

PUBLIC DISCLOSURE COPY

OMB No. 1545-0047

2016

Form 990
Nonprofit
Organization

990

Return of Organization Exempt From Income Tax

Under section 501(c)(3), 501(c)(29), or 501(c)(42) of the Internal Revenue Code (except private foundations)

- Do not enter social security numbers on this form; do not file for state public
- Information about Form 990 and its instructions is at www.irs.gov/form990

Department of the Treasury
Internal Revenue Service

1 For the 990 reporting year, or fiscal beginning: **01/01** and ending: **12/31**

2 Organization's name: **UNIVERSITY OF MARYLAND SYSTEM** (Federal identification number: **00-0000000**)

3 a. Principal office address: **100 UNIVERSITY DRIVE** (City, state, and ZIP+4) **ANNAPOLIS MD 21403**

4 b. Mailing address (if different from 3a): **100 UNIVERSITY DRIVE** (City, state, and ZIP+4) **ANNAPOLIS MD 21403**

5 a. Telephone number: **410-326-7000**

6 b. E-mail address: **UMSYSTEM@UMMARYLAND.EDU**

7 a. Website: **WWW.UMMARYLAND.EDU**

8 a. Form 990-BE filing date: **03/15/2017**

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Part I Summary

1	Entity description (the organization's mission or most significant activities): UNIVERSITY OF MARYLAND SYSTEM		
2	Check the box <input type="checkbox"/> if the organization is described by operations or disposed of more than 20% of total assets:		
3	Number of voting members of the governing body (Part III, line 1a):	3	30
4	Number of independent voting members of the governing body (Part III, line 1a):	4	20
5	Total number of individuals employed in calendar year 2016 (Part V, line 1a):	5	40
6	Total number of volunteers (estimate if necessary):	6	2,700
7a	Total unrelated business revenue from Part VIII, column (C), line 10:	7a	0
7b	Net unrelated business taxable income from Part VIII, line 24:	7b	0
8	Contributions and grants (Part VIII, line 1b):	4,888,000	17,810,000
9	Program service revenue (Part VIII, line 1c):	80,000	80,000
10	Investment income (Part VIII, column (B), lines 3, 4, and 1a):	9,000	130,000
11	Other revenue (Part VIII, column (B), lines 5, 6a, 6b, 6c, 6d, and 11a):	30,000	10,000
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (B), line 13):	4,997,000	18,050,000
13	Grants and similar amounts paid (Part IX, column (A), line 1-2):	2,044,000	7,200,000
14	Benefits paid to or for members (Part IX, column (A), line 3):		
15	Salaries, other compensation, employee benefits (Part IX, column (A), line 4-12):	4,744,000	4,410,000
16a	Professional fundraising fees (Part IX, column (A), line 13a):	0	0
16b	Total fundraising expenses (Part IX, column (A), line 13b) 2,000,000		
17	Other expenses (Part IX, column (A), lines 14-17a, 17b-17d):	2,000,000	2,000,000
18	Total expenses - add lines 13, 17 (must equal Part IX, column (A), line 19):	11,000,000	16,110,000
19	Revenue less expenses. Subtract line 18 from line 12:	3,997,000	1,940,000
20	Total assets (Part X, line 1b):	17,000,000	46,000,000
21	Total liabilities (Part X, line 1c):	4,744,000	6,000,000
22	Net assets or fund balances. Subtract line 21 from line 20:	12,256,000	40,000,000

Part II Signature Block

Under penalty of perjury, I declare that I have prepared this return, including accompanying schedules and statements, truthfully and accurately, and that the information provided on this form is true and complete. I understand that anyone who furnishes false or misleading information on a tax return or who omits material or information requested on the tax return is committing a federal tax crime.

Sign Here: **President or officer** **Yes**

Signature: **UNIVERSITY PRESIDENT & CEO**

Print Preparer Use Only: **UNIVERSITY PRESIDENT & CEO** (Preparer's name) **UNIVERSITY PRESIDENT & CEO** (Preparer's title) **03/15/2017** (Date) **UNIVERSITY PRESIDENT & CEO** (Preparer's address) **UNIVERSITY PRESIDENT & CEO** (Preparer's phone) **UNIVERSITY PRESIDENT & CEO** (Preparer's fax)