Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury A For the 2010 cale Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

Inspection

A 1	or the 201	C Name of organization	and ending	D Employer identifica	tion number				
Вс	heck if applicable:	WIDE ANGLE YOUTH MEDIA, INC.		52-2276602					
	Address			32-22/0002	1				
-	change	Doing Business As Number and street (or P.O. box if mail is not delivered to street address) F	E Telephone number						
-	Name change	[[10일 : [] [10] [10] [10] [10] [10] [10] [10] [10] [10] [10] [10] [10] [10] [10] [10] [10]	Room/suite		100				
-	Initial return	2601 NORTH HOWARD ST	160	(443) 759-67	700				
	Terminated	City or town, state or country, and ZIP + 4		PART 1992 - A - AND 1997 (0.4.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.					
	Amended return	BALTIMORE, MD 21218		G Gross receipts \$	316,914.				
	Application pending	F Name and address of principal officer: GENEVIEVE ROANHOUSE		H(a) is this a group return f affiliates?	or Yes X No				
		801 S. LUZERNE AVENUE BALTIMORE, MD 21224.		H(b) Are all affiliates include	led? Yes No				
1	Tax-exempt s	atus: X 501(c)(3) 501(c)() ◀ (insert no.) 4947(a)(1) or	527	if "No," attach a list. (s	see instructions)				
J	Website: >	WWW.WIDEANGLEMEDIA.ORG		H(c) Group exemption num	ber ►				
K	Form of organ	ization: X Corporation Trust Association Other	L Year of	formation: 2001 M State of	f legal domicile: MD				
		mmary	1 1 1						
-									
	1 Briefly	describe the organization's mission or most significant activities: PROVIDE BALTIMORE YOUTH WITH MEDIA EDUCATION TO	O TELL S	PUPTD OWN					
8	10	PROVIDE BALLIMORE TOUTH WITH MEDIA EDUCATION IC	J IEDE	THEIR OWN					
ä	510	RIES AND BECOME ENGAGED IN THEIR COMMUNITIES.							
Activities & Governance									
ò	2 Check	this box 🕨 🔲 if the organization discontinued its operations or disposed of	f more than 2	25% of its net assets.					
*		er of voting members of the governing body (Part VI, line 1a)		3	10.				
98	4 Numb	er of independent voting members of the governing body (Part VI, line 1b)			10.				
-	5 Total	number of individuals employed in calendar year 2010 (Part V, line 2a)		5	15.				
ij		number of volunteers (estimate if necessary)			45.				
-	PATE STATE								
		nrelated business taxable income from Form 990-T, line 34			0.				
	D Net u	related business taxable income from Form 550-1, line 54		Prior Year	Current Year				
					188,650.				
9	8 Contr	butions and grants (Part VIII, line 1h)		162,149.					
ě	9 Progr	am service revenue (Part VIII, line 2g)		98,879.	125,346.				
Revenue	10 Invest	ment income (Part VIII, column (A), lines 3, 4, and 7d)			0.				
7	11 Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		4,989.	2,918.				
		revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		266,017.	316,914.				
	13 Grant	s and similar amounts paid (Part IX, column (A), lines 1-3)			0.				
		its paid to or for members (Part IX, column (A), line 4)			0.				
40	15 Salari	es, other compensation, employee benefits (Part IX, column (A), lines 5-10)	181,986.	216,830.					
Expenses	16 a Profes	ssional fundraising fees (Part IX, column (A), line 11e)		0.					
ě	h Total	fundraising expenses (Part IX, column (D), line 25) 1,991							
ŭ	17 Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		84,228.	87,853.				
				266,214.	304,683.				
				-197.	12,231.				
- 40	19 Rever	nue less expenses. Subtract line 18 from line 12		Beginning of Current Year	End of Year				
Net Assets or Fund Balances	CONTRACTOR			The second secon					
Sala	20 Total	assets (Part X, line 16)		76,571.	72,101.				
₹₽	21 Total	iabilities (Part X, line 26)		37,561.	20,860.				
욻근	22 Net a:	sets or fund balances. Subtract line 21 from line 20		39,010.	51,241.				
Pa	rt II Si	gnature Block							
Uni	der penalties o	f perjury, I declare that I have examined this return, including accompanying schedules a	nd statements	, and to the best of my knowledge	ge and belief, it is true,				
cor	rect, and com	olete. Declaration of preparer (other than officer) is based on all information of which prep	parer has any	knowledge.					
S	ign 🕨	Yes ordered Attack Course -		Vinl	12				
	ere	Signature of officer		Date					
	0.0	Genevieve Roanhouse, Board P	par w	ent					
			1026						
_	1211	Type or print name and title	Date	Charle II	DTIN				
Paid		Type preparer's name Preparer's signature	Date	Check if self-	PTIN				
	100-200-0			employed >	P00252478				
	Only Firm's	name > REZNICK GROUP, P.C.		Firm's EIN ▶ 52-1	088612				
U56	Unity	address > 500 EAST PRATT STREET, SUITE 200 BALTIMORE, MD 21202-3100	0	Phone no. 410-	783-4900				
May		this action with the access the search and the least continued			X Yes No				
		The state of the s			100				

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2010)

Form 8868

(Rev. January 2011)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

File a separate application for each return.

internal recon	lide Service				
If you a	re filing for an Automatic 3-Month Extensio re filing for an Additional (Not Automatic) 3	n, complete o	only Part I and check this box	2 of this form).	.►△
Do not cor	mplete Part II unless you have already been	granted an au	tomatic 3-month extension on a prev	viously filed Form 8868	
Electronic a corpora 8868 to r Return fo instruction	filing (e-file). You can electronically file Fortion required to file Form 990-T), or an addition required to file Form 990-T), or an additional equest an extension of time to file any of the Transfers Associated With Certain Persons). For more details on the electronic filing of	rm 8868 if yo itional (not au the forms liste onal Benefit of this form, vis	u need a 3-month automatic extens tomatic) 3-month extension of time, ed in Part I or Part II with the excep Contracts, which must be sent to sit www.irs.gov/efile and click on e-fil	You can electronically otion of Form 8870, In the IRS in paper for	months for y file Form nformation ormat (see
Part I	Automatic 3-Month Extension of Time.	Only submit	original (no copies needed).		
A corpora	tion required to file Form 990-T and reques	ting an autom	atic 6-month extension - check this b	ox and complete	-
					▶ 🔲
All other o	corporations (including 1120-C filers), partner	erships, REMIC	Cs, and trusts must use Form 7004 to	request an extension o	f time
	ome tax returns.				
Type or	Name of exempt organization			Employer identification	
print	WIDE ANGLE YOUTH MEDIA, IN	VC.	The state of the s	52-2276602	
File by the	Number, street, and room or suite no. If a P.C), box, see instru	ctions.		
due date for	2601 NORTH HOWARD ST				
filing your return. See	City, town or post office, state, and ZIP code.	For a foreign ac	ddress, see instructions.		
instructions	BALTIMORE, MD 21218				
Enter the	Return code for the return that this applicat	ion is for (file	a separate application for each return)	. 01
Annilanti		Return	Application		Return
Application Is For	on	Code	Is For		Code
-		01	Form 990-T (corporation)		07
Form 990		02	Form 1041-A		08
Form 990		03	Form 4720		09
Form 990		04	Form 5227		10
Form 990	THE RESERVE OF THE PROPERTY OF	05	Form 6069		11
-	0-T (sec. 401(a) or 408(a) trust)	06	Form 8870		12
Form 990)-T (trust other than above)	1 00			
The bo	ooks are in the care of SUSAN MALON	E			
Tolonk	one No. ▶ 443 759-6700		FAX No. ▶		
- If the c	organization does not have an office or place				
- If this i	s for a Group Return, enter the organization	s four digit Gr	oup Exemption Number (GEN)	. If th	nis is
for the w	hole group, check this box	If it is for p	art of the group, check this box	▶ and att	ach
a liet math	the names and FINs of all members the ex	tension is for.			
1 I red	quest an automatic 3-month (6 months for a	corporation r	required to file Form 990-T) extension	n of time	
unti	02/15 , 20 12 , to file	the exempt or	rganization return for the organizatio	n named above. The o	extension is
3,500	the organization's return for:	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
>	calendar year 20 or				
•	X tax year beginning	07/01 . 201	.0 , and ending	06/30, 2011	
			2		
2 If th	e tax year entered in line 1 is for less than Change in accounting period	12 months, che	eck reason: Initial return	Final return	
3a If 1	his application is for Form 990-BL, 990-Pl	F. 990-T. 472	0, or 6069, enter the tentative ta	x, less any	
nor	refundable credits. See instructions.		The second secon	3a \$	
b If I	this application is for Form 990-PF, 99	0-T, 4720, d	or 6069, enter any refundable of	redits and	
est	imated tax payments made. Include any prio	r year overpay	ment allowed as a credit.	3b \$	
c Bal	ance Due. Subtract line 3b from line 3a. Inc	lude your pay	ment with this form, if required, by u	sing EFTPS	
/E1	actronic Federal Tay Payment System). See it	nstructions		3c 5 /L	vice .
Caution.	If you are going to make an electronic fu	and withdrawa	al with this Form 8868, see Form	8453-EO and Form 8	1879-EO for
	instructions.				
	pwork Reduction Act Notice see Instructions.			Form 8868	Rev. 1-2011

If "Yes," describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program	Form 990 (20	10)		52-2276602	Page 2
1 Briefly describe the organization's mission: TO PROVIDE SALTIBORE COUTH WITH MEDIA EDUCATION TO TELL THEIR OWN STORIES AND BECOME ENGAGED IN THEIR COMMUNITIES. 2 Did the organization undertake any significant program services during the year which were not listed on	Part III	Statement of Program Service Check if Schedule O contains	e Accomplishments a response to any question in this Part III		
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If Yes, Georgia these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If Yes, describe these changes on Schedule O. Describe the evempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code:) (Expenses \$	TO PR	describe the organization's mis	ssion: H WITH MEDIA EDUCATION TO TE		
the prior Form 990 or 990-E27 If Yes, describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If Yes, 'describe these changes on Schedule O. 4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code:) (Expenses \$	STORI	IES AND BECOME ENGAGE	D IN THEIR COMMUNITIES.		
3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code:) (Expenses \$	the price	or Form 990 or 990-EZ?			
4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code:) (Expenses\$	3 Did the service	e organization cease conductings?	g, or make significant changes in how		Yes X No
4b (Code:) (Expenses\$including grants of \$) (Revenue \$) 4c (Code:) (Expenses\$including grants of \$) (Revenue \$) 4d Other program services. (Describe in Schedule O.) (Expenses\$including grants of \$) (Revenue \$)	4 Describ Section	be the exempt purpose achieve n 501(c)(3) and 501(c)(4) orga	ements for each of the organization's three nizations and section 4947(a)(1) trusts ar	e required to report the amount of	
4c (Code:) (Expenses \$including grants of \$) (Revenue \$) 4d Other program services. (Describe in Schedule O.) (Expenses \$including grants of \$) (Revenue \$)			273,169. including grants of \$	(Revenue \$	128,264.)
4c (Code:) (Expenses \$including grants of \$) (Revenue \$) 4d Other program services. (Describe in Schedule O.) (Expenses \$including grants of \$) (Revenue \$)					
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(Expenses \$ including grants of \$) (Revenue \$)	-				
(Expenses \$ including grants of \$) (Revenue \$)					
	4d Other p	program services. (Describe in S	Schedule O.)		
			The state of the s	e\$)	

Page 3

Part	Checklist of Required Schedules		v I	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	^	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	3		х
	candidates for public office? If "Yes," complete Schedule C, Part I	3		^
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	4		x
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		-
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	5		
	Part III	-		
6	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	- 1	x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
٥	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			-
•	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	1		
	complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes, "complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	1700	Fig. S	
	VII, VIII, IX, or X as applicable.		Time!	1
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	11a	X	
ь	Did the organization report an amount for investments-othersecurities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
C	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			-62
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	r Residen	123	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"	33.53	43	
	complete Schedule D, Parts XI, XII, and XIII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	1000		20
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	_	X
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? 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 assistance to any	45		X
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		^
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	40		х
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	_	^
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	17		x
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	11		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	18		x
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	10		^
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	19		x
20 -	If "Yes," complete Schedule G, Part III	20a	- 7	X
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form	200		
ь		20b		
	AAA MAN ABANAN AND AN MAN MANAN MAN MAN AND AND AND AND AND AND AND AND AND A			

52-2276602

Par	Checklist of Required Schedules (continued)		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	200		
	to defease any tax-exempt bonds?	24c	_	_
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		_
25 a		-		222
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	-	X
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	2		
	If "Yes," complete Schedule L, Part I	25b	-	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			· ·
	disqualified person outstanding as of the end of the organization's tax year? If "Yes, "complete Schedule L, Part II.	26	_	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	27		x
20	If "Yes," complete Schedule L, Part III	27	11.72	^
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	-01	1.5	
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	28a	J. Lake	x
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	208		^
ь	Schedule L, Part IV	28b		x
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200	-	
C	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			-
30	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	-		-
•	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	-		
73	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
3.5	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
а	Did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,			
	Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	L.		16
	related organization? If "Yes,"complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	F2522		30
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	150	-	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
		Enro	000	/2010

Par		ar Transfer	39697547	
	Check if Schedule O contains a response to any question in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 7	THE PERSON NAMED IN		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	-		1 3
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	x	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			TO S
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 15	- 16		1 5
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	M		200
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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:	100		- 30
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	153	925	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	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?	6a		Х
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).	1		310
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	- 3		18
	and services provided to the payor?	7a		Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
1000	required to file Form 8282?	7c		Х
	If "Yes," indicate the number of Forms 8282 filed during the year	-		v
3.2	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	-	^
g		7g		
200	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	8	ACCORDED	
9	organization, have excess business holdings at any time during the year?		1=0.00	mi
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a	recomm	
h	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	1167		- 18
	Initiation fees and capital contributions included on Part VIII, line 12			3 1
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			150
11	Section 501(c)(12) organizations. Enter:			3
	Gross income from members or shareholders	E ST	1961	-7
	Gross income from other sources (Do not net amounts due or paid to other sources	4.3	1132	B (
	against amounts due or received from them.)	H	HE	= 0
12 a	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 12b	- 6	1000	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	1	931	3/4
b	Enter the amount of reserves the organization is required to maintain by the states in which	1100	FILE	77
	the organization is licensed to issue qualified health plans	LE	100	
	Enter the amount of reserves on hand	- des	The Later	182
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	_	Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 9	90 (2010) 52-2276602		1	Page 6
	Vi Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7 for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, of Schedule O. See instructions.	b bel r cha	ow, a	and s in
	Check if Schedule O contains a response to any question in this Part VI			X
Sect	tion A. Governing Body and Management			
	9 21 82		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 10	1000		
b	Enter the number of voting members included in line 1a, above, who are independent		li ili	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		SILE	v
	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		11 1	X
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3	_	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6	-	X
6	Does the organization have members or stockholders?			-
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	7a	1 4	x
12	of the governing body?	7b		X
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7.0	7-3	2/1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:	8a	х	
a	The governing body?	8b	Х	
ь	Education man definition of the design of the general groups	UD		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue		.)	
-			Yes	No
10 a	Does the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	CHAIR CO		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
15.1.5%	form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		200	
12a	있으면 하는 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		1543	
	rise to conflicts?	12b	X	_
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		500	
	describe in Schedule O how this is done	12c	Х	_
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does 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		VO.	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		-	
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		18-	7
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		LEGII,	
	with a taxable entity during the year?	16a		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			-
	the organization's exempt status with respect to such arrangements?	16b		_
19217	tion C. Disclosure		_	
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only	()		
	available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request			
0220				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
DEEP!	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: SUSAN_MALONE 2601 N HOWARD ST. SUITE 160 BALTIMORE, MD 21218 443-759-6700			

Form 990 (2010)

PAGE 8

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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors	243466

Check if Schedule O contains a response to any question 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.

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

(A)		B) (C)						(D)	(E)	(F)
Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	ndividual trustee	institutional trustee	Officer	Key employee	a Highest compensated at employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) GENEVIEVE ROANHOUSE PRESIDENT	1.00	x		х				0.	0.	(
(2) VALERIE KNIGHT YOUNG TREASURER	1.00	х		х				0.	0.	(
(3) HEATHER ROSENBLOOM SECRETARY	1.00	х		х				0.	0.	(
(4) JOHN DEAN BOARD MEMBER	1.00	х						0.	0.	(
(5) IRVIN DEANDREI DRUMMOND BOARD MEMBER	1.00	х						0.	0.	
(6) RACHEL ELLIOTT BOARD MEMBER	1.00	х						0.	0.	(
(7) SHARON FLYNN BOARD MEMBER	1.00	х						0.	0.	(
(8) JOSEPH HARRINGTON BOARD MEMBER	1.00	х						0.	0.	(
(9) DOUGLAS LEE BOARD MEMBER	1.00	х						0.	0	
(10)MARK PHELPS BOARD MEMBER	1.00	х						0.	0	
(11)SUSAN MALONE EXECUTIVE DIRECTOR	40.00			х				43,138.	0	(
(12)										
(13)										
(14)										
(15)										
(16)										

Form 990 (2010)

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Compensation No. N	tinued) (F)	
(18) (20) (21) (22) (23) (24) (25) (26) (27) (28) 1b Sub-total (27) (28) 1c Total from continuation sheets to Part VII, Section A (27) (28) (29) (29) (20) (20) (21) (22) (23) 24) (25) (26) (27) (28) 27) (28) 28) 29 43, 138. 0 47, 138. 0 10 Total from continuation sheets to Part VII, Section A (27) (28) (29) (29) (29) (29) (29) (29) (29) (20) (20) (21) (21) (22) (23) (24) (25) (26) (27) (28) (29) (29) (29) (29) (29) (29) (29) (29	Estimated amount of other ompensation from the organization and related rganizations	
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(24) (25) (26) (27) (28) 1b Sub-total		
(25) (26) (27) (28) 1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (iacluding but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 compensation from the organization. (A) (B)		
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28		
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employee on line 1a? If "Yes," complete Schedule J for such individual	Yes No	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	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	X	
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 compensation from the organization.	×	
compensation from the organization. (A) (B)		
(A) Name and business address (B) Description of services Compe	of	
	c) nsation	
2 Total number of independent contractors (including but not limited to those listed above) who received		

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta under sections 512, 513, or 514
1a	Federated campaigns 1a			AND I	
b	Membership dues 1b				
c	Fundraising events 1c		1000		(1) 日日日
d	Related organizations 1d	3			第5 三頭
	Government grants (contributions) 1e 71,610.	HERE THE STATE OF			第二 报
f	All other contributions, gifts, grants,				S. A. B.
	and similar amounts not included above . 1f 117,040.	2 2			
	Noncash contributions included in lines 1a-1f: \$		-		SI MARINE
h	Total. Add lines 1a-1f	188,650.	100	THE THE	726
	Business Code			· · · · · · · · · · · · · · · · · · ·	12500
2-	PROGRAM REVENUE	119,603.	119,603.		
2a	PROGRAM EXPENSE REIMBURSEMENTS	5,743.	5,743.		
ь		3,743.	3,143.		
C	· · · · · · · · · · · · · · · · · · ·				
d					
е					
f	All other program service revenue		V III	111111111111111111111111111111111111111	The last of the la
<u>g</u>	Total. Add lines 2a-2f	125,346.			No. of Concession, Name of Street, or other Persons, Name of Street, Name of S
3	Investment income (including dividends, interest, and				
	other similar amounts)	0.			
4	Income from investment of tax-exempt bond proceeds	0.			_
5	Royalties · · · · · (i) Real (ii) Personal	0.	30-	TOTAL T	- 1255-
		B. 11-27	1		# ** The
6a	Gross Rents	200 S.C.	100 (98)		Z IIIIAF
b	Less: rental expenses	100			
c	Rental income or (loss)	ISS TURBER BUT			CONSTRUCTOR
d	Net rental income or (loss)	0.			
7a	Gross amount from sales of (i) Securities (ii) Other	13111	Ballet Hall		100
	assets other than inventory		1900		
b	Less: cost or other basis				
	and sales expenses	3 2 3	THE SECURE		
c	Gain or (loss)	102			
d	Net gain or (loss)	0.			
8a	Gross income from fundraising	35%		HARAS STATE	0 1
S20.	events (not including \$	1430			
	of contributions reported on line 1c).	THE REAL PROPERTY.	-38		100
	See Part IV, line 18	四年 计从			1100
	Less: direct expenses b	AND STATE OF THE PARTY OF THE P			TO THE
c	Net income or (loss) from fundraising events . ATCH. 2.▶	2,918.	10		
9a	Gross income from gaming activities. See Part IV, line 19		城門 浦		
h	Less: direct expenses b				1500
b	Net income or (loss) from gaming activities	0.			
10a	Gross sales of inventory, less returns and allowances				
ь	Less: cost of goods sold b	THE REAL PROPERTY.	S(2) = (3)	32 100	
С	Net income or (loss) from sales of inventory ▶	0.			
	Miscellaneous Revenue Business Code	750 11-10	A STATE OF THE STA		ALC: UNK
11a					
ь					
c					
d	All other revenue				
	Total. Add lines 11a-11d	0.	200	THE WAY A STATE OF	SATURES.
	- (316,914.	125,346.		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and	1,0281		100	
	organizations in the U.S. See Part IV, line 21	0.			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0.			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the	174981		Parks .	
	U.S. See Part IV, lines 15 and 16	0.			The second
4	Benefits paid to or for members	0.		2	
5	Compensation of current officers, directors, trustees, and key employees	48,567.	43,847.	4,563.	157
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				-
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	143,125.	129,217.	13,447.	461
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	0.			
9	Other employee benefits	11,460.	11,262.	198.	0
0	Payroll taxes	13,678.	11,835.	1,798.	45
1	Fees for services (non-employees):				
	Management	0.			
	Legal	0.			
	Accounting	4,000.	3,315.	685.	0
	Lobbying	0.			
	Professional fundraising services. See Part IV, line 17	0.			
	Investment management fees	0.			
	Other	5,601.	5,601.	0.	0
2	Advertising and promotion	0.			
3	Office expenses	6,220.	4,427.	1,732.	61
	0.5 TO 0.5 TO 10.5 TO 1	0.			
4	Information technology	0.			
5	Royalties	27,657.	23,483.	4,173.	1
6	Occupancy	0.	,		
7	Travel				
8	Payments of travel or entertainment expenses	0.			
	for any federal, state, or local public officials	6,037.	5,462.	575.	0
9	Conferences, conventions, and meetings	0,037.	5,102.	3,3,	
20	Interest	0.			
21	Payments to affiliates	9,900.	9,900.	0.	0
22	Depreciation, depletion, and amortization	2,734.	2,607.	127.	0
23	Insurance	2,734.	2,001.	127.	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24f. If			San Nation	
	line 24f amount exceeds 10% of line 25, column		A THE PARTY OF THE		
	(A) amount, list line 24f expenses on Schedule O.)	0.050	1 760	296.	0
	PAYROLL SERVICES	2,058.	1,762.	0.	0
	STIPENDS	3,671.	3,671.	256.	568
	POSTAGE & DELIVERY	1,877.	1,053.	232.	627
	PRINTING & PUBLICATIONS	5,254.	4,395.		71
е	PROGRAM EVENTS	11,491.	10,882.	538.	- /1
	All other expenses	1,353.	450.	903.	1 001
	Total functional expenses. Add lines 1 through 24f	304,683.	273,169.	29,523.	1,991
26	Joint Costs. Check here ▶ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

52-2276602 Page 11

				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		10,689.	1	32,088.
	2	Savings and temporary cash investments			2	
		Pledges and grants receivable, net		0.	3	6,216
	4	Accounts receivable, net		42,485.	4	9,744
П	4.00	Receivables from current and former officers, dir	rectors, trustees, key		100	
	250	employees, and highest compensated employees.				
1		Schedule L		5		
	6	Receivables from other disqualified persons (as defined under s		Heigh.	100	SEL XIL
	254	described in section 4958(c)(3)(B), and contributing employers and				
		section 501(c)(9) voluntary employees' beneficiary organizations (see			6	
22	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
- 1	9	Prepaid expenses and deferred charges	дтсн з	0.	9	1,087
11		그는 1940년 이 하다 그 전문 2000년 전문이 전문이 어느 아이들이 이 하는데 아는데 사용 중심하다. 그는데 없는데 아그는 그는데 나는데 아니는 사용에 하는데 살다.	7 ALOIL 3		9	1,007
1	u a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a	39,484.			
П		other basis. Complete Part VI or Schedule D 100	19 617	21,299.	40-	20,867
		Less: accumulated depreciation		21,233.	11	20,001
. 130	1	Investments - publicly traded securities	The state of the s		-	
	2	Investments - other securities. See Part IV, line 11			12	
	3	Investments - program-related. See Part IV, line 11 .		-		
	4	Intangible assets		2 000	14	2 000
1.0	15	Other assets. See Part IV, line 11	Editorio and the control of the cont	2,098.	_	2,099
-	6	Total assets. Add lines 1 through 15 (must equal line 3		76,571.	_	72,101
1100	7	Accounts payable and accrued expenses		23,998.		15,860.
100	8	Grants payable			18	
	9	Deferred revenue	1400000 1440 100000 00000 00000 00000 00000 00000 0000	0.	-	5,000
. 15	20	Tax-exempt bond liabilities			20	
2	21	Escrow or custodial account liability. Complete Pa	강에는 그렇게 안 하지 않는데 아이들이 없는데 하지만 하다.		21	Contract of the Contract of th
<u></u> 2	22	Payables to current and former officers, dire		a little		
Liabilities		employees, highest compensated employees, and	[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]			
1		Complete Part II of Schedule L			22	
1100	23	Secured mortgages and notes payable to unrelated thin	d parties		23	
100		Unsecured notes and loans payable to unrelated third p			24	
2	25	Other liabilities. Complete Part X of Schedule D		13,563.	25	0
2	26	Total liabilities. Add lines 17 through 25		37,561.	26	20,860.
2		Organizations that follow SFAS 117, check here lines 27 through 29, and lines 33 and 34.	X and complete			
2	27	Unrestricted net assets		39,010.	27	51,241.
2	28	Temporarily restricted net assets			28	
2	29	Permanently restricted net assets	<u></u>		29	
2 2 2 3 3 3 3 3		Organizations that do not follow SFAS 117, check her complete lines 30 through 34.				
3 3	10				30	
3		Paid-in or capital surplus, or land, building, or equipmen			31	
3		Retained earnings, endowment, accumulated income, of			32	
1 3		Total net assets or fund balances		39,010.	33	51,241.
	4	Total liabilities and net assets/fund balances		76,571.		72,101.

Form 990 (2010)

Form 990 (2010)

52-2276602 Page 12 Form 990 (2010) **Reconciliation of Net Assets** Part XI Check if Schedule O contains a response to any question in this Part XI 316,914. 304,683. 2 2 12,231. 3 3 39,010. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, 51,241. Financial Statements and Reporting Part XII Check if Schedule O contains a response to any question in this Part XII Yes No Accounting method used to prepare the Form 990: Cash X Accrual If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2b X b Were the organization's financial statements audited by an independent accountant? c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c X If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: Both consolidated and separate basis Consolidated basis X | Separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the 3b required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form 990 (2010)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Internal Revenue Service Employer identification number Name of the organization 52-2276602 WIDE ANGLE YOUTH MEDIA, INC. Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. Type III - Other Type III - Functionally integrated b Type II C By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting f Since August 17, 2006, has the organization accepted any gift or contribution from any of the a following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No 11g(i) and (iii) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (vii) Amount of (i) Name of supported (ii) EIN (III) Type of organization (iv) is the (v) Did you notify (vi) Is the organization in col. (i) listed in organization in (described on lines 1-9 the organization support organization above or IRC section in col. (i) of col. (i) organized (see instructions)) your support? in the U.S.? nent? docu Vos No Yes No Yes No (A) (B) (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2010

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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	70,340.	146,914.	209,811.	162,149.	188,650.	777,864.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	70,340.	146,914.	209,811.	162,149.	188,650.	777,864.
5	The portion of total contributions by each			STATE AND SE	THE REAL PROPERTY.	South In the	
	person (other than a governmental unit or publicly supported organization) included	重 事法					13
	on line 1 that exceeds 2% of the amount	100				SEPRES .	
6	shown on line 11, column (f)				STEWN MOTOR		777,864.
Sec	tion B. Total Support			AND ASSESSMENT OF PERSONS			1111,004.
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	70,340.	146,914.	209,811.	162,149.	188,650.	777,864.
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 IV.)	2,784.	2,888.	10,155.	1,243.		17,070.
11	Total support. Add lines 7 through 10					1102	794,934.
12	Gross receipts from related activities, etc. (se	e instructions) .	.		L	12	227,143.
13	First five years. If the Form 990 is for organization, check this box and stop here						
Sec	tion C. Computation of Public Supp		1775 and the same of the same				
14	Public support percentage for 2010 (line					14	97.85%
15	Public support percentage from 2009 Sc					15	91.84%
16a	33 1/3 % support test - 2010. If the or						
74	this box and stop here. The organizatio						
D	33 1/3 % support test - 2009. If the o check this box and stop here. The orga						The state of the s
17a	10%-facts-and-circumstances test -20	010. If the organ	nization did not	check a box on	line 13, 16a or	16b, and line 14	is 10%
	or more, and if the organization me Part IV how the organization meets the	he "facts-and-cir	rcumstances" te	est. The organiz	ation qualifies a	as a publicly su	
b	organization						▶ □□ and line
	15 is 10% or more, and if the orga Explain in Part IV how the organization	n meets the "fa	acts-and-circum	stances" test. T	he organization	qualifies as a	publicly
18	supported organization Private foundation. If the organization	did not check	a box on line	13, 16a, 16b,	17a, or 17b, o	check this box	and see
-	instructions					hedule A (Form 990	

Part III

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support		9				
C	alendar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf						
5	The value of services or facilities						
,	furnished by a governmental unit to the						
	organization without charge		-	-	-		
6	Total. Add lines 1 through 5		-	-	-	_	
/a	Amounts included on lines 1, 2, and 3						
h	Amounts included on lines 2 and 3		-				
	received from other than disqualified						
	received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13						
	for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
_	line 6.)		TOTAL STREET	E SING		DOS DOS	
	tion B. Total Support						
C	alendar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.		24 0	ATT I I			
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income, Do not include gain or						
	loss from the sale of capital assets		100				
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organizatio	n's first, second,	third, fourth, or	fifth tax year	as a section 501	(c)(3)
	organization, check this box and stop here .						▶
Sec	tion C. Computation of Public Supp	port Percent	tage				
15	Public support percentage for 2010 (line 8, col	iumn (f) divided	by line 13, column	(f))		15	%
16	Public support percentage from 2009 Schedul	e A, Part III, line	15			16	%
Sec	tion D. Computation of Investment						
17	Investment income percentage for 2010 (line	e 10c. column (f) divided by line 13	3. column (f))		17	%
18	Investment income percentage from 2009 S	어린 경기 영리를 하게 되었다. 본 시간 [1]				18	%
	33 1/3 % support tests - 2010. If the orga						
	17 is not more than 331/3 %, check this						5000 St. 195.000.
i.	33 1/3 % support tests - 2009. If the organ					발생하다 하나 있는 것 같아.	
D	line 18 is not more than 331/3 %, check						
20	Private foundation. If the organization d			The second secon			
20	riivate iounidation. Il tile organization d	io not check	a box on line	14, 100, 01 191	, GIEGA UIIS DI	A dilu see ilisti	dollorio -

Page 4

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2010

Name of the organization		Employer identification number
WIDE ANGLE YOUTH M	MEDIA, INC.	52-2276602
Organization type (check of	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	9
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a privi	ate foundation
	501(c)(3) taxable private foundation	
	on filing Form 990, 990-EZ, or 990-PF that received, during the year	r, \$5,000 or more (in money or
property) from an Special Rules	y one contributor. Complete Parts I and II.	
X For a section 501 sections 509(a)(1	I (c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 (l) and 170(b)(1)(A)(vi), and received from any one contributor, during ,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (i	g the year, a contribution of the
the year, aggrega	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that receivate contributions of more than \$1,000 for use exclusively for religiouses, or the prevention of cruelty to children or animals. Complete P.	ous, charitable, scientific, literary, or
the year, contribution aggregate to most year for an exclusion applies to this organization.	I(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that receivations for use exclusively for religious, charitable, etc., purposes, but the standard standa	at these contributions did not ons that were received during the e parts unless the General Rule etc., contributions of \$5,000 or more
990-EZ, or 990-PF), but it	nat is not covered by the General Rule and/or the Special Rules does must answer "No" on Part IV, line 2 of its Form 990, or check the bo o certify that it does not meet the filing requirements of Schedule B (I	x on line H of its Form 990-EZ, or on
For Panenwork Reduction Act No	otice, see the instructions for Form 990, 990-EZ, or 990-PF.	Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

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

Name of organization WIDE ANGLE YOUTH MEDIA, INC.

Employer identification number 52-2276602

Part I Contributors (see instructions)

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
1_	M & T CHARITABLE FOUNDATION 24 SOUTH CHARLES STREET, 22ND FLOOR BALTIMORE, MD 21201	\$ <u>13,500.</u>	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
2_	ANNIE E. CASEY FOUNDATION 701 ST. PAUL ST BALTIMORE, MD 21202	\$ <u>15,000.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
3 _	BALTIMORE COMMUNITY FOUNDATION 2 EAST READ ST BALTIMORE, MD 21202	\$15,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
4 _	ANGELICA PEALE ALLAN AND WARDE B. ALLAN 2 EAST READ ST BALTIMORE, MD 21202	\$7 <u>,516</u> .	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
5	ROBERT W. DEUTSCH FOUNDATION 1122 KENILWORTH DRIVE, SUITE 201 BALTIMORE, MD 21204	\$17,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
		(2)	(d)
(a)	(b)	(c)	Type of contribution
No.	Name, address, and ZIP + 4	Aggregate contributions	

Name of organization	WIDE	ANGLE	YOUTH	MEDIA,	INC.

Page____ of ____ of Employer identification number 52-2276602

T CITY	Contributors (see instructions)	W-19-19-19-19-19-19-19-19-19-19-19-19-19-	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7 _	MARYLAND STATE ARTS COUNCIL 175 WEST OSTEND ST., SUITE E BALTIMORE, MD 21230	\$10,721.	Person X Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8_	FAMILY LEAGUE OF BALTIMORE 2305 N. CHARLES ST, SUITE 200 BALTIMORE, MD 21218	\$60,889.	Person X Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

WID	E ANGLE YOUTH MEDIA, INC.			52-2276602
Par	Organizations Maintaining Donor Adv organization answered "Yes" to Form 9	vised Funds or Othe 90, Part IV, line 6.	er Similar Funds o	The first during the first state of the stat
		(a) Donor adv	vised funds	(b) Funds and other accounts
1	Total number at end of year			5000
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor adv	vience in writing that the	assets held in dono	r advised
	funds are the organization's property, subject to the	organization's exclusiv	e legal control?	Yes No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ber	donor advisors in writ	ting that grant funds of	can be
	purpose conferring impermissible private benefit?			Yes No_
Par	Conservation Easements. Complete if	the organization an	swered "Yes" to Fo	orm 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the o	organization (check all	that apply).	
	Preservation of land for public use (e.g., recrea	ation or education)	Preservation of	of an historically important land area
	Protection of natural habitat	**************************************	Preservation of	of a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held	d a qualified conservat	ion contribution in the	e form of a conservation
	easement on the last day of the tax year.			
				Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			
С	Number of conservation easements on a certified his			
d	Number of conservation easements included in (c) a	acquired after 8/17/06,	and not on a	
	historic structure listed in the National Register			2d
3	Number of conservation easements modified, transf	erred, released, exting	uished, or terminated	by the organization during the
	tax year ▶			
4	Number of states where property subject to conserv	ation easement is loca	ted >	
5	Does the organization have a written policy regarding	g the periodic monitori	ing, inspection, handl	ling of
	violations, and enforcement of the conservation eas-	ements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, ins	pecting, and enforcing	conservation easem	ents during the year
	>			
7	Amount of expenses incurred in monitoring, inspecti	ing, and enforcing cons	servation easements	during the year
	►\$			
8	Does each conservation easement reported on line	2(d) above satisfy the	requirements of secti	
	(i) and 170(h)(4)(B)(ii)?			Yes No
9	In Part XIV, describe how the organization reports o	onservation easement	s in its revenue and e	expense statement, and
	balance sheet, and include, if applicable, the text of		anization's financial s	statements that describes the
	organization's accounting for conservation easemen			
Pa	t III Organizations Maintaining Collection Complete if the organization answered	s of Art, Historical "Yes" to Form 990,	Treasures, or Oth Part IV, line 8.	er Similar Assets.
1a	If the organization elected, as permitted under S works of art, historical treasures, or other simil public service, provide, in Part XIV, the text of the	FAS 116 (ASC 958), ar assets held for profootnote to its financia	not to report in its ublic exhibition, edu al statements that de	revenue statement and balance sheet ucation, or research in furtherance of escribes these items.
b	If the organization elected, as permitted under works of art, historical treasures, or other simil public service, provide the following amounts relat	SFAS 116 (ASC 958 lar assets held for poting to these items:	to report in its ublic exhibition, edu	revenue statement and balance sheet ucation, or research in furtherance of
	(i) Revenues included in Form 990, Part VIII, line 1			
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of a			
	following amounts required to be reported under S			
а	Revenues included in Form 990, Part VIII, line 1 .			> \$
b	Assets included in Form 990, Part X			▶\$

Par	Organizations Maintaini	ng Collections	of Art, Hist	orical Treas	ures, o	r Other Similar	Assets(c	ontinued)	
3	Using the organization's acquisition collection items (check all that app		d other reco	ords, check ar	y of the	e following that a	ire a sign	ificant use	of its
а	Public exhibition		d [Loan or	exchan	ge programs			
b	Scholarly research		e	Other					
C	Preservation for future ger	nerations	_						
4	Provide a description of the organ		ns and exp	lain how they	further	the organization's	s exempt	purpose	in Part
	XIV.								
5	During the year, did the organization assets to be sold to raise funds rath							∀es [No
Par	line 9, or reported an am	rrangements.C	omplete if	the organizat					_
1a b	Is the organization an agent, trustee included on Form 990, Part X? If "Yes," explain the arrangement in						[Yes [No
-	ii 100, Oxpiaii iio arangomeni ii	Tarra vana son	pioto trio to	orrang table.		A	mount		
С	Beginning balance				10		mount		
	Additions during the year				_				
e	Distributions during the year						_		
f	Ending balance								
2a	Did the organization include an amo					energia su		Yes	No
	If "Yes," explain the arrangement in		, rait A, line	21	• • • • •				
	tV Endowment Funds. Con		ation answe	ered "Ves" to	Form 9	900 Part IV line	10		
Par	Endowment Funds. Con	(a) Current year	(b) Prior		o years b			(e) Four yea	ars hack
1a	Beginning of year balance	(a) Current year	(U) Filot	(c) iv	o years or	day Timee yes	H S DOCK	(c) rour yea	ary odon
7.5	Contributions		_				2007		1100
b				_			CON P.		
С	Net investment earnings, gains, and losses								
4	Grants or scholarships					100000			1775
	그렇게 하는 사람들이 가득하는 것이 없는 것이다.					74091		207	75
e	Other expenditures for facilities .			1			1		
	and programs		_			- TIPPEL			- 700
	Administrative expenses			_					
g	End of year balance							100	Land by
2	Provide the estimated percentage of		lance held a	S:					
a	Board designated or quasi-endowm		%						
D	Permanent endowment	%							
		%		**					
sa	Are there endowment funds not in the	ne pos session of	tne organiza	ation that are n	eid and	administered for th	е	V-	- 1 11-
	organization by:							Yes	s No
	(i) unrelated organizations							3a(i)	-
	(ii) related organizations			0.1.1.00				3a(ii)	
-	If "Yes" to 3a(ii), are the related orga							3b	
4	Describe in Part XIV the intended us								
Par	Land, Buildings, and Ed Description of investment	(a) Cost	or other basis restment)	(b) Cost or oth (other)		(c) Accumulated depreciation	(d	i) Book value	
40	Lond	- Ven	- Company	(4.77.7					
1a	Buildings			_					
		-		_					
C	Leasehold improvements		0	20	191	18,617		20	,867.
a	Equipment			1 39	,484.	10,017	0	20,	,007.
_	Other		m 000 Da	V solumn /DI	line 40	(a))		20	967
ota	I. Add lines 1a through 1e. (Column	(d) must equal Fo	nn 990, Pan	A, column (B)	, line 10	(6).)		20,	,867.

Schedule D (Form 990) 2010

Part VII Investments - Other Securities. 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)		
(1)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	>	
Part VIII Investments - Program Related. Se	e Form 990, Part X, line	13.
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	>	
Part IX Other Assets. See Form 990, Part X	(, line 15.	
	(a) Description	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)		
Part X Other Liabilities. See Form 990, Par	CAC 100 CAC 10	
1. (a) Description of liability	(b) Amount	
(1) Federal income taxes		
(2)		
(3)		20 0 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(4)		
(5)		70元
(6)		
(7)		
(8)		
(9)		
(10)		ASSESSMENT OF THE PROPERTY OF
(11)	251	
Total. (Column (b) must equal Form 990, Part X, col. (B) line		organization's financial statements that reports the

FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

JSA 0E1270 1.000 Schedule D (Form 990) 2010 52-2276602 Page 4 Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements Part XI 316,914. Total revenue (Form 990, Part VIII, column (A), line 12) 304,683. 2 Total expenses (Form 990, Part IX, column (A), line 25) 12,231. 3 Excess or (deficit) for the year. Subtract line 2 from line 1 Net unrealized gains (losses) on investments 4 5 6 7 8 Other (Describe in Part XIV.) 9 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 12,231. 10 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 316,914. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: 316,914. 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIV.) 4b c Add lines 4a and 4b 316,914. Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 304,683. Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIV.) e Add lines 2a through 2d 304,683. Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIV.) c Add lines 4a and 4b Add lines 4a and 4b

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 304,683. 5 Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information. SEE PAGE 5

52-2276602

Part XIV Supplemental Information (continued)

FIN 48

PART X LINE 2

WIDE ANGLE HAS APPLIED FOR AND RECEIVED A DETERMINATION LETTER FROM THE INTERNAL REVENUE SERVICE (IRS) TO BE TREATED AS A TAX-EXEMPT ENTITY PURSUANT TO SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND DID NOT HAVE ANY UNRELATED BUSINESS INCOME FOR THE YEAR ENDED JUNE 30, 2011. DUE TO ITS TAX- EXEMPT STATUS, WIDE ANGLE IS NOT SUBJECT TO INCOME TAXES. WIDE ANGLE IS REQUIRED TO FILE AND DOES FILE TAX RETURNS WITH THE IRS AND OTHER TAXING AUTHORITIES.

THE OPEN TAX YEARS FOR WIDE ANGLE ARE 2008, 2009 AND 2010.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2010 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service 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.

Employer identification number 52-2276602

Name of the organization

WIDE ANGLE YOUTH MEDIA, INC.

REVIEW OF 990

PART VI, SECTION B, LINE 11

THE FINANCE COMMITTEE WHICH INCLUDES THE PRESIDENT, VICE PRESIDENT, AND TREASURER OF THE BOARD OF DIRECTORS REVIEWS THE 990 FORM, AND THEN PRESENTS IT TO THE BOARD OF DIRECTORS. THE ACCOUNTANT ALSO IS ON HAND FOR QUESTIONS/COMMENTS AND PRESENTATION DURING THE DECEMBER BOARD MEETING. THE PRESIDENT SIGNS THE 990 ONCE APPROVAL HAS BEEN GRANTED FROM THE BOARD.

CONFLICT OF INTEREST

PART VI, SECTION B, LINE 12

THE BOARD MEMBERS COMPLETE PLEDGE FORMS EVERY YEAR, AND THE EXECUTIVE COMMITTEE OF THE BOARD MEET YEARLY WITH THE MEMBERS TO SEE IF THERE ARE CONFLICTS OF INTEREST. IF FOR ANY REASON, A VENDOR WAS BEING SELECTED, THREE QUOTES WOULD BE REQUIRED, AND IF A BOARD MEMBER WAS INTERSETED IN ANY TYPE OF COMPENSATION FOR SERVICES, WE WOULD SHOP OUT QUOTES ONLY IF THE SERVICE WAS REQUIRED.

DETERMINING DIRECTOR COMPENSATION

PART VI, SECTION B, 15A

WHEN THE BOARD HIRED SUSAN MALONE, EXECUTIVE DIRECTOR, SHE WAS WITH THE AGENCY FOR OVER 7 YEARS AT THE TIME, AND SUBMITTED HER RESUME FOR CONSIDERATION. AN EXTENSIVE TRANSITION PLAN WITH BOARD INPUT WAS CREATED WHEN THE FOUNDER STEPPED DOWN IN PARTNERSHIP WITH SUSAN. THE BOARD

CREATED A JOB DESCRIPTION AND SALARY REQUIREMENTS, THEN CONDUCTED TWO
LONG INTERVIEW SESSIONS TO CONFIRM THAT SUSAN WAS THE RIGHT CANDIDATE FOR
THE JOB. THE JOB WOULD HAVE BEEN OPEN TO THE PUBLIC IF SUSAN WAS NOT
SELECTED AS THE CANDIDATE. THE BOARD CREATED AN AGREEMENT AND SALARY
REQUIREMENTS, THAT WERE AGREED UPON BY BOTH PARTIES. VOTING ON SUSAN AS
THE EXECUTIVE DIRECTOR WAS RECORDED IN THE BOARD MINUTES.

DETERMINING PROGRAM MANAGER COMPENSATION

PART VI, SECTION B, 15B

WHEN WIDE ANGLE STARTED THE JOB SEARCH FOR OUR PROGRAM MANAGER, THE

EXECUTIVE DIRECTOR DRAFTED A SALARY RANGE AND JOB REQUIREMENTS THAT WERE

MODIFIED AND APPROVED BY THE BOARD OF DIRECTORS. THE JOB WAS POSTED ON

IDEALIST, CRAIGSLIST, THE AFTERSCHOOL INSTITUTE LISTSERV, NAMAC LISTSERV,

AND ON THE GBCA JOB BOARD. OVER 100 RESUMES WERE COLLECTED, AND NARROWED

DOWN TO 10 TOP CANDIDATES. THOSE CANDIDATES WERE REQUIRED TO SUBMIT

WRITING SAMPLES AND REFERENCES. 50% OF CANDIDATES WERE GIVEN A FIRST

ROUND INTERVIEW WITH THE EXECUTIVE DIRECTOR AND AN INTERVIEW WITH ANOTHER

STAFF MEMBER. 2 CANDIDATES WENT THROUGH A SECOND INTERVIEW WITH THE

EXECUTIVE DIRECTOR, AN INTERVIEW WITH 2-4 YOUTH PRODUCERS (STUDENTS), AND

A STAFF INTERVIEW. THESE TWO CANDIDATES WERE REQUIRED TO SUBMIT

REFERENCES WHICH WERE ALL FOLLOWED UP WITH. THE EXECUTIVE DIRECTOR MADE

THE FINAL DECISION, BUT WAS INFORMED BY ALL THE PARTIES THAT INTERVIEWED

THE PROGRAM MANAGER.

OTHER EXPENSES

PART IX, STATEMENT OF FUNCTIONAL EXPENSES, LINE 24F

Name of the organization
WIDE ANGLE YOUTH MEDIA, INC.

Employer Identification number

52-2276602

EXPENSE	PROGRAM	MANAGEMENT	FUNDRAISING
DUES	\$335	\$500	NONE
OTHER EXPENSE	\$115	\$403	NONE

ATTACHMENT 1

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

WIDE ANGLE YOUTH MEDIA SERVES BALTIMORE YOUTH IN AFTERSCHOOL

PROGRAMS, AT SCHOOLS, AND IN THE COMMUNITY. MOST OF OUR WORKSHOPS

ARE FREE FOR YOUTH, AND IN OUR MORE ADVANCED TRAINING PROGRAMS CAN

BE PAID A STIPEND FOR THEIR PARTICIPATION AND WORK. WE ARE AN

OFFICIAL SERVICE LEARNING SITE FOR BALTIMORE CITY PUBLIC SCHOOLS,

GIVING YOUTH THE OPPORTUNITY TO EARN SERVICE LEARNING HOURS AS

THEY LEARN NEW SKILLS AND CREATE MEDIA THAT EDUCATES AND SUPPORTS

THEIR COMMUNITY.

WIDE ANGLE TRAINS MORE THAN 350 YOUTH IN CRITICAL THINKING, PUBLIC SPEAKING, AND MEDIA PRODUCTION, AND SHARES THEIR STORIES AND MESSAGES WITH MORE THAN 9,500 PEOPLE IN THE BALTIMORE METRO AREA.

THE BALTIMORE SPEAKS OUT! PROGRAM, IN PARTNERSHIP WITH THE ENOCH

PRATT FREE LIBRARY, PROVIDES YOUTH AGES 11-15 WITH MEDIA EDUCATION

RIGHT IN THEIR OWN COMMUNITY. THROUGH 10-WEEK AFTERSCHOOL PROGRAMS

Employer identification number 52-2276602

ATTACHMENT 1 (CONT'D)

FOCUSING ON VIDEO PRODUCTION, CRITICAL THINKING, PUBLIC SPEAKING,
TEAMBUILDING, AND YOUTH DEVELOPMENT SKILLS, YOUNG PEOPLE CREATE
THEIR OWN VIDEO ABOUT YOUTH AND COMMUNITY CONCERNS. STUDENTS ARE
ELIGIBLE TO EARN SERVICE LEARNING HOURS FOR THEIR PARTICIPATION.
OUR CURRENT BSOP WORKSHOPS ARE HELD AT THE HERRING RUN AND THE
ORLEANS STREET BRANCHES OF THE ENOCH PRATT FREE LIBRARY. A TOTAL
OF 48 STUDENTS PARTICIPATED IN THE BALTIMORE SPEAKS OUT! PROGRAM
IN FY11.

THE MENTORING VIDEO PROJECT IS AN ADVANCED MEDIA PRODUCTION

PROGRAM FOR 12 BALTIMORE CITY YOUTH AGES 14-20 YEARS OF AGE THAT

EMPHASIZES STORYTELLING, CRITICAL THINKING, WRITING AND MEDIA

PRODUCTION SKILLS. WORKING AS A TEAM, YOUTH PRODUCE THEIR OWN

PUBLIC ACCESS TELEVISION SHOW, BEMORE TV, WHICH IS DISTRIBUTED

LOCALLY AND NATIONALLY ON PUBLIC ACCESS, AND ON THE WEB. IN FY11

VIDEO TOPICS INCLUDED: TEEN PARENTING, VIDEO GAME ADDICTION,

POSITIVITY IN RAP MUSIC, AND CONCERNS ABOUT PUBLIC TRANSPORTATION.

ALL WIDE ANGLE STUDENTS HAVE GRADUATED FROM HIGH SCHOOL AND ALL OF

OUR GRADUATING SENIORS IN FY11 ENTERED COLLEGE.

OUR ANNUAL YOUTH MEDIA FESTIVAL GIVES 300 YOUTH FROM 10-19 AN OPPORTUNITY TO SHOWCASE THEIR TALENTS IN VIDEO, PHOTOGRAPHY, POETRY, PERFORMANCE AND FINE ART WHICH CULMINATES IN A MONTH LONG CELEBRATION IN THE SPRING. FROM OCTOBER-MARCH, WORKSHOPS ARE CONDUCTED AT SCHOOLS AND AFTER SCHOOL PROGRAMS - WHILE THE 12

Name of the organization
WIDE ANGLE YOUTH MEDIA, INC.

Employer identification number 52-2276602

ATTACHMENT 1 (CONT'D)

YOUTH FESTIVAL COMMITTEE MEMBERS DESIGN AND CURATE THE FESTIVAL.

YOUTH SPEAKS OUT! IS AN ENRICHMENT PROGRAM OFFERED AT PARTNER ORGANIZATIONS AND IN BALTIMORE CITY PUBLIC SCHOOLS. 100 STUDENTS RECEIVED INTENSIVE MEDIA TRAINING TO COMPLEMENT THE MISSION OF WIDE ANGLE'S PARTNER. YOUTH ARE TRAINED TO CREATE A VARIETY OF MEDIA FROM ANIMATION TO PHOTO COMICS TO SHORT DOCUMENTARY VIDEOS TO PHOTOGRAPHIC SELF-PORTRAITS. THE GOALS OF THE PROGRAM ARE TO HELP YOUTH THINK CRITICALLY ABOUT THEIR LIVES AND COMMUNITIES WHILE PROVIDING ACCESS TO CUTTING-EDGE MEDIA TECHNOLOGY. THIS PROGRAM OCCURS IN PARTNERSHIP WITH THE SCHOOL SYSTEM'S SUMMER AND AFTER-SCHOOL PROGRAMS.

IN ADDITION, EACH YEAR WIDE ANGLE CONDUCTS SEVERAL SMALL SCALE

SPECIAL PROJECTS TO TEACH MEDIA SKILLS TO A BROAD CROSS-SECTION OF

YOUTH IN BALTIMORE. IN FY11 WIDE ANGLE CONDUCTED PROGRAMMING FOR

OVER 175 YOUNG PEOPLE IN PARTNERSHIP WITH GROUPS SUCH AS THE

BALTIMORE CITY HEALTH DEPARTMENT, CENTER FOR URBAN FAMILIES, THE

CREATIVE ALLIANCE, THE LIVING CLASSROOMS FOUNDATION, PAUL'S PACE

THE WALTER'S ART MUSEUM AND MANY MORE.

Page 2 Schedule O (Form 990 or 990-EZ) 2010 Employer identification number Name of the organization 52-2276602 WIDE ANGLE YOUTH MEDIA, INC. ATTACHMENT 2 FORM 990, PART VIII - FUNDRAISING EVENTS GROSS NET INCOME INCOME DESCRIPTION 2,918. 2,918. SPECIAL EVENTS 2,918. 2,918. TOTALS ATTACHMENT 3 FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES ENDING BOOK VALUE DESCRIPTION 1,087. PREPAID EXPENSES 1,087. TOTALS ATTACHMENT 4 FORM 990, PART X - DEFERRED REVENUE ENDING

BOOK VALUE DESCRIPTION

5,000. DEFERRED REVENUE

5,000. TOTALS