6 iec 17 18 19a b	tion C. Computation of Publ Public support percentage for 2019 (I Public support percentage from 2018 tion D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests - 2019. If the more than 33 1/3%, check this box an 33 1/3% support tests - 2018. If the	ine 8, column (f), or Schedule A, Part Stment Incom 19 (line 10c, colur 2018 Schedule A, organization did r nd stop here. The organization did r	rcentage divided by line 13, III, line 15 Percentage mn (f), divided by l Part III, line 17 not check the box organization qual not check a box or	column (f)) ine 13, column (f)) on line 14, and line ifies as a publicly s n line 14 or line 19a	e 15 is more than 3 supported organiza a, and line 16 is mo	16 17 18 33 1/3%, and lination ore than 33 1/3	% % ne 17 is not %, and
5 15 16 5 6 17 18 19 19 19 19 19 19 19	tion C. Computation of Publ Public support percentage for 2019 (I Public support percentage from 2018 tion D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests - 2019. If the more than 33 1/3%, check this box a	ine 8, column (f), or Schedule A, Part Stment Incom 19 (line 10c, colur 2018 Schedule A, organization did r nd stop here. The organization did r	rcentage divided by line 13, III, line 15 Percentage mn (f), divided by l Part III, line 17 not check the box organization qual not check a box or	column (f)) ine 13, column (f)) on line 14, and line ifies as a publicly s n line 14 or line 19a	e 15 is more than 3 supported organiza a, and line 16 is mo	16 17 18 33 1/3%, and lination ore than 33 1/3	▶□ %, and
iec 15 16 iec 17 18 19a b	tion C. Computation of Publ Public support percentage for 2019 (I Public support percentage from 2018 tion D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests - 2019. If the more than 33 1/3%, check this box an 33 1/3% support tests - 2018. If the	ic Support Pe ine 8, column (f), o Schedule A, Part stment Incom 19 (line 10c, colur 2018 Schedule A, organization did r nd stop here. The organization did r ck this box and st	rcentage divided by line 13, iII, line 15 e Percentage mn (f), divided by l Part III, line 17 not check the box organization qual not check a box of cop here. The organization	column (f)) ine 13, column (f)) on line 14, and line ifies as a publicly s n line 14 or line 19a anization qualifies a	e 15 is more than 3 supported organiza a, and line 16 is mo as a publicly supported supported supported supported supported supported supported support	16 17 18 33 1/3%, and lin ation ore than 33 1/3 orted organization	% % ne 17 is not %, and ion ►□

Schedule A (Form 990 or 990-EZ) 2019 RELIGIOUS SOCIETY OF FRIENDS INC.

1

2

Yes

No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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Schedule A (Form 990 or 990-EZ) 2019

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3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

Schedule A (Form 990 or 990-EZ) 2019 RELIGIOUS SOCIETY OF FRIENDS INC. 52-0856309 Page 5

Pai	Tt 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 in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
-	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		L
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	-		
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
•	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		L
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)	-		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
с	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions	<u>s).</u>	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
-	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
2	-	20		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	0-		
	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	~		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
93202	5 09-25-19 Schedule A (Form 9	90 or 99	э0-EZ)	2019

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Schedule A (Form 990 or 990 EZ) 2019 RELIGIOUS SOCIETY OF FRIENDS INC. Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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

Section A - Adjusted Net Inco	ome		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital ga	in	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 depleti	on	5		
6 Portion of operating expe	enses paid or incurred for production or			
collection of gross incom	e or for management, conservation, or			
maintenance of property	held for production of income (see instructions)	6		
7 Other expenses (see inst	ructions)	7		
8 Adjusted Net Income (s	ubtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset A	mount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market va	lue of all non-exempt-use assets (see			
instructions for short tax	year or assets held for part of year):			
a Average monthly value o	f securities	1a		
b Average monthly cash ba	alances	1b		
c Fair market value of othe	r non-exempt-use assets	1c		
d Total (add lines 1a, 1b, a	nd 1c)	1d		
e Discount claimed for blo	ckage or other			
factors (explain in detail	n Part VI):			
2 Acquisition indebtedness	s applicable to non-exempt-use assets	2		
3 Subtract line 2 from line	1d.	3		
4 Cash deemed held for ex	empt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).		4		
5 Net value of non-exempt	use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.		6		
7 Recoveries of prior-year	distributions	7		
8 Minimum Asset Amoun	t (add line 7 to line 6)	8		
Section C - Distributable Am	ount			Current Year
1 Adjusted net income for	prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.		2		
3 Minimum asset amount f	or 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 p	rior year	5		
6 Distributable Amount.	Subtract line 5 from line 4, unless subject to			
emergency temporary re	duction (see instructions).	6		
	urrent year is the organization's first as a non-functional	ly integrate	ed Type III supporting or	anization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2019

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Sche Par	dule A (Form 990 or 990-EZ) 2019 RELIGIOUS SOC			2-0856309 Page 7
	ion D - Distributions	(a)(5) Supporting Orga	anizations (continued)	Current Year
<u>3ecu</u> 1	Amounts paid to supported organizations to accomplish exe	mot ourposos		Gurrent rear
2	Amounts paid to supported organizations to accomplish exercise and the supported organizations to accomplish exercise and the support of the			
2	organizations, in excess of income from activity	r purposes of supported		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	19	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	9	
-	(provide details in Part VI). See instructions.		-	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
c	From 2016			
d	From 2017			
e	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

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BALTIMORE YEARLY MEETING OF THE Schedule A (Form 990 or 990-EZ) 2019 RELIGIOUS SOCIETY OF FRIENDS INC.

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

PART 1, LINE 1

THE BALTIMORE YEARLY MEETING OF THE RELIGIOUS SOCIETY OF FRIENDS, INC.
(THE "YEARLY MEETING") IS A NON-PROFIT ORGANIZATION INCORPORATED ON
JANUARY 2, 1968, UNDER THE LAWS OF THE STATE OF MARYLAND AS THE
CONSOLIDATION OF TWO YEARLY MEETINGS OF THE SOCIETY OF FRIENDS
(COMMONLY KNOWN AS QUAKERS) INCORPORATED IN MARYLAND IN 1867 AND 1886,
RESPECTIVELY. THE YEARLY MEETING IS AND ITS IMMEDIATE PREDECESSORS WERE
DIRECT SUCCESSORS TO THE WEST RIVER YEARLY MEETING THAT OPENED IN 1672
AS THE GOVERNING BODY FOR ALL FRIENDS MEETINGS ON EITHER SIDE OF THE
CHESAPEAKE BAY AND REORGANIZED IN 1790 AS "THE YEARLY MEETING OF
FRIENDS HELD IN BALTIMORE TOWN FOR THE WESTERN SHORE OF MARYLAND AND
ADJACENT AREAS OF PENNSYLVANIA AND VIRGINIA". THE YEARLY MEETING NOW
HAS ABOUT 50 CONSTITUENT LOCAL MEETINGS IN MARYLAND, VIRGINIA,
PENNSYLVANIA, THE DISTRICT OF COLUMBIA AND WEST VIRGINIA THAT
THEMSELVES CONSTITUTE "CHURCHES" UNDER THE IRC. THUS, THE YEARLY
MEETING CONSTITUTES "A CONVENTION OR ASSOCIATION OF CHURCHES". THE
YEARLY MEETING IS ORGANIZED EXCLUSIVELY TO PROMOTE THE RELIGIOUS,
CHARITABLE, AND EDUCATIONAL INTERESTS OF ITS MEMBERS AND ITS
CONSTITUENT MONTHLY MEETINGS, THROUGH THE WORK OF ITS BOARDS,
COMMITTEES, INSTITUTIONS AND INSTRUMENTALITIES AFFILIATED WITH THE
RELIGIOUS SOCIETY OF FRIENDS.

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Schedule B

(Form 990, 990-EZ, or 990-PF Department of the Treasury

Internal Revenue Service Name of the organization

* *	PUBLIC	DISCLOSURE	COPY	* *
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Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Employer identification number

number and organization			
	BALTIMORE	YEARLY MEETING OF THE	
	RELIGIOUS	SOCIETY OF FRIENDS INC.	52-0856309
Organization type (ch	neck one):		
Filers of:	Section:		
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	

	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

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

General Rule

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

Special Rules

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

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

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

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B	(Form 990,	990-EZ, (or 990-PF) (2019)
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Name of organization

BALTIMORE YEARLY MEETING OF THE RELIGIOUS SOCIETY OF FRIENDS INC.

Employer identification number

Page 2

52-0856309

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1		\$7,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
2		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
3		\$33,689.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
4		\$7,400.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
5		\$9,800.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
6		\$18,350.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
923452 11-06	- 19	Schedule B (Form	990, 990-EZ, or 990-PF) (2019)	

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|--|

Name of organization

BALTIMORE YEARLY MEETING OF THE RELIGIOUS SOCIETY OF FRIENDS INC.

Employer identification number

Page 2

52-0856309

Part I	Contributors (see instructions). Use duplicate copies of Part I if addi	itional space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7		\$10,444.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
8		\$48,299.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$8,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$5,250.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>12</u>		\$10,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
923452 11-06	-19	Schedule B (Form	990, 990-EZ, or 990-PF) (2019)

13181008 793760 4146

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Name of organization BALTIMORE YEARLY MEETING OF THE RELIGIOUS SOCIETY OF FRIENDS INC. Employer identification number

52-0856309

Part I	rt I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
13		\$14,984.	PersonXPayrollNoncash(Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
923452 11-06	6-19 24	Schedule B (Forr		

2019.04030 BALTIMORE YEARLY MEETING OF 4146___1

13181008 793760 4146

	MORE YEARLY MEETING OF THE		
Part II	IOUS SOCIETY OF FRIENDS INC. Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed	52-0856309
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate)	(d) Date received
Part I		(See instructions.)	
		\$	
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
		\$	
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate)	(d) Date received
Part I	Description of noncash property given	(See instructions.)	Date received
		\$	
(a) No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
Part I			
—			
3453 11-06	10	\$	(Form 990, 990-EZ, or 990-PF

ame of organi ALTIMOF	RE YEARLY MEETING OF	THE	Employer identification	
ELIGIOU	JS SOCIETY OF FRIENDS		52-0856309	
frc	clusively religious, charitable, etc., contributi om any one contributor. Complete columns (a) mpleting Part III, enter the total of exclusively religious, c se duplicate copies of Part III if additional	through (e) and the following line haritable, etc., contributions of \$1,000	in section 501(c)(7), (8), or (10) that total more than \$1,000 e entry. For organizations or less for the year. (Enter this info. once.) \$	0 for
a) No.		•		
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	ld
_		(e) Transfer of g	 gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee	
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	ld
		(e) Transfer of g	 gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee	
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	ld
		(e) Transfer of g	gift	
	Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee	
a) No	1			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	ld
		(e) Transfer of g		
	Transferee's name, address, an		Relationship of transferor to transferee	
		I	Schedule B (Form 990, 990-EZ, or 99	

SC	HEDULE D	Suppleme	ental Financial Statements		OMB No. 1545-0047	
(Forr	Form 990) ► 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.				2019	
	Department of the Treasury Attach to Form 990.				Open to Public Inspection	
-	rnal Revenue Service ►Go to www.irs.gov/Form990 for instructions and the latest information. The organization BALTIMORE YEARLY MEETING OF THE				•	
Nam	e of the organizatior		TY OF FRIENDS INC.		identification number 2-0856309	
Pa	t I Organizat		lvised Funds or Other Similar Funds of			
		answered "Yes" on Form 990, Part				
	· ·	· · · · ·	(a) Donor advised funds	(b) Funds and	d other accounts	
1	Total number at end	of year				
2	Aggregate value of o	contributions to (during year)				
3		grants from (during year)				
4		end of year				
5	-		ors in writing that the assets held in donor advised			
6			tion's exclusive legal control?		Yes No	
6	0	0 / /	onor advisors in writing that grant funds can be us onor or donor advisor, or for any other purpose co	,		
				5	Yes No	
Pa	t II Conservat	tion Easements. Complete if the	ne organization answered "Yes" on Form 990, Pa	rt IV. line 7.		
1		rvation easements held by the orga		,		
		of land for public use (for example, r	· · · · · · · · · · · · · · · · · · ·	historically impor	tant land area	
	Protection of r	natural habitat	Preservation of a	certified historic	structure	
	Preservation of	of open space				
2	Complete lines 2a th	nrough 2d if the organization held a	qualified conservation contribution in the form of	a conservation e	asement on the last	
	day of the tax year.			Held	at the End of the Tax Year	
а						
b						
С			ric structure included in (a)			
d			uired after 7/25/06, and not on a historic structure			
3		ition easements modified, transferre	ed, released, extinguished, or terminated by the o	rganization durin	g the tax	
4	year	 nere property subject to conservation	on opsoment is located			
5			ne periodic monitoring, inspection, handling of			
Ŭ	e e	cement of the conservation easem			Yes No	
6	,		cting, handling of violations, and enforcing conser			
	•	3, 1	S, S , S		5,	
7	Amount of expenses	 s incurred in monitoring, inspecting,	, handling of violations, and enforcing conservatio	n easements du	ring the year	
	►\$					
8	Does each conserva	ation easement reported on line 2(d)) above satisfy the requirements of section 170(h)	(4)(B)(i)		
					Yes No	
9	In Part XIII, describe	how the organization reports cons	ervation easements in its revenue and expense st	tatement and		
			footnote to the organization's financial statemen	ts that describes	the	
De		unting for conservation easements.	no of Art Illiotoxical Tracerurae, ar Oth			
Pa		•	ns of Art, Historical Treasures, or Oth	ier Similar As	ssets.	
		he organization answered "Yes" on				
та	0	, ,	SC 958, not to report in its revenue statement and			
	•		or public exhibition, education, or research in furth s financial statements that describes these items.	•	;	
h			SC 958, to report in its revenue statement and ba		re of	
5			public exhibition, education, or research in further			
		g amounts relating to these items:				
		-		▶ \$		
2						
	the following amounts required to be reported under FASB ASC 958 relating to these items:					
а	-			> \$		
b	Assets included in F	orm 990, Part X				
LHA	For Paperwork Rec	luction Act Notice, see the Instru	ctions for Form 990.	Schee	dule D (Form 990) 2019	
93205	1 10-02-19		0.7			
			27			

13181008 793760 4146 2019.04030 BALTIMORE YEARLY MEETING OF 4146___1

	BALTIMO	RE YEARLY	MEETING OF	THE								
Sche	dule D (Form 990) 2019 RELIGIO	US SOCIETY	OF FRIEND	S INC.		5	52-08	56309) _{Pa}	age 2		
Par	t III Organizations Maintaining C	ollections of A	rt, Historical Tr	easures, c	or Othe	er Simila	ar Asse	ts(contin	ued)			
3	Using the organization's acquisition, accessi	on, and other record	ls, check any of the	following tha	t make s	significant i	use of its					
	collection items (check all that apply):											
а	Public exhibition	d	Loan or exc	hange progra	am							
b	Scholarly research	е										
с	Preservation for future generations											
4	Provide a description of the organization's co	plections and explain	n how thev further t	he organizatio	on's exe	mpt purpo	se in Par	t XIII.				
5	During the year, did the organization solicit o											
•	to be sold to raise funds rather than to be ma							Yes		No		
Par	t IV Escrow and Custodial Arran											
	reported an amount on Form 990, Par		ste in the englishment				, · u. · · · ,					
	Is the organization an agent, trustee, custod		liary for contribution	s or other as	sets not	included						
iu	on Form 990, Part X?							Yes		No		
h	If "Yes," explain the arrangement in Part XII	and complete the fe	llowing table:				<u> </u>		L			
D		and complete the lo	nowing table.					Amount				
								Amount				
	Beginning balance											
	Additions during the year											
	Distributions during the year											
f	Ending balance					1 f		1		1		
	Did the organization include an amount on Fe					• • • • • • • • • • • • • • • • • • • •	∟	Yes		No		
	b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII											
Par	Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.											
		(a) Current year	(b) Prior year	(c) Two year		(d) Three ye		<u> </u>				
	Beginning of year balance	651,974.	696,082.		4,540.		54,583.			019.		
b	Contributions	4,142.	3,806.		3,234.		16,538.		,	146.		
С	Net investment earnings, gains, and losses	103,465.	-18,914.	75	5,008.		75,819.		-3,	482.		
d	Grants or scholarships											
е	Other expenditures for facilities											
	and programs	26,000.	29,000.	21	1,700.	:	12,400.		22,	100.		
f	Administrative expenses											
	End of year balance	733,581.	651,974.	696	5,082.	63	34,540.		554,	583.		
	Provide the estimated percentage of the cur	rent year end balanc	e (line 1g, column (a	a)) held as:								
а	Board designated or quasi-endowment		%									
	Permanent endowment ► 54.67	%	_									
с	Term endowment 45.33	 %										
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.										
3a	Are there endowment funds not in the posse		ation that are held a	nd administe	red for th	he organiz	ation					
	by:					i e e guine		Г	Yes	No		
	(i) Unrelated organizations									X		
										X		
h	(ii) Related organizations If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	rad on Schodulo P2					3b				
4	Describe in Part XIII the intended uses of the							30 _				
<u> </u>	t VI Land, Buildings, and Equipm		witterit futius.									
	Complete if the organization answere) Part IV line 11a 9	See Form 990) Part X	line 10						
	Description of property	(a) Cost or o		or other		ccumulate	4	(d) Book	walu			
	Description of property	basis (investr		(other)	. ,	preciation			valu	e		
	Land	· · · · ·	,	6,496.	uep	Sicolation		1,106	5 1	96		
	Land			4,170.		336,74		$\frac{1,100}{1,347}$				
	Buildings			<u>4,170.</u> 7,380.		122,16		-		$\frac{23}{12}$		
	Leasehold improvements			-		163,36						
	Equipment			3,473.						$\frac{12}{2}$		
	Other			5,207.	_	133,71				92.		
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line 1	0c.)				2,730	-			
						5	Schedule	D (Form	990)	2019		

BALTIMORE	YEARLY	MEET	CING	OF	\mathbf{THE}
RELIGIOUS	SOCIETY	OF C	FRIE	ENDS	INC.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (including name of security) (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) Financial derivatives (2) Closely held equity interests (3) Other (A) (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" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ► Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25 (a) Description of liability (b) Book value 1. (1) Federal income taxes (2)(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

Schedule D (Form 990) 2019

932053 10-02-19

Schedule D (Form 990) 2019

Part VII Investments - Other Securities.

BALTIMORE	YEARLY	MEETING	OF	THE	

Sche	dule D (Form 990) 2019 RELIGIOUS SOCIETY OF FRIE	NDS INC.	52-0856309 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Staten	nents With Reve	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.	
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
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	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Pa	t XII Reconciliation of Expenses per Audited Financial State	ments With Expe	enses per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.	
1	Total expenses and losses per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments		
с	Other losses	2c	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
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		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		
Pa	t 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 V, LINE 4:

THE YEARLY MEETING HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ITS
ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING
TO PROGRAMS SUPPORTED BY ITS ENDOWMENT WHILE SEEKING TO MAINTAIN THE
PURCHASING POWER OF THESE ENDOWMENT ASSETS OVER THE LONG-TERM. THE YEARLY
MEETING'S SPENDING AND INVESTMENT POLICIES WORK TOGETHER TO ACHIEVE THIS
OBJECTIVE. THE INVESTMENT POLICY ESTABLISHES AN ACHIEVABLE RETURN
OBJECTIVE THROUGH DIVERSIFICATION OF ASSET CLASSES.

932054 10-02-19

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form990 for the latest information.												
Name of the organizati	ion BALTIMORE	YEARLY M	IEETING OF T					Inspection Employer identification number					
		SOCIETY	OF FRIENDS	INC.				52-0856309					
Part I General In	nformation on Grants a	nd Assistance											
1 Does the organiz	zation maintain records	to substantiate th	e amount of the grants	s or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the selec	tion					
criteria used to a	award the grants or assis	stance?						X Yes No					
 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 													
1 (a) Name and ac	deress of organization vernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance					
FRIENDS WORLD COM CONSULTATION - 15 PHILADELPHIA, PA	06 RACE STREET -	23-1353392	501(C)(3)	7,830.	0.			TO SUPPORT FRIENDS WORLD COMMITTEE FOR CONSULTATION (FWCC) IN PROVIDING A WORLD-WIDE					
								TO SUPPORT THE FRIENDS					
FRIENDS GENERAL C	ONFERENCE							GENERAL CONFERENCE					
1216 ARCH STREET,	2B							(FGC)'S WORK PROVIDING					
PHILADELPHIA, PA	19107	23-1352148	501(C)(3)	10,260.	0.			RESOURCES TO SUPPORT					
FRIENDS UNITED ME 101 QUAKER HILL D RICHMOND, IN 4737	DRIVE	35-0877573	501(C)(3)	8,910.	0.			TO SUPPORT FRIENDS UNITED MEETING (FUM)'S WORK WITH FRIENDS MEETINGS, CHURCHES AND COMMUNITY					
2 Enter total numb	per of section 501(c)(3) a	nd government o	rganizations listed in th	ne line 1 table				•					
	er of other organization												
LHA For Paperwork	Reduction Act Notice	, see the Instruct	tions for Form 990.					Schedule I (Form 990) (2019)					

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

RELIGIOUS SOCIETY OF FRIENDS INC.

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

52-0856309

Page 2

Part III can be duplicated if additional space is needed.

Schedule I (Form 990) (2019)

Part III

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance						
EDUCATION GRANTS TO HELP FRIENDS SECURE POST-SECONDARY EDUCATION	11	14,650.	0.								
SUE THOMAS TURNER GRANTS TO EDUCATORS AT QUAKER SCHOOLS TO SUPPORT THE USE OF QUAKER FAITH &											
PRACTICE	20	23,156.	0.								
INDIAN AFFAIRS	1	600.	0.								
Part IV Supplemental Information. Provide the information rec	uired in Part I, lir	ne 2; Part III, column	(b); and any other a	dditional information.							
PART I, LINE 2:											

EDUCATIONAL GRANTS AND SUE THOMAS TURNER GRANTS ARE DETERMINED BY SEPARATE

COMMITTEES CHARGED WITH ISSUING GRANTS FROM THE FUNDS RESTRICTED FOR THAT

PURPOSE. OTHER CONTRIBUTIONS TO THE ORGANIZATIONS ARE APPROVED BY THE

MEMBERSHIP AT OUR ANNUAL SESSION AS A PART OF THE ANNUAL BUDGET. BYM DOES

NOT ASK FOR PROOF OF USE ONCE THE GRANT OR CONTRIBUTION HAS BEEN ISSUED.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT:

Schedule I (Form 990) RELIG

FRIENDS WORLD COMMITTEE FOR CONSULTATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT FRIENDS WORLD COMMITTEE

FOR CONSULTATION (FWCC) IN PROVIDING A WORLD-WIDE NETWORK OF SUPPORT FOR

FRIENDS MEETINGS AND CHURCHES.

NAME OF ORGANIZATION OR GOVERNMENT: FRIENDS GENERAL CONFERENCE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE FRIENDS GENERAL

CONFERENCE (FGC)'S WORK PROVIDING RESOURCES TO SUPPORT FRIENDS MEETINGS

AND THEIR OUTREACH EFFORTS ACROSS THE USA AND CANADA.

NAME OF ORGANIZATION OR GOVERNMENT: FRIENDS UNITED MEETING

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT FRIENDS UNITED MEETING

(FUM)'S WORK WITH FRIENDS MEETINGS, CHURCHES AND COMMUNITY PROGRAMS IN

NORTH AMERICA, AFRICA AND THE MIDDLE EAST.

Schedule I (Form 990)

932291 04-01-19 SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047 **2019** Open to Public Inspection

Employer identification number 52 - 0856309

FORM 990, PART VI, SECTION A, LINE 6:

MEMBERS CONSIST OF ALL MEMBERS OF CONSTITUENT MONTHLY MEETINGS.

BALTIMORE YEARLY MEETING OF THE

RELIGIOUS SOCIETY OF FRIENDS INC.

FORM 990, PART VI, SECTION A, LINE 7A:

THE ANNUAL SESSION OF MEMBERS HAS THE POWER TO APPOINT THE TRUSTEES,

INCLUDING THE PRESIDING CLERK AND TREASURER.

FORM 990, PART VI, SECTION A, LINE 7B:

THE YEARLY MEETING AT ITS ANNUAL SESSION OR ANY OF ITS THREE INTERIM

MEETINGS THROUGH THE YEAR HAS THE POWER TO APPROVE OR NULLIFY THE DECISIONS

MADE BY THE BOARD OF TRUSTEES.

FORM 990, PART VI, SECTION B, LINE 11B:

THE 990 IS REVIEWED BY THE GENERAL SECRETARY, THE COMPTROLLER, THE

TREASURER AND THE TRUSTEES PRIOR TO FILING.

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

THE TRUSTEES OF THE ORGANIZATION READ AND SIGN A COPY OF THE POLICY EVERY YEAR. STAFF MEMBERS SIGN A RECEIPT OF THE POLICY WHICH IS INCLUDED IN THE EMPLOYEE MANUAL. THE POLICY IS ALSO REVIEWED WITH THE STAFF AT LEAST ONCE A YEAR. CONFLICTS ARE REPORTED TO THE GENERAL SECRETARY, PRESIDING CLERK OR CLERK OF TRUSTEES, AS APPROPRIATE.

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

ALL SALARIES ARE REVIEWED AND APPROVED ANNUALLY. THE ORGANIZATION USES

COMPARABILITY DATA TO DETERMINE THE COMPENSATION.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2019) 932211 09-06-19

34) ват.т

Schedule O (Form 990 or 990-EZ) (2019) Name of the organization BALTIMORI	E YEARLY MEETING OF THE	Page Page Page Page Page Page Page Page
RELIGIOUS	S SOCIETY OF FRIENDS INC.	52-0856309
FORM 990, PART VI, SEC	FION C, LINE 19:	
THE ORGANIZATION MAKES	ITS GOVERNING DOCUMENTS, CONFI	LICT OF INTEREST
POLICY, AND FINANCIAL	STATEMENTS AVAILABLE TO THE PU	BLIC UPON REQUEST.
32212 09-06-19		Schedule O (Form 990 or 990-EZ) (2
.81008 793760 4146	35 2019.04030 BALTIMORE YEAR	IN NEEDING OF 4146

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service		Related Organizations		AB No. 1549 201 pen to P	9 ublic					
Internal Revenue Service	ation BALTIMORE YEAR	► Go to www.irs.gov/Form990 RLY MEETING OF THE IETY OF FRIENDS IN		Inspection Employer identification number 52-0856309						
Part I Identifica	ation of Disregarded Entities. Comple	te if the organization answered "Yes	" on Form 990, Part IV, line 3	3.						
	(a) ddress, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state c foreign country)	(d) Dr Total inco	(e) me End-of-year	assets	Direct o	(f) rect controlling entity		
		-								
		-								
	ation of Related Tax-Exempt Organiz tions during the tax year.	ations. Complete if the organization	answered "Yes" on Form 990	0, Part IV, line 34, l	because it had one	or more rela	ited tax-exe	empt		
	(a) (b) Name, address, and EIN Primary activity of related organization		(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f Direct cc ent	ontrolling	contr ent	g) 512(b)(13) rolled tity?	
	EFICIAL SOCIETY OF BALTIMORE 15, 5116 N. CHARLES STREET, 21210	PROVIDES GRANTS TO OTHER TAX EXEMPT WELFARE ENTITIES	MARYLAND	501(C)(3)		BALTIMORE MEETING O RELIGIOUS	F THE	Yes	No	
For Paperwork Red	duction Act Notice, see the Instructio	ns for Form 990.				S	chedule R	Form 99		

For Paperwork Reduction Act Notice, see the Instructions for Form 990. SEE PART VII FOR CONTINUATIONS

Schedule R (Form 990) 2019 RELIGIOUS SOCIETY OF FRIENDS INC.

52-0856309 Page 2

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)	((h)	(i)	())	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	(related, excluded fro	ant income unrelated, om tax under	Share of total income	Share of end-of-yea assets	r	portionate ations?	amount in box	mana parti	^{al or} Perc ^{ging} er?	centage nership
		country)		sections	512-514)			Yes	No		Yes	No	
	_												
	_												
	_												
	_												
	_												
	_												
	4												
Part IV Identification of Related Or organizations treated as a construction of Related Or organizations treated as a construction of Related Or organizations treated as a construction of Related Or organization of Related Or organizatio	ganizations Taxable prporation or trust duri	as a Corp ng the tax	oration or Trust. C year.	omplete if th	e organizat	ion answered "Y	es" on Form 99	0, Part IV	, line 3	4, because it had	one c	r more r	related
(a)			(b)	(c)	(d)	(e)	(f)		(g)	(h)		(i) Section

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

Schedule R (Form 990) 2019 RELIGIOUS SOCIETY OF FRIENDS INC.

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.								
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?							
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х				
	Gift, grant, or capital contribution to related organization(s)	1b		Х				
	Gift, grant, or capital contribution from related organization(s)	1c	X					
	Loans or loan guarantees to or for related organization(s)	1d		X				
	Loans or loan guarantees by related organization(s)	1e		X				
f	Dividends from related organization(s)	1f		X				
g	Sale of assets to related organization(s)	1g		X				
h	Purchase of assets from related organization(s)	1h		X				
i	Exchange of assets with related organization(s)	1i		Х				
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X				
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X				
I.	Performance of services or membership or fundraising solicitations for related organization(s)	11		X				
n	n Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х				
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X				
	Sharing of paid employees with related organization(s)	10		Х				
р	Reimbursement paid to related organization(s) for expenses	1p		X				
q	Reimbursement paid by related organization(s) for expenses	1q		Х				
r	Other transfer of cash or property to related organization(s)	1r		Х				
s	Other transfer of cash or property from related organization(s)	1s		Х				
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.							

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
_(2)			
(3)			
(4)			
(5)			
_(6)	20		

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)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are a partners 501(c) orgs. Yes) ill (3) ? No	(f) Share of total income	(g) Share of end-of-year assets	(H Dispr tior alloca Yes	n) opor- iate tions? No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr Yes) ral or F ging ner? NO	(k) Percentage ownership

Schedule R (Form 990) 2019

Schedule R (Form 990) 2019 Part VII Supplemental Information

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

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME OF RELATED ORGANIZATION:

MILES WHITE BENEFICIAL SOCIETY OF BALTIMORE CITY

DIRECT CONTROLLING ENTITY: BALTIMORE YEARLY MEETING OF THE RELIGIOUS

SOCIETY OF FRIENDS INC.

Schedule R (Form 990) 2019

932165 09-10-19

(Rev. January 2020)

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

	File a	senarate ar	polication fo	r each return.	
I.		separate ap			

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

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 o print						axpayer identification number (TIN)			
-	RELIGIOUS SOCIETY OF FRIENDS INC.				52-0856309				
File by the due date filing your	date for Number, street, and room or suite no. If a P.O. box, see instructions.								
return. See instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. SANDY SPRING, MD 20860-1267									
Enter the Return Code for the return that this application is for (file a separate application for each return)									
Applic	ation	Return	Application			Return			
ls For		Code	Is For			Code			
Form 9	90 or Form 990-EZ	01	Form 990-T (corporation)			07			
Form 9	90-BL	02	Form 1041-A						
Form 4	720 (individual)	03	Form 4720 (other than individual)	09					
Form 9	90-PF	04	Form 5227						
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11			
Form 9	90-T (trust other than above) THE ORGANIZATI	06	Form 8870			12			
Tele If th If th box 1 1 1 1 1 1 1 1 1 1 1 1 1	the organization named above. The extension is for the organization's return for:								
	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.					0.			
	b 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.					0.			
estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by									
using EFTPS (Electronic Federal Tax Payment System). See instructions.						0.			
	n: If you are going to make an electronic funds withdrawa				nd Form 887	9-EO for payment			
I HA	For Privacy Act and Paperwork Reduction Act Notice	see instr	uctions.		Form 8	868 (Bev 1-2020)			

923841 12-30-19