

# EXTENDED TO NOVEMBER 15, 2018

**Return of Organization Exempt From Income Tax** 

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Inspection

AI	ror m	e 2017 calendar year, or tax year beginning and	enaing		
В	Check if applicab	C Name of organization		D Employer identifie	cation number
	Addre				
	Name	Doing business as		26-1	825747
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	r
	Final return	4825 CORDELL AVENUE, SUITE 200		(240	) 396-2440
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	670,268.
Г	Amen	ded DEMUECDA MD 2001/		H(a) Is this a group re	
F	Applic			for subordinates	
_	tion pendi	SAME AS C ABOVE		H(b) Are all subordinates in	
_	T		or	1	
			or 527	1 '	list. (see instructions)
		te: WWW.BETHESDAGREEN.ORG	1	H(c) Group exemptio	
	art I	forganization: X Corporation Trust Association Other	L Year	of formation: ZUUS N	State of legal domicile; MD
F	$\overline{}$	Summary	20110011		
ě	1	Briefly describe the organization's mission or most significant activities: $\underline{SEE}$	SCHEDU	LE O	
Activities & Governance	2	Check this box  if the organization discontinued its operations or dispos	and of more	than 25% of its not ass	noto.
ērī	2			1 _ 1	13
ő	3				13
<u>«</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)			
ies	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)			6
₹	6	Total number of volunteers (estimate if necessary)			
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	b	Net unrelated business taxable income from Form 990-T, line 34	·····	7b	0.
				Prior Year	Current Year
<u>o</u>	8	Contributions and grants (Part VIII, line 1h)		294,058.	624,470.
Revenue	9	Program service revenue (Part VIII, line 2g)		47,091.	26,232.
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	201.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-5,345.	-6,407.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		335,804.	644,496.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ú	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		273,237.	246,074.
Se	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	. Ь	Total fundraising expenses (Part IX, column (D), line 25)			
Ě	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		80,967.	65,124.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		354,204.	311,198.
	19	Revenue less expenses. Subtract line 18 from line 12		-18,400.	333,298.
		Trevende lead expended. Cabitaet line 10 from line 12		ginning of Current Year	End of Year
Net Assets or	20	Total assets (Part X, line 16)	ьс	150,615.	480,821.
SSE	21	Total liabilities (Part X, line 16)		25,303.	26,559.
let/	22	Net assets or fund balances. Subtract line 21 from line 20		125,312.	454,262.
	art II	Signature Block		123,312•	454,202.
		alties of perjury, I declare that I have examined this return, including accompanying schedules	and atatama	unto, and to the heat of mu	knowledge and balief it is
		ances of perjury, i declare that i have examined this return, including accompanying scriedules ot, and complete. Declaration of preparer (other than officer) is based on all information of wh			Knowledge and Deller, it is
tiue	, corre	L, and complete. Declaration of preparer (other than officer) is based on an information of wif	iicii preparei	lias any knowledge.	
0:		Signature of officer		I Date	
Sig		VERONIQUE MARIER, EXECUTIVE DIRECTOR		2410	
Hei	re	Type or print name and title			
			Тг	Date Check	PTIN
D-!	J	Print/Type preparer's name Preparer's signature TAMEC MARITANEO		if L	<b> </b>
Paid		JAMES MARTINKO JAMES MARTINKO	<u> </u>	1/15/18   "self-employ	
	parer	Firm's name COHNREZNICK LLP		Firm's EIN ▶	22-1478099
use	Only	Firm's address > 7501 WISCONSIN AVENUE, SUITE 400	င		1 650 0100
		BETHESDA, MD 20814		Phone no. 30	1-652-9100
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

Par	rt III Statement of Program Servic	ce Accomplishments		
	Check if Schedule O contains a respo	nse or note to any line in this Part III		X
1	Briefly describe the organization's mission:			
	SEE SCHEDULE O			
2	Did the organization undertake any significa	nt program services during the year which we	re not listed on the	
	prior Form 990 or 990-EZ?			Yes X No
	If "Yes," describe these new services on Scl			
3	Did the organization cease conducting, or m	nake significant changes in how it conducts, a	ny program services?	Yes X No
	If "Yes," describe these changes on Schedu	ile O.		
4	Describe the organization's program service	accomplishments for each of its three largest	program services, as measured by	expenses.
	Section 501(c)(3) and 501(c)(4) organizations	s are required to report the amount of grants a	nd allocations to others, the total e	xpenses, and
	revenue, if any, for each program service rep	ported.		
4a	(Code:) (Expenses \$	.0 , 0 4 3 • including grants of \$	) (Revenue \$	26,232.)
	SEE SCHEDULE O			
4b	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$	)
4c	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$	)
				,
	-			
	-			
4d		,		
			Revenue \$	)
4e	Total program service expenses	310,043.		
				Form <b>990</b> (2017)

## Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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 reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
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			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D. Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
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		Х
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		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u>,                                    </u>		
.5	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
.5	·	19		х
	complete Schedule G. Part III	_ IS	000	

# Part IV Checklist of Required Schedules (continued)

			Yes	_
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
•	any tax-exempt bonds?	24c		
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	, , ,	25b		x
26	Schedule L, Part I  Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	230		
20				
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	26		x
07	complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			x
00	of any of these persons? If "Yes," complete Schedule L, Part III	27		<u> </u>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):	00		v
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			3,7
	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 conservation			
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			l
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			l
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		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, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
			200	· ·

# Form 990 (2017) BETHESDA GREEN, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in Box 3 of Form 1096. Enter 0-1 not applicable		Check if Schedule O contains a response or note to any line in this Part V	<u></u>				
b Etter the number of Forms W2G included in line 1a. Enter 0-it not applicable						Yes	No
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming gaming winnings to prize winners?  2 Erfort the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return  5 If all least one is reported on line 2, did the organization file all required federal employment tax returns?  8 Note. If the sum of lines 1s and 2 is its greater than 250, you may be required to e-file (see instructions)  8 Did the organization have unreaded business gross income of \$1 (100 or more during the year?  8 A If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O  4 A At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a stark account, securities account, or other financial account)?  4 A If "Yes," enter the name of the foreign country. If the see instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF).  5 Business from a party to a prohibited tax shelter transaction?  5 Business the organization an party to a prohibited tax shelter transaction?  5 Companization shall be organization file Form 8886-17  6 Did the visual party notify the organization file Form 8886-17  6 Did the organization shall we organization file Form 8886-17  6 Did the organization shall we not tax deductible on this way or is a party to a prohibitor tax shelter transaction?  6 Business that the start of the organization file Form 8886-17  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization receive a payment in excess of \$5\times and party for goods and services provided to the payor?  7 To granizations that may receive deductible contribution and party for goods and services provided to the payor?  7 To granizations that may rece	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0			
dependingly winnings to pirze winners?  ■ Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  ■ It least one is reported on line 2a, did the organization file all required federal employment tax returns?  ■ Note. If the sum of lines 1s and 2 is greater than 250, you may be required to e-file (see instructions)  ■ Diff the organization have unrelated business gross income of \$1,000 or more during the year?  ■ A any time during the calendar year, did the organization if his "Note." In the same of the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts; or a financial account in a foreign country (such as a bank account, securities account, or other financial Accounts (FBAR).  ■ Was the organization by the organization that it was or is a party to a prohibited tax shelter transaction?  ■ Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  ■ Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  ■ Did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax eductables a charitable contributions?  ■ Did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that the ware tax eductables a charitable contributions?  ■ Did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that the ware tax eductables a charitable contributions?  ■ Did the organization solicit and the very solicitation an express statement that such contributions or gifts were not tax deductables a	b		1b	0			
2a Efier the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, 2a 6    b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X    show that it is sum of lines 1 a and 2a is greater than 250, you may be required to e-rile (see instructions) 3a   X    show that is the sum of lines 1 a and 2a is greater than 250, you may be required to e-rile (see instructions) 3a   X    show that is the sum of lines 1 a and 2a is greater than 250, you may be required to e-rile (see instructions) 3a   X    show that is the sum of lines 1 a and 2a is greater than 250, you may be required to e-rile (see instructions) 3a   X    show that is the sum of lines 1 and 2a is greater than 250, you may be required to e-rile (see instructions) 3a   X    show that is the sum of lines 1 and 2a is greater than 250, you may be required to e-rile (see instructions) 3b   X    show that is a form 90-Tro this year? If "No," to line 3b, provide an explanation of the authority over, a transaction of the sum of the foreign country; Implications for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  show the organization a party to a prohibited tax shelter transaction at any time during the tax year?   5a   X    b If "Yes," to line 3a or 5b, did the organization file Form 88861?   6a   X    b If "Yes," did the organization intell it it was or is a party to a prohibited tax shelter transaction?   6b   X    show that were not tax deductible?   1   1   1   1   1   1   1   1    b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?   1   1   1   1   1   1    b If "Yes," did the organization notely the donor of the value of the goods or services provided?   7a   X   7b   1   1   1   1   1   1   1   1   1	С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portab	ole gaming			
tiled for the calendary year ending with or within the year convered by this return    The sum of lines 1 and 2a, id the organization file all required federal employment tax returns?   2b   X		(gambling) winnings to prize winners?			1c		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  3	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to a-file (see instructions)  3a   X   3a   X   3b   11 **ves, * instruction have unrelated business gross income of \$1,000 or more during the year?  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 foreing country. ▶  5a   11 **ves, * enter the name of the foreign country. ▶  5a   instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial account()?  5a   Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5b   Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5c   if **ves, ** to line 5a or 50, tid the organization that it was or is a party to a prohibited tax shelter transaction?  5c   if **ves, ** to line 5a or 50, tid the organization that it was or is a party to a prohibited tax shelter transaction?  5d   if **ves, ** to line 5a or 50, tid the organization that it was or is a party to a prohibited tax shelter transaction?  5d   if **ves, ** to line 5a or 50, tid the organization that it was not a party to a prohibited tax shelter transaction?  5d   if **ves, ** to line 5a or 50, tid the organization that it was not a party to a prohibited tax shelter transaction?  5d   if **ves, ** did the organization include with very solicitation an express statement that such contributions or gifts were not tax deductible?  5d   if **ves, ** did the organization include with very solicitation an express statement that such contributions or gifts were not tax deductible?  5d   if **ves, ** did the organization state and tax to the such as a contribution and party for goods and services provided to the payor?  5d   if **ves, ** did the organization state and to the such as a contribution of the value of the organization and party for goods and services provided to the payor?  5d   if **ves, ** did the organiz		filed for the calendar year ending with or within the year covered by this return	2a	6			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  b if "Yes," has it filed a Form 990-T for this year? if "No," to line 3b, provide an explanation in Schedule O  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 accounts (FBAR).  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?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b X  5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c Did 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 Tyes," did the organization she that may receive deductible contributions under section 170(c).  6c Did the organizations that may receive deductible contributions under section 170(c).  6c Did the organization she that may receive deductible contributions under section 170(c).  6c Did the organization she that may receive deductible of the payor?  6c Did the organization she that she payment in excess of \$15 made party as a contribution and party for goods and services provided to the payor?  6c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required?  7c Ya I Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7c X  7d Did the organization coveries any funds, directly or indirectly, on a personal benefit con	b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	Х	
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sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a 10a 10b	_						
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a Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9b Did the sponsoring organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12	9						
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand	а				9a		
a Initiation fees and capital contributions included on Part VIII, line 12 10a 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders 11a 11a 11b 11b 11a 12b 11a 11b 11a 11b 11a 11b 11a 11b 11a 11a	b				9b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand							
11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  13c	а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand  11b  12a  11a  11b	b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand	11	Section 501(c)(12) organizations. Enter:		•			
amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  13c			11a				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b  c Enter the amount of reserves on hand 13c	b	Gross income from other sources (Do not net amounts due or paid to other sources against					
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  13c		, , , , , , , , , , , , , , , , , , , ,	$\overline{}$		_		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	10413	) 	12a		
a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand	b		12b				
Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand							
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand	а	-			13a		
organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b							
c Enter the amount of reserves on hand	b		٠	1			
A4. Did the considering marks and a considering the facility of the Constant o			13c		4.		Х
3 7 7							
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	b	п теs, пав и пед а Form 720 to report these payments? If "No," provide an explanation in Schedule	e O		_	990	(2017)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	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 13			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct 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?	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			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	, , , , , , , , , , , , , , , , , , ,		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
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		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶MD			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) as	ailable	•	
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financi	al	
	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:			
	VERONIQUE MARIER - 240-396-2440			
	4825 CORDELL AVENUE, SUITE 200, BETHESDA, MD 20814			

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

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

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

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

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

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

(A)	(B)	J		((	C)			(D)	(E)	(F)
Name and Title	Average	Position (do not check more than one			than o		Reportable	Reportable	Estimated	
	hours per		, unles cer an					compensation	compensation	amount of
	week (list any	tor						from the	from related organizations	other compensation
	hours for	ndividual trustee or director				- - -		organization	(W-2/1099-MISC)	from the
	related	tee or	ustee			ensate		(W-2/1099-MISC)	,	organization
	organizations	altrus	nal tr		loyee	comp				and related
	below	lividua	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
/1\ GRODGE I BYTENMUNI	1.00	ы	Ë	#0	. Ke	훈	혼			
(1) GEORGE LEVENTHAL DIRECTOR	1.00	Х						0.	0.	0.
(2) SETH GOLDMAN	1.00	Δ						0.	0.	· ·
DIRECTOR	1.00	Х						0.	0.	0.
(3) JANE BROOKS HORN	1.00	77						0.	0.	<u></u>
TREASURER (STARTING MARCH 2017)	1.00	х		Х				0.	0.	0.
(4) AMITA SHUKLA	1.00			-25				•	•	<u>.                                </u>
DIRECTOR	1100	х						0.	0.	0.
(5) KENNETH HARTMAN	1.00									
DIRECTOR		Х						0.	0.	0.
(6) TINA ARREAZA	1.00								-	
SECRETARY (UNTIL JULY 2017)		Х		Х				0.	0.	0.
(7) JAMES MARTINKO	1.00									
DIRECTOR		Х						0.	0.	0.
(8) SRI VELAMATI	1.00									
DIRECTOR (UNTIL APRIL 2017)		Х						0.	0.	0.
(9) STU DALHEIM	1.00									
CHAIRMAN		Х		Х				0.	0.	0.
(10) RICHARD BOLY	1.00									
DIRECTOR (STARTING APRIL 2017)		Х						0.	0.	0.
(11) KEVIN LOWNDES	1.00	1								_
DIRECTOR (UNTIL AUG. 2017)		Х						0.	0.	0.
(12) PETER GRAZZINI	1.00	ļ								•
PAST CHAIR (UNTIL JULY 2017)	1 00	Х		Х		_		0.	0.	0.
(13) MICHAEL BORKOWSKI	1.00	.,							,	•
DIRECTOR (STARTING APRIL 2017)	1 00	Х						0.	0.	0.
(14) CHRIS BROWN	1.00	3,7							0	•
DIRECTOR	1 00	Х						0.	0.	0.
(15) ARI GHOSAL DIRECTOR (STARTING APRIL 2017)	1.00	Х						0.	0.	0.
(16) MARY O'CONNOR	1.00	Λ	$\vdash$					· ·	0.	<b>U</b> •
DIRECTOR (STARTING APRIL 2017)	1.00	Х						0.	0.	0.
(17) VERONIQUE MARIER	40.00	^	$\vdash$					0.	0.	<u>U •</u>
EXECUTIVE DIRECTOR		1		Х				98,583.	0.	0.
		l	<b>I</b>		l			70,3031	0.	Form <b>990</b> (2017)

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Part VII   Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	d Hig	ghes	st C	ompensated Employee	s (continued)	—		
(A) Name and title	(B) Average hours per week	(do box	not c	Pos Pos heck i ss per	C) itior more rson i		one h an	( <b>D</b> ) Reportable compensation	(E)  Reportable compensation	1	(F) Estimate amount	of
	(list any hours for related organizations below	tee or director	Institutional trustee		Key employee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS0		other compensa from th organizat and relat organizati	ation ie tion ted
	line)	lndi	lnst	Officer	Key	High	Form					
										_		
										-		
								98,583.		0.		0.
1b Sub-total c Total from continuation sheets to Part V d Total (add lines 1b and 1c)	II, Section A						<b>&gt;</b>	98,583.		0.		0.
Total number of individuals (including but a compensation from the organization							no re	· · · · · · · · · · · · · · · · · · ·	000 of reportable			0
3 Did the organization list any <b>former</b> officer											Yes	No X
<ul> <li>line 1a? If "Yes," complete Schedule J for s</li> <li>For any individual listed on line 1a, is the s</li> <li>and related organizations greater than \$15</li> </ul>	um of reportabl	le co	mpe	ensa	tion	and	oth		he organization		4	X
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes." cor	accrue comper	nsati	on fi	rom	any	unre	elate	ed organization or individ	dual for services		5	Х
Section B. Independent Contractors  1 Complete this table for your five highest co	•	-							· · · · · · · · · · · · · · · · · · ·	 ensati	ion from	
the organization. Report compensation for (A)  Name and business			onair ONI		ith C	or wi	unin	the organization's tax y (B)  Description of s			(C) ompensatio	n
2 Total number of independent contractors ( \$100,000 of compensation from the organ		ot lir	nited	d to		se lis	sted	above) who received mo	ore than			
φ100,000 of compensation from the organ	Zation										QQ∩ /	(0047)

Form 990 (2017) BETHESD
Part VIII Statement of Revenue

		Check if Schedule O contain	is a response	or note to any line	e in this Part VIII			
		Gricer ii Geriedale G cortaii	is a response	or note to any line	(A)	(B)	(C)	(D)
					Total revenue	Related or	Unrelated	Revenuè éxcluded from tax under
						exempt function revenue	business revenue	sections 512 - 514
	_					revenue	revenue	512 - 514
nts	1 a	Federated campaigns						
Gra	b	Membership dues		67 027				
ts, An	С	Fundraising events		67,037.				
Giff lar	d	Related organizations	1d	240 600				
S. imi	е	Government grants (contribution	· —	340,607.				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants,						
ibu Th		similar amounts not included above	1f	216,826.				
d	g	Noncash contributions included in lines 1a-			604 450			
<u>S</u> E	h	Total. Add lines 1a-1f		<b></b>	624,470.			
				Business Code				
e C	2 a			900099	20,692.	20,692.		
e vi	b			900099	4,903.	4,903.		
Program Service Revenue	С	OTHER OFFICE REV	ENUES_	900099	637.	637.		
eve	d							
go.	е							
Ā		All other program service revenu						
	g	Total. Add lines 2a-2f			26,232.			
	3	Investment income (including div						
		other similar amounts)			201.			201.
	4	Income from investment of tax-e	xempt bond p	roceeds 🕨				
	5	Royalties						
		_	(i) Real	(ii) Personal				
	6 a	Gross rents	19,365.					
		Less: rental expenses	0.					
		· /	<u>19,365.</u>		40.055			1005
	d	` ′ _		<b>&gt;</b>	19,365.			19,365.
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
		Gain or (loss)						
		Net gain or (loss)		·····				
<u>e</u>	8 a	Gross income from fundraising e	•					
enr		including \$ 67,03						
Other Revenu		contributions reported on line 10						
erF		Part IV, line 18		0.				
Gth		Less: direct expenses		25,772.	05 770			05 770
		Net income or (loss) from fundra	-	<b></b>	-25,772.			-25,772.
	9 a	Gross income from gaming activ						
		Part IV, line 19						
		Less: direct expenses						
		Net income or (loss) from gaming		<b>P</b>				
	10 a	Gross sales of inventory, less ret						
	_	and allowances						
		Less: cost of goods sold						
	С	Net income or (loss) from sales of	of inventory					
		Miscellaneous Revenue		Business Code				
	11 a							<del> </del>
	b							<del>                                     </del>
	C							-
	d							
		Total. Add lines 11a-11d			644 406	26 222		C 225
	12	Total revenue. See instructions			644,496.	26,232.	0.	-6,206.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising (C) Management and general expenses Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ....... Benefits paid to or for members ..... Compensation of current officers, directors, 98,583. 98,583. trustees, and key employees ..... Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 147,491. 147,491. Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 10 Payroll taxes Fees for services (non-employees): Management 358. 358. Legal 9,075. 9,075. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees ..... Other. (If line 11g amount exceeds 10% of line 25, 24,009. 24,009. column (A) amount, list line 11g expenses on Sch O.) 14,271. 14,271. Advertising and promotion 12 9,403. 9,403. Office expenses 13 Information technology 14 15 Royalties 55. 55. 16 Occupancy 1,641. 641. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 930. 930. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 187. 187. Depreciation, depletion, and amortization 22 2,625. 2,625. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 1,155. 1,155. FUNDRAISING EXPENSES DUES & MEMBERSHIPS 872. 872. 543. 543. OTHER EXPENSES С d All other expenses 311,198. 310,043. 0. 1,155. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

<u>Par</u>	t X	Balance Sheet					
		Check if Schedule O contains a response or not	e to any	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			128,801.	1	187,232
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			20,691.	4	191,663
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensa		, , , , , , , , , , , , , , , , , , ,			
		Part II of Schedule L	-			5	
	6	Loans and other receivables from other disqualit					
		section 4958(f)(1)), persons described in section	•	,			
		employers and sponsoring organizations of sect					
۱ "		employees' beneficiary organizations (see instr).		· ·		6	
Assets	7	Notes and loans receivable, net				7	
Asi	8	Inventories for sale or use				8	
	9	5			1,123.	9	101,180
		Land, buildings, and equipment: cost or other	I I				
		basis. Complete Part VI of Schedule D	10a	2.183.			
	b	Less: accumulated depreciation	1	2,183.	0.	10c	746
	11	Investments - publicly traded securities			•	11	•
	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			150,615.	16	480,821
	17	Accounts payable and accrued expenses			25,303.	17	26,559
	18				23,303.	18	20,333
	19	Grants payable		19			
	20	Deferred revenue			20		
	21	Tax-exempt bond liabilities  Escrow or custodial account liability. Complete F				21	
	22	Loans and other payables to current and former					
Liabilities	22	key employees, highest compensated employee					
┋╽						22	
La La	00	Complete Part II of Schedule L		Lancation .		23	
	23 24	Secured mortgages and notes payable to unrelated Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa				24	
	25	parties, and other liabilities not included on lines					
		0 1 1 1 5				25	
	26	Total liabilities. Add lines 17 through 25			25,303.	26	26,559
	20	Organizations that follow SFAS 117 (ASC 958			20,0001		20,000
.		complete lines 27 through 29, and lines 33 an		nors p			
ĕ	27	Unrestricted net assets			56,479.	27	113,942
<u>a</u>	28	Temporarily restricted net assets			68,833.	28	340,320
R9	29				, , , , , , , , , , , , , , , , , , , ,	29	
מן		Organizations that do not follow SFAS 117 (A					
도		and complete lines 30 through 34.	30 000,	, check here			
<u>ဗ</u> ု	30	Capital stock or trust principal, or current funds				30	
les	31	Paid-in or capital surplus, or land, building, or ed				31	
Z	32	Retained earnings, endowment, accumulated in				32	
Net Assets or Fund Balances	33	Total net assets or fund balances			125,312.	33	454,262
- 1	34	Total liabilities and net assets/fund balances			150,615.	34	480,821

#### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

**Total** 

(Form 990 or 990-EZ)

OIII 990 01 990-LZ

# **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.

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

OMB No. 1545-0047

2017

Open to Public Inspection

**Employer identification number** Name of the organization BETHESDA GREEN, 26-1825747 INC. Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

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

Sec	ction A. Public Support	,,		,			
Cale	ndar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Gifts, grants, contributions, and			• •			
	membership fees received. (Do not						
	include any "unusual grants.")	191,560.	255,101.	313,703.	294,058.	624,470.	1678892.
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	101 560	055 404	242 522	224 252	604 450	4.550000
	Total. Add lines 1 through 3	191,560.	255,101.	313,703.	294,058.	624,470.	1678892.
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)						369,999.
	Public support. Subtract line 5 from line 4.						1308893.
	ction B. Total Support	· · · · · · · · · · · · · · · · · · ·					
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016 294, 058.	(e) 2017	(f) Total
	Amounts from line 4	191,560.	255,101.	313,703.	294,056.	624,470.	1678892.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,			15 204	14 022	10 566	40 002
_	and income from similar sources			15,384.	14,933.	19,566.	49,883.
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						1728775.
	<b>Total support.</b> Add lines 7 through 10   Gross receipts from related activities,					12	263,547.
12	First five years. If the Form 990 is for	,	,	d fourth or fifth to			203,347.
13	organization, check this box and <b>stop</b>	_			•		ightharpoonup
Sec	etion C. Computation of Publi		centage				
	Public support percentage for 2017 (li			olumn (f))		14	75.71 %
15	Public support percentage from 2016					15	85.73 %
	33 1/3% support test - 2017. If the c					ore, check this box	
	stop here. The organization qualifies						
b	33 1/3% support test - 2016. If the c						
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac-	ts-and-circumstand	ces" test, check th	is box and stop h	ere. Explain in Pa	t VI how the organ	ization
	meets the "facts-and-circumstances"			=	· ·	-	
b	10% -facts-and-circumstances test						
	more, and if the organization meets th	ne "facts-and-circur	mstances" test, ch	eck this box and	<b>stop here.</b> Explair	in Part VI how the	•
	organization meets the "facts-and-circ	umstances" test.	The organization q	ualifies as a public	ly supported orgar	nization	<b>&gt;</b>
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	<b>&gt;</b>

Schedule A (Form 990 or 990-EZ) 2017

#### 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.)

16 Public support percentage from 2016 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))  18 9	Sec	ction A. Public Support						
membership fees received. (Do not include any "unusual grants.")  2 Gross receipts from admissions, merchandise sold or services perany activity that is related to the organization's tax-exempt purpose  3 Gross receipts from admissions, merchandise sold or services perany activity that is related to the organization's tax-exempt purpose  3 Gross receipts from admissions, merchandise sold or septical on 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  7 A Amounts included on lines 1, 2, and 3 received from disqualified persons  9 Amounts included on lines 1, 2, and 3 received from disqualified persons  9 Amounts from the services and secrete from other than discussified persons to deal or the services of the secrete from other than discussified persons to the services of the services o	Cale	ndar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
include any "unusual grants.")  2 Gross receipts from achinissions, merchandles sold or services perany 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 tax-exempt and the part of the organization's tax-exempt and either part 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  7a Anounts included on lines 1, 2, and 3 received from disqualified persons  b answard included on lines 1, 2, and 3 received from disqualified persons  b answard included on lines 1, 2, and 3 received from disqualified persons as exceed the grade of \$5,000 or 100 file around in the 15th the year  c Add lines 7a and 7b  9 Anounts from line 6  10a Gross income from interest, dividende, payments received on securities loans, rents, royatties, and income from similar sources  b Unrelated business backle income  (less section 15 It taxes) from businesses acquired after June 3,11975  c Add lines 10 and 10 b.  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on a control included in line 10b, whether or not the business is regularly carried on 1 foot grade grad	1	Gifts, grants, contributions, and						
2. Gross receipts from admissions, merchandis 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 or expended on its behalf that the the organization without change 6. Total. Add lines 1 through 5. Total way governmental unit to the organization without change 6. Total. Add lines 1 through 5. A amounts included on lines 1, 2, and 3 received from disqualified persons but acceived from the third disqualified persons but acceived from disqualified persons but acceived from disqualified persons but acceived from the third disqualified persons but acceived from the from the from the second to the second but acceived from the from the from the second to the secon		membership fees received. (Do not						
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 4. Tax revenues levied for the organ- ization's benefit and either paid to  or expended on its behalf  5. The value of services or facilities  furnished by a governmental unit to  the organization without charge  6. Total, Add lines 1 through 5		include any "unusual grants.")						
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 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 7 Announts included on lines 1, 2, and 3 received from disqualified persons 9 Announts included on lines 1, 2, and 3 received from disqualified persons 9 Announts included on lines 1, 2, and 3 received from disqualified persons 9 Announts included on lines 1, 2, and 3 received from disqualified persons 9 Announts included on lines 1, 2, and 3 received from disqualified persons 10 Area included on lines 1, 2, and 3 received from disqualified persons lines of the second of	2	Gross receipts from admissions,						
any activity that is related to the organization's back-empt purpose organization's back-empt purpose are not an unrelated trade or bus iness under section 513  4 Tax revenues level of 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 of the organization without charge of Tax Amounts included on lines 1, 2, and 3 received from disqualified persons  b Amounts included on lines 1, 2, and 3 received from disqualified persons  b Amounts included on lines 1, 2, and 3 received from disqualified persons the second the greate of 5,000 or 1% of the amount on like 130 or 1% of the		•						
organization's tax-exempt purpose 3 Gross recipits from activities that are not an unrelated trade or business under section 513 4 Tax revenues level 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 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 1, 2 and 3 received from disqualified persons b Amounts included on lines 1 and 1 received from the security of		*						
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 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received when the disqualified persons b Amounts included on lines 2 and 3 received when the disqualified persons b Amounts included on lines 3 and 3 received when the disqualified persons that exceed the greater of \$5.00 or 1% of the amount on line 13 for the year exceed the greater of \$5.00 or 1% of the amount on line 13 for the year exceed the greater of \$5.00 or 1% of the amount on line 13 for the year exceed the greater of \$5.00 or 1% of the amount on line 13 for the year exceeded the greater of \$5.00 or 1% of the amount on line 13 for the year exceeded the greater of \$5.00 or 1% of the amount on line 13 for the year exceeded the greater of \$5.00 or 1% of the 18 for 18								
iness under section 513 4 Tax revenues levied for the organization is 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 7a Amounts included on lines 1, 2, and 3 received from disqualified persons by Amouris included on lines 1, 2, and 3 received from disqualified persons by Amouris included on lines 2 and 3 received from disqualified persons by Amouris included on lines 2 and 3 received from disqualified persons that secret the great of \$5,000 or 166 and the secret of \$5,000 or 166 and and and a secret of \$5,000 or 166 a	3	Gross receipts from activities that						
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  7a Amounts included on lines 1, 2, and 3 received from disqualified persons  b Amounts included on lines 2 and 3 received throm the indiqualified persons  b Amounts included on lines 2 and 3 received throm other than disqualified persons that exceed the greater of \$0.000 or 1% of the amount on line 13 for the year  c Add lines 7a and 7b  8 Public support. (Sphatial line 1 from line 5)  Section B. Total Support  Callendar year (or fiscal year beginning in)		are not an unrelated trade or bus-						
ization's benefit and either paid to or expended on its behalf or expended on its behalf or expended on its behalf the organization without charge of Total, Add ines 1 through 5.  7a Amounts included on lines 1, 2, and 3 received from disqualified persons by Amounts included on lines 1, 2, and 3 received from disqualified persons that exceed the grader of \$5,000 or 15 of the amount on line 18 for the year of Add lines 7 and 70 the organization without charge (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total organization interest, and income from interest, and income from interest, and income from interest, and income from similar sources but from the securities loans, rents, royalise, and income from unrelated business activities not included in line 10b, whether on on the businesses a captired after June 30, 1975 c Add lines 10a and 10b.  11 Net income from unrelated business as activities not included in line 10b, whether on on the businesses is expelled to a control the businesses is expelled assets (Explain in Part VI).  13 Total support, Add lines 9, loc, 11, and 12.  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  5 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)) 15 9 3 5 2 5 2 5 2 5 2 5 2 5 2 5 2 5 2 5 2 5		iness under section 513						
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  7 a Amounts included on lines 1, 2, and 3 received from disqualified persons by the secret of the greater of \$5,000 or 10 of the secret of the greater of \$5,000 or 10 of the secret of the greater of \$5,000 or 10 of the secret of the greater of \$5,000 or 10 of the secret of the greater of \$5,000 or 10 of the secret of the greater of \$5,000 or 10 of the secret of the greater of \$5,000 or 10 of the secret of the greater of \$5,000 or 10 of the secret of \$5,000 or 10 of	4	Tax revenues levied for the organ-						
5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from disqualified persons that exceed the greater of \$6,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 3 Public support. @departs   Comparison   C		ization's benefit and either paid to						
furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons by Amounts included on lines 1, 2, and 3 received from disqualified persons that exceed the greater of \$5,000 at 3 received from other than disqualified persons that exceed the greater of \$5,000 at 3 received from other than disqualified persons that exceed the greater of \$5,000 at 3 received from other than disqualified persons that exceed the greater of \$5,000 at 3 received from other than disqualified persons that exceed the greater of \$5,000 at 3 received from other than disqualified persons that exceed the greater of \$5,000 at 3 received from other than disqualified persons that exceed the greater of \$5,000 at 3 received from other than disqualified persons that exceed the greater of \$5,000 at 3 received from other than disqualified persons that exceed the greater of \$5,000 at 3 received from other than disqualified persons that exceed the greater of \$5,000 at 3 received from other than disqualified persons that exceed the greater of \$5,000 at 3 received from other than disqualified persons that exceed the greater of \$5,000 at 3 received from other than disqualified persons that exceed the greater of \$5,000 at 3 received from other than disqualified persons that exceed the greater of \$5,000 at 3 received from other than disqualified persons that exceed the greater of \$5,000 at 3 received from other than disqualified persons that exceed the greater of \$5,000 at 3 received from other than disqualified persons that exceed the greater of \$5,000 at 3 received from greater of \$5,000 at 3 received from greater of \$5,000 at 3 received from greater of \$5,000 at		or expended on its behalf						
the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 cm by early exceed the greater of \$5,000 or 1% of the amount on line 13 cm by early exceed the greater of \$5,000 or 1% of the amount on line 13 cm by early exceed the greater of \$5,000 or 1% of the amount on line 13 cm by early exceed the greater of \$5,000 or 1% of the amount on line 13 cm by early exceed the greater of \$5,000 or 1% of the amount on line 18 cm by exceeding the greater of \$5,000 or 1% of the amount of line 10 cm and income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c 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 (Explain in Part VI.) 13 Total support, deal times 1, bot. 1, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage from 2016 Schedule A, Part III, line 15  16 Public support percentage from 2016 Schedule A, Part III, line 15  17 Investment income percentage from 2017 (line 10c, column (f) divided by line 13, column (f)  17 Investment income percentage from 2017 (line 10c, column (f) divided by line 13, column (f)  17 Investment income percentage from 2017 (line 10c, column (f) divided by line 13, column (f)	5	The value of services or facilities						
6 Total. Add lines 1 through 5		furnished by a governmental unit to						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on line 2 and 3 received from other than disqualified persons that exceed the gratier of \$5.000 or 150 of the amount on line 13 for the year c Add lines 7a and 7b a Public support. (Subtact lite 7c trans line 6)  Section B. Total Support  Calendar year (or fiscal year beginning in) ▶ (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total 9 Amounts from line 6  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b  11 Net income from unrelated business acquired after June 30, 1975 c C Add lines 10a and 10b  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))  16 9 Public support percentage from 2016 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))  17 9		the organization without charge						
3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support. (subtract line 7c trom line 8)  Section B. Total Support  Selendar year (or fiscal year beginning in)  (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 Taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business acquired 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 (Explain in Part VI). 13 Total support, Avadines 9, 10c, 11, and 12)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage from 2016 Schedule A, Part III, line 15  16 9  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)) 17	6	Total. Add lines 1 through 5						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5.00 or 1% of the amount on line 15 for the year and an amount on line 15 for the year and 70.  8 Public support.   Subtract line 7c from line 5)  Section B. Total Support  Calendar year (or fiscal year beginning in) ▶ (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total  9 Amounts from line 6  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c 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 (Explain in Part VI).  13 Total support. (Add lines 9, 10c, 11, and 12)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage from 2016 Schedule A, Part III, line 15  17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))  17   vestment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))  17   vestment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	7a	Amounts included on lines 1, 2, and						
trom other than disqualified persons that exceed the gester of \$5.00 or 1% of the amount on line 13 for the year c Add lines 7a and 7b		3 received from disqualified persons						
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. (Subtact line 7 to tron line 6)  Section B. Total Support  Calendar year (or fiscal year beginning in)  (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total  9 Amounts from line 6  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c 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 (Explain in Part VI).  13 Total support, (Add lines 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage from 2016 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))  17 9	b							
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8 Public support. (Subtract line 7c from line 6)  Section B. Total Support  Calendar year (or fiscal year beginning in)  (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total  9 Amounts from line 6  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b (less section 511 taxes) from businesses 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 (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))  17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))  17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))								
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assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage from 2016 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))  18 9	12							
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49 Investment income percentage from 9046 Cabadula A. Dart III. line 17							18	<u>%</u>
18 Investment income percentage from 2016 Schedule A, Part III, line 17								7 is not
	ıya							
more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	l-							
b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	ū							
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	20							

Т..

## Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

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

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Pai	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	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		
Sec	ction B. Type I Supporting Organizations		1 1	
			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,			
800	supervised, or controlled the supporting organization. stion C. Type II Supporting Organizations	2		
Sec	non C. Type if Supporting Organizations		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	N1 -
	Want a majority of the approximation to discontinuous design and the day, one also a majority of the discontinuous		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	4		
Sec	the supported organization(s). stion D. All Type III Supporting Organizations	1		
000	alon b. All Type in capporting organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	NO
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	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	_		
Ū	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		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	 3).		
а		•		
b				
С		structions	).	
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		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in 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		

Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyir	ng trust on N	ov. 20, 1970 (explain in F	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	omplete Sec	tions A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
_3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6_	Multiply line 5 by .035	6		
_7_	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functiona	lly integrated	d Type III supporting orga	nization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2017

Par	I V   Type III Non-Function	ally integrated 509(	a)(3) Supporting Orga	nizations <sub>(continued)</sub>	
Secti	tion D - Distributions			· ——-	Current Year
1	Amounts paid to supported organiz	ations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity th				
	organizations, in excess of income to	from activity			
3	· ·		s of supported organizations	3	
5	Qualified set-aside amounts (prior IF				
6	,,				
7	Total annual distributions. Add lin				
8	Distributions to attentive supported	•	ne organization is responsive		
	(provide details in <b>Part VI</b> ). See inst	· ·	3		
9	Distributable amount for 2017 from				
		<i>'</i>			
	tion E - Distribution Allocations (see		(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from	Section C, line 6			
2	Underdistributions, if any, for years	prior to 2017 (reason-			
	able cause required- explain in Part	<b>VI</b> ). See instructions.			
3	Excess distributions carryover, if an	y, to 2017			
а					
b	From 2013				
С	From 2014				
	From 2015				
	From 2016				
	Total of lines 3a through e				
	Applied to underdistributions of price	or vears			
	Applied to 2017 distributable amount	•			
	Carryover from 2012 not applied (se				
÷	Remainder. Subtract lines 3g, 3h, a	,			
4	Distributions for 2017 from Section				
•	line 7:	· ·			
я	Applied to underdistributions of price				
	Applied to underdistributions of price				
	Remainder. Subtract lines 4a and 4				
5	Remaining underdistributions for ye				
•	any. Subtract lines 3g and 4a from I				
	than zero, explain in <b>Part VI.</b> See in	_			
6	Remaining underdistributions for 20				
U	· ·				
	and 4b from line 1. For result greate	i iliali zelo, explaili III			
7	Part VI. See instructions.  Excess distributions carryover to	2018 Add lines 2i			
'		ZU 10. Muu IIIIES SJ			
<u> </u>	and 4c.				
	Excess from 2013				
	Excess from 2014				
	Excess from 2015				
	Excess from 2016				
е	Excess from 2017				

Schedule A (Form 990 or 990-EZ) 2017

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

BETHESDA GREEN, INC.

**Employer identification number** 26-1825747

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?    Part II	Par	Organizations Maintaining Donor Advised	l Funds or Other Similar Funds	or Accounts. Complete if the
1 Total number at end of year 2 Aggregate value of contributions to (auring year) 3 Aggregate value of grants from (during year) 4 Aggregate value of grants from (during year) 5 Did the organization inform all chorns and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermisable private benefit?  Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(s) of conservation easements held by the organization (check all that apply).  Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of open space 2 Complete ines 2 at through 2 dif the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  a Total number of conservation easements  b Total acreage restricted by conservation easements  c Number of conservation easements included in (e) acquired after 7/25/06, and not on a historic structure listed in the National Register  Number of states where property subject to conservation easements is located P  A Number of states where property subject to conservation easements in located P  A Number of states where property subject to conservation easements in located P  A Number of states where property subject to conservation easements in located P  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year  P  A Number of states where property subject to conservation easements in its revenue and expense statement, and balance sheet, and inc		organization answered "Yes" on Form 990, Part IV, line	e 6.	
2 Aggregate value of contributions to (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all orders and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(s) of conservation easements held by the organization (check all that apply).  1 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of pans pace 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  2 Total number of conservation easements  3 Total arceage restricted by conservation easements  4 Number of conservation easements in cluded in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register  5 Number of conservation easements in confided, transferred, released, extinguished, or terminated by the organization during the tax year?  4 Number of states where property subject to conservation easement is located by a value of conservation easements in the located by a subject to conservation easement is located by a value of the period of the conservation easements during the year by and subject to conservation easements in the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(ii)  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year by and section 170(h)(4)(B)(ii)  5 In Part XI			(a) Donor advised funds	(b) Funds and other accounts
3 Aggregate value of grants from (during year)  4 Aggregate value at end of year  5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advisor during the tree organization is property, subject to the organization's exclusive legal control?  6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(s) of conservation easements held by the organization (check all that apply).  Preservation of natural habitat  Protection of natural habitat  Preservation of open space  2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  3 Total number of conservation easements  4 Total acreage restricted by conservation easements  5 Number of conservation easements on a certified historic structure included in (a)  8 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  9 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  1 Number of states where property subject to conservation easement is located   2 So Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year  2 Amount of expenses incurred of the conservation easements in holds?  3 Amount of expenses incurred of the conservation easements in its revenue and expenses statement, and balance sheet, and include, if applicable, the text of the footnote to the organization easements in this revenue and expenses statement, and balance shee	1	Total number at end of year		
4 Aggregate value at end of year  5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advisor funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(s) of conservation easements held by the organization (check all that apply).  □ Preservation of land for public use (e.g., recreation or education) □ Preservation of a historically important land area □ Preservation of open space  2 Complete lines 2 at through 2d if the organization held a qualified conservation contribution in the form of a certified historic structure □ Preservation of open space  2 Complete lines 2 at through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  a Total number of conservation easements.  1 Total acreage restricted by conservation easements.  2 Total acreage restricted by conservation easements.  3 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register.  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year.  4 Number of states where property subject to conservation easement is located.  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements that holds?  5 Does the organization have a written policy reparding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements.  5 Does each conservation easement reported on line 2(d) above satisfy the requirements of se	2	Aggregate value of contributions to (during year)		
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are the organization's property, subject to the organization's exclusive legal control?	4	Aggregate value at end of year		
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for charitable puryoses and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?    Part     Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.    Purpose(s) of conservation easements held by the organization (check all that apply).				
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b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year   4 Number of states where property subject to conservation easement is located   5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  5 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   5 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   5 S Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii)   7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii)   9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the fo		•		Held at the End of the Tax Year
c Number of conservation easements on a certified historic structure included in (a)  d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year   4 Number of states where property subject to conservation easement is located   5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   3 Number of scenes incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   4 Number of scenes incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   5 Notes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(ii)?  9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.  b If the or	а			
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$  Boes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)) and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in further	b	, , , , , , , , , , , , , , , , , , , ,		
Ilisted in the National Register				
Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  4 Number of states where property subject to conservation easement is located ▶  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes Notes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Par	d	• • • • • • • • • • • • • • • • • • • •	•	
A Number of states where property subject to conservation easement is located ▶  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶  8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?				
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Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year    Manual of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Manual of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Manual of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Manual of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Manual of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Manual of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Manual of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Manual of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Manual of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Manual of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Manual of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Manual of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Manual of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during th		· · ———		
violations, and enforcement of the conservation easements it holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Yes Description in 170(h)(4)(B)(ii)  Yes Description in 170(h)(4)(B)(ii)  Yes Description in 170(h)(4)(B)(iii)  Yes Description				
Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year    Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Samount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Samount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Samount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Samount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Namount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Namount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Namount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Namount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Namount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year   Namount of expenses incurred in monitoring, inspecting, handling the year   Namount of expenses incurred in monitoring, inspecting the seaments during the year   Namount of expenses incurred in monitoring the year   Namount of expenses incurred in monitoring the year   Namount of expenses incurred in monitoring inspecting the seaments during the year   Namount of expenses incurred in the year   Namount of expenses incurred	5			
Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year    S		•		
<ul> <li>▶ \$</li></ul>	6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing con	servation easements during the year
<ul> <li>▶ \$</li></ul>	_	<u> </u>		
Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii)  and section 170(h)(4)(B)(iii)?  In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 8.  1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1    P	7		ing of violations, and enforcing conserva	ation easements during the year
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<ul> <li>If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.</li> <li>If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: <ol> <li>Revenue included on Form 990, Part VIII, line 1</li> <li>Assets included in Form 990, Part X</li> </ol> </li> </ul>	. u.			and diminal Addator
historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X	10			mont and balance sheet works of art
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b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X				ance of public service, provide, in Fart Alli,
treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X	h			t and balance sheet works of art, historical
relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X	b		***	
(i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X			ucation, or research in furtherance of pu	iblic service, provide the following amounts
(ii) Assets included in Form 990, Part X		-		<b>•</b> •
	2			
, , , , , , , , , , , , , , , , , , ,	2			ai gaiii, provide
the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	_			<b>•</b> \$
a Revenue included on Form 990, Part VIII, line 1  b Assets included in Form 990, Part X   \$ \bullet\$ \$				_

732051 10-09-17

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Schedule D (Form 990) 2017

Par	t III Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	asures, or	Other	Similar	Assets	(contin	ued)	
3	Using the organization's acquisition, accession	on, and other record	s, check	any of the f	following that	are a sign	nificant us	e of its c	ollection	item	S
	(check all that apply):										
а	Public exhibition	d	ı 🔲 ı	Loan or exc	hange progra	ıms					
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explair	n how the	ey further th	ne organizatio	n's exem	pt purpose	e in Part	XIII.		
5	During the year, did the organization solicit or	r receive donations o	of art, his	storical treas	sures, or othe	r similar a	assets				
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arrang	gements. Comple	ete if the	organizatio	n answered "	Yes" on F	orm 990,	Part IV, I	ine 9, or		
	reported an amount on Form 990, Par	t X, line 21.									
1a	Is the organization an agent, trustee, custodia	an or other intermed	iary for c	contributions	s or other ass	ets not in	cluded				
	on Form 990, Part X?							$\square$	Yes		No
b	If "Yes," explain the arrangement in Part XIII a										
									Amount		
С	Beginning balance						1c				
	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for e	escrow or cu	ıstodial accou	unt liabilit	y?	$\square$	Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Pai	t V Endowment Funds. Complete i	f the organization an	swered '	"Yes" on Fo	rm 990, Part	IV, line 10	).				
		(a) Current year	<b>(b)</b> P	rior year	(c) Two year	s back (	<b>d)</b> Three ye	ars back	(e) Four	years	s back_
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g	ı, column (a)	)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment >	%									
С	Temporarily restricted endowment ▶	%									
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.									
За	Are there endowment funds not in the posses	ssion of the organiza	tion that	t are held ar	nd administer	ed for the	organizat	ion	-		
	by:									Yes	No
	(i) unrelated organizations								3a(i)		
									3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on So	chedule R?					3b		
4	Describe in Part XIII the intended uses of the		wment fu	unds.							
Pai	t VI Land, Buildings, and Equipm										
	Complete if the organization answered	d "Yes" on Form 990	), Part IV								
	Description of property	(a) Cost or o basis (investr		. ,	or other (other)		cumulated reciation	t	(d) Bool	k valu	ne er
1a	Land										
	Buildings										
С	Leasehold improvements										
d	Equipment				2,183.		1,43	7.		7	46.
	Other										
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colum	nn (B), line 1	0c.)					7	46.
							_		_ /-		

	GREEN, INC.	2	6-1825747 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Y			
(a) Description of security or category (including name of securi	ity) <b>(b)</b> Book value	(c) Method of valuation: Cost or e	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 "Y			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
<u>(1)</u>			
(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 "Y		line 11d. See Form 990, Part X, line 15.	(la) Daaleeralee
	(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) Part X Other Liabilities.	) line 15.)		<b>▶</b>
Complete if the organization answered "Y	es" on Form 990, Part IV,	line 11e or 11f. See Form 990, Part X, line 2	25.
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2017

(9)

#### **SCHEDULE G**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization Employer identification number 26-1825747 BETHESDA GREEN, INC. Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. а Mail solicitations Solicitation of non-government grants b Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events С g d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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Schedule G (Form 990 or 990-EZ) 2017

Pa	rt I					
		of fundraising event contributions and gr	(a) Event #1  GALA	(b) Event #2	(c) Other events  NONE	(d) Total events (add col. (a) through
he			(event type)	(event type)	(total number)	- col. <b>(c)</b> )
Revenue	1	Gross receipts	67,037.			67,037.
Ъ	2	Less: Contributions	67,037.			67,037.
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
seuses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
	_	Entertainment	25 772			25 772
	9 10	Other direct expenses	- · · · · · · ·		<b>•</b>	25,772. 25,772.
	11	Net income summary. Subtract line 10 from I	ine 3, column (d)			-25,772.
Pa	rt I		answered "Yes" on Form	990, Part IV, line 19, or r	eported more than	
Revenue		\$15,000 on Form 990-EZ, line 6a.	(a) Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1	Gross revenue				
ses	2	Cash prizes				
xpen	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes %  No	Yes %  No	Yes % No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		<b>&gt;</b>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		<b>&gt;</b>	
а	ls t	ter the state(s) in which the organization condute the organization licensed to conduct gaming a No," explain:	_	states?		Yes No
	_					
		ere any of the organization's gaming licenses re Yes," explain:	evoked, suspended, or te	rminated during the tax y	ear?	Yes No

Schedule G (Form 990 or 990-EZ) 2017

Sch	edule G (Form 990 or 990-EZ) 2017 BETHESDA GREEN, INC.	26-1825	747	Page 3
11			Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?	,	Yes	No
13	Indicate the percentage of gaming activity conducted in:			
		13a		%
	The organization's facility			
	An outside facility			<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and record	S:		
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amo	unt		
	of gaming revenue retained by the third party  \$\bigs\\$			
c	If "Yes," enter name and address of the third party:			
	,			
	Name			
	Address >			
16	Gaming manager information:			
	Name			
	Gaming manager compensation  \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	└─ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	າ the		
	organization's own exempt activities during the tax year > \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and P	art III, lines 9, 9	b, 10l	o, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		•	, ,
	100, 10, and 112, an approximation for provide any additional information.			
_				

Schedule G (Form 990 or 990-EZ) BETHESDA GREEN, INC.  Part IV Supplemental Information (continued)	26-1825747 Page 4
Part IV   Supplemental Information (continued)	
	_

#### SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

# Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

2017 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

BETHESDA GREEN, INC.

Employer identification number 26-1825747

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

BETHESDA GREEN WORKS TO LOCALLY AND COMMUNITY. ACCELERATE THE

SUSTAINABLE ECONOMY WITH A FOCUS ON INNOVATION, IMPACT, ACCLERATE THE

SUSTAINABLE ECONOMY WITH A FOCUS ON INNOVATION,

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

BETHESDA GREEN WORKS TO LOCALLY ACCELERATE THE SUSTAINABLE ECONOMY WITH

A FOCUS ON INNOVATION, IMPACT, AND COMMUNITY. WE ARE AN INCUBATOR, A

CONNECTOR, AND A COMMUNITY PARTNER. WE ACCELERATE GREEN BUSINESS

STARTUPS INTO VIABLE COMPANIES WITH TRIPLE BOTTOM-LINE IMPACT (PEOPLE,

PLANET, PROFIT). WE FOSTER CONNECTIONS THROUGH THE PILOTING AND TESTING

OF INNOVATIVE PROGRAMS. WE ENGAGE THE LOCAL COMMUNITY THROUGH

OPPORTUNITIES THAT INSPIRE IMPLEMENTATION OF GREEN SOLUTIONS.

PROGRAM SERVICE ACCOMPLISHMENTS: FORM 990, PART III, LINE 4A, BE GREEN HUB - INCUBATOR PROGRAM THE BE GREEN HUB SERVES AS AN ENTREPRENEURIAL NETWORKING HUB, PROVIDES MEMBERS WITH MENTORSHIP, OFFERS ACCESS TO QUALITY, AFFORDABLE PROFESSIONAL SERVICES, SERVES TO FACILITATE INVESTMENT OPPORTUNITIES CONNECTS MEMBERS WITH POTENTIAL CLIENTS AND CUSTOMERS, AND PROVIDES A FEATURE-RICH WORKING SPACE. IN 2016, 12 UNIQUE INCUBATOR COMPANIES GENERATED FULL-TIME AND PART-TIME JOBS AND INTERNSHIPS FOR OVER 80 PEOPLE (SOME FOR PARTIAL YEAR), EARNED \$770,000 IN REVENUE, AND RAISED OVER \$2.5 MILLION (VC AND EQUITY, TECHNOLOGY DEVELOPMENT GRANTS IN 2017 WE ANNOUNCED A TRANSITION TO A REVAMPED PROGRAM AWARDS). INCLUDING A MORE INTENTIONALLY STRUCTURED CURRICULUM, MENTORSHIP AND

732211 09-07-17

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

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization

**Employer identification number** 

BETHESDA GREEN, INC.

26-1825747

SERVICES COMBINED WITH A FULL-TIME DIRECTOR. THE FOCUS CONTINUES TO BE

ON GREEN BUSINESSES INCLUDING FOOD AND ENVIRONMENT BUSINESSES WITH

ENVIRONMENTAL AND SOCIAL IMPACTS, AND IS ACCESSIBLE THROUGHOUT THE

REGION. COHORT 2018 RECRUITMENT TOOK PLACE IN 2017 RESULTING IN 8 NEW

COMPANIES WITH WHOM AN UP-TO-4 YEARS AGREEMENT WAS SIGNED. THE 2018

PROGRAM STARTS WITH AN INTENSIVE 6-MONTH ACCELERATOR PROGRAM IN THE

FIRST HALF OF 2018. IN 2017 BETHESDA GREEN PARTNERED WITH ESEC

(EASTERN SHORE ENTREPRENEURSHIP CENTER), AND WON AN INNOVATION

CHALLENGE AWARD FROM MARYLAND TEDCO FOR ITS PROPOSAL ON RURAL-URBAN

COLLABORATION IN MARYLAND.

#### BE IMPACT INITIATIVE

TO PROVIDE A TOOL FOR ASSESSMENT, IMPROVEMENT AND EXPRESSION OF IMPACT

FOR LOCAL COMPANIES AND START-UPS, WE PARTNERED WITH B-LAB

(WWW.BCORPORATION.NET), AND WE NOW RUN A SOFTWARE-BASED, IN-PERSON FREE

WORKSHOPS SERIES: THE "BE IMPACT" INITIATIVE, THAT FOCUSES ON MEASURING

SOCIAL AND ENVIRONMENTAL IMPACT. IN 2016, BETHESDA GREEN WAS TRAINED

BY B-LAB AND THEN CARRIED A PILOT PROGRAM IN THE FALL, ALONG WITH

NUMEROUS PARTNER ORGANIZATIONS INCLUDING APPRENTICE COLLEGE STUDENTS

AND PARTNERS. BY THE END OF 2017, 20 COMPANIES HAD JOINED THE B IMPACT

MOVEMENT. BETHESDA GREEN IS A LEADING PARTNER IN A REGIONAL-WIDE DMV

(DC, MD, VA) INITIATIVE THAT INTENDS TO GROW THE MOVEMENT MANY FOLDS

OVER A PERIOD OF 2 TO 3 YEARS.

#### COMMUNITY ENGAGEMENT

OUR IDENTITY IS ROOTED IN LOCAL COMMUNITY PROGRAMS. OUR FOCUS

AUDIENCES ARE LOCAL LEADERS AND YOUTH. OUR KEY PROGRAMS: GREEN

NEIGHBORS GROUP, A SUSTAINABILITY SERIES, YOUTH ENGAGEMENT PROGRAMS

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization **Employer identification number** BETHESDA GREEN, INC. 26-1825747 INCLUDING OUR LEADERSHIP ACADEMY FOR HIGH SCHOOLERS AND OUR FIELDS OF GREEN INTERNSHIP FAIR, AND OUR ANNUAL GALA THAT ENGAGES AND CELEBRATES LOCAL GREEN CHAMPIONS. WE ALSO CONTINUED TO MANAGE A MULTI-YEAR CHESAPEAKE BAY TRUST GRANT IN PARTNERSHIP WITH A MULTI-FAMILY, MULTI-BUILDING CONDOMINIUM COMPLEX THAT AIMS TO REDUCE DAMAGING STORM WATER RUNOFF, AS ALSO EDUCATE AND ENGAGE THE LOCAL COMMUNITY OF CONDO RESIDENTS AND BUILDING OWNERS ABOUT THIS TYPE OF EFFORTS. SINCE 2008, NEARLY 5000 PEOPLE HAVE PARTICIPATED IN AN EVENT OR MORE. THE BETHESDA GREEN-LED SIDEWALK RECYCLING PROJECT HAS COLLECTED MORE THAN 59000 LBS. OUR SOCIAL MEDIA REACH IS GREATER THAN 5,000 AND OUR NETWORK GREATER THAN 10,000. FORM 990, PART VI, SECTION B, LINE 11B: A COPY OF THE FORM 990 WAS GIVEN TO EACH BOARD MEMBER PRIOR TO FILING. THE BOARD MEMBERS WERE INVITED TO COMMENT ON THE THE FORM. FORM 990, PART VI, SECTION B, LINE 15A: THE BOARD REVIEWS AND APPROVES THE EXECUTIVE DIRECTOR'S COMPENSATION. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST. ADDITIONAL FINANCIAL REPORTING INFORMATION A. IN-KIND CONTRIBUTIONS: BETHESDA GREEN TRACKS KEY IN-KIND CONTRIBUTIONS, TOTALING \$182,443. COMBINED PROFESSIONAL SERVICES CONTRIBUTED, ATTORNEYS AND ACCOUNTANTS, TOTALED \$61,443. WE BENEFIT Schedule O (Form 990 or 990-EZ) (2017)

BETHESDA GREEN, INC.	26-1825747						
FROM OVER 4000 SQ. FOOT OF FREE SPACE FROM A CORPORATE DON	OR VALUED AT						
\$112,000 AND EVENT RENTAL SERVICES FOR OUR LARGEST ANNUAL	FUNDRAISER						
(ANNUAL GALA) VALUED AT \$9,000.							
B. RESTRICTED FUNDS: BETHESDA GREEN TRACKS BOTH TIME AND P	B. RESTRICTED FUNDS: BETHESDA GREEN TRACKS BOTH TIME AND PURPOSE						
RESTRICTED FUNDS. AT THE END OF 2017, BETHESDA GREEN RECEIVED							
\$190,320.22 WHICH WAS PURPOSE-RESTRICTED, INCLUDING \$175,0	00 AS AN						
ECONOMIC DEVELOPMENT FUND AGREEMENT FROM MONTGOMERY COUNTY	DEDICATED TO						
THE BE GREEN HUB GREEN TECH COMPANIES AND TO BE SPENT BY D	ECEMBER 2021.						
ANOTHER \$150,000 GRANT WAS COMMITTED BUT TIME- RESTRICTED	UNTIL 2018.						

#### Form **8868**

(Rev. January 2017)

Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

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

OMB No. 1545-1709

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

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

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

				Enter file	er's identifyir	ıg number
Type or	Name of exempt organization or other filer, see instruc	ctions.		Employe	ridentification	n number (EIN) or
print	BETHESDA GREEN, INC.					\
File by the	-				26-182	
due date for filing your	Number, street, and room or suite no. If a P.O. box, so		ions.	Social se	curity numbe	r (SSN)
return. See	4825 CORDELL AVENUE, SUITE					
instructions.	City, town or post office, state, and ZIP code. For a for BETHESDA, MD 20814	oreign addi	ress, see instructions.			
Enter the	Return Code for the return that this application is for (file	e a separat	e application for each return)			
Application	on	Return	Application			Return
ls For		Code	Is For			Code
Form 990	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990	BL	02	Form 1041-A			08
Form 472	0 (individual)	03	Form 4720 (other than individual)			09
Form 990	PF	04	Form 5227			10
Form 990	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above) 06 Form 8870  VERONIQUE MARIER				12		
<ul><li>If the o</li></ul>	one No. ► $240-396-2440$ rganization does not have an office or place of business s for a Group Return, enter the organization's four digit (  I if it is for part of the group, check this box	Group Exe	mption Number (GEN) I	this is fo	r the whole g	
	quest an automatic 6-month extension of time until		15 0010		pt organizati	
	the organization named above. The extension is for the c		· · · · · · · · · · · · · · · · · · ·	tile exem	ipi organizan	onretum
101 1	the organization hamed above. The extension is for the c	organizatio	ins return for.			
▶[	$\overline{\mathrm{X}}$ calendar year $2017$ or					
▶[	tax year beginning	, an	d ending			
2 If th	e tax year entered in line 1 is for less than 12 months, ch			inal retur	n	
	Change in accounting period					
3a If th	is application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			
non	refundable credits. See instructions.			3a	\$	0.
<b>b</b> If th	is application is for Forms 990-PF, 990-T, 4720, or 6069	, enter any	refundable credits and			
<u>esti</u>	mated tax payments made. Include any prior year overp	ayment all	owed as a credit.	3b	\$	0.
c Bal	ance due. Subtract line 3b from line 3a. Include your pa	yment with	n this form, if required,			
by ι	using EFTPS (Electronic Federal Tax Payment System). S	See instruc	ctions.	3с	\$	0.
Caution:	If you are going to make an electronic funds withdrawal	(direct deb	oit) with this Form 8868, see Form 84	53-EO an	d Form 8879	EO for payment

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

Form 8868 (Rev. 1-2017)

instructions.