** PUBLIC DISCLOSURE COPY **

Form **990**

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.

Open to Public Inspection

<u> </u>	ror trie	e 2021 Calefidar year, or tax year beginning 000 1, 2021 and	ending U	JON 30, 2022	
В	Check if applicabl	C Name of organization		D Employer identific	cation number
	Addre	CHESAPEAKE BAY FOUNDATION INC			
CHESAPEAKE BAY FOUNDATION INC Doing Dusiness as Number and street (or P.O. box if mail is not delivered to street address) Free Part of HERNDON AVENUE City or town, state or province, country, and ZIP or foreign postal code ANNAPOLIS, MD 21403 - 4503 ANNAPOLIS, MD 21403 - 4503 Tax-exempts status: X 501(c)(3) 501(c) ()			57		
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Final	6 HEDNDON AVENUE			
	termin			G Gross receipts \$	50,917,538.
				H(a) Is this a group re	
	Applic			- 100 NO	
				The same and the s	
1	Tax-ex		or 527		
				-	
			L Year		
	1	Briefly describe the organization's mission or most significant activities: The	Chesap	eake Bay For	undation's
Se					
nar	2				sets.
Ver	3				32
ဗိ	4				31
ళ	5				264
iţie	6			The state of the s	13439
Ę	7 a				492,773.
Ă	b				317,103.
					Current Year
	8	Contributions and grants (Part VIII, line 1h)		23,177,187.	31,074,308.
nue	9		ALLES AND	865,187.	863,348.
Ş	10		A-COCCOCIONIONO	6,225,594.	5,454,727.
Be	11				89,829.
					37,482,212.
				764,908.	510,137.
					0.
	45			18,106,343.	18,371,539.
Ses	16a			710,269.	674,760.
pen	b	Total fundraising expenses (Part IX. column (D), line 25) 3,785,99	98.		
Ě	17	The state of the s		9,856,372.	11,981,553.
	10000		2010/1000	29,437,892.	31,537,989.
				993,193.	5,944,223.
or	4	, ,	В	eginning of Current Year	End of Year
ets	20	Total assets (Part X, line 16)		137,261,468.	125,747,119.
ASS	21			6,405,350.	4,504,640.
Net	22	Net assets or fund balances. Subtract line 21 from line 20		130,856,118.	121,242,479.
P	art II				
Und	der pena	alties of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best of my	y knowledge and belief, it is
true	e, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of wi	hich prepare	r has any knowledge.	
C:-	_	Signature of officer . Falk		Date Date	1 - 2023
		, ,			
He	16				
_		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pai	d	Trind Typo proparer o manie	Locati	04/24/2023 if self-emplo	P00288314
		Firm's name GELMAN, ROSENBERG & FREEDMAN	- Cus		
	Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N			
550		BETHESDA, MD 20814-2930		Phone no. 3 0	1-951-9090
Ma	v the I	RS discuss this return with the preparer shown above? See instructions			X Yes No
	001 12-0		ons.		Form 990 (2021)

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	The Chesapeake Bay Foundation's (CBF) mission, simply stated, is to
	Save the Bay.
	See Schedule O for Continuation (page 52)
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ $14,611,170.$ including grants of \$ $499,830.$) (Revenue \$ $571,544.$)
	Environmental Protection and Restoration (EPR)
	The Environmental Protection and Restoration Department's primary
	objective is to drive significant improvements in the health of the
	Chesapeake Bay as measured by CBF's Bay Health Index. Consistent with
	the CBF strategic plan, this involves developing and recommending
	priorities for the organization's policy work, engaging our members and
	implementing restoration elements of the plan. The Program utilizes a
	combination of strategies to help achieve a reduction in Bay pollution,
	restoration of critical habitat, and better-managed fisheries.
	See Schedule O for Continuation (page 52)
4b	(Code:) (Expenses \$ 7,034,018. including grants of \$10,307.) (Revenue \$10,307.)
	Education
	CBF's Education Department is responsible for leading students,
	teachers, and adults in hands-on, on-the-water, environmental education
	experiences about the Bay. Through education programs, our
	professional educators use innovative teaching methods to engage
	students in real-world issues and scientific inquiry, exciting and
	encouraging them to take action to protect our natural resources.
	Student Leadership courses during the summer further train student
	leaders from high schools across the region.
	Coo Cahodulo O for Continuation (none E2)
	See Schedule O for Continuation (page 53)
4c	(Code:) (Expenses \$3,194,867. including grants of \$) (Revenue \$) (Revenue \$)
	Communications
	The Communications Department's shares is to market CRE and its policy
	The Communications Department's charge is to market CBF and its policy agenda, educate and engage the public, and mobilize support for
	organizational priorities and Bay restoration efforts. Communications
	also manages internal communications and public opinion research.
	also manages internal communications and public opinion research.
	See Schedule O for Continuation (page 54)
	bee beneate o for continuation (page 54)
	Other program services (Describe on Schedule O.)
₩u	
	(Expenses \$\frac{\text{including grants of \$}}{\text{otal program service expenses}} \) (Revenue \$\text{Nevenue \$}} Total program service expenses \$\text{24,840,055.}\$
-10	Form 990 (2021)
	10111 (2021)

Form 990 (2021) CHESAPEAKE BAY FOUNDATION INC Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
Ŭ	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	٣		
U		ء ا		X
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		v	
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	X	_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		77	
	Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	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	
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
ч	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	٠٠		
u		11d		x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX		Х	<u> </u>
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Λ	_
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	١	v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	-
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		7.7	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			l
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
=	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	,	19		X
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	• •	20a 20b		 ^
b O4	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	ZUD		\vdash
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	۱	v	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	

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Part IV	Checklist of Required Schedules	(continued)

	·		Yes	No
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
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		Х
	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		Х
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
	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		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
а		28a		х
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		
·		28c		х
29	"Yes," complete Schedule L, Part IV	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
30		30		х
31	contributions? If "Yes," complete Schedule M	31		X
32	Did the organization required, terminate, or dissolve and cease operations: If "Yes," complete Schedule N, Part I	31		
32	,	32		Х
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33		33		х
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34		Х
35.0	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	33a		
b		256		
36	within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i> Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
30	If "Yes," complete Schedule R, Part V, line 2	36		х
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	31		
30		38	х	
Pai	Note: All Form 990 filers are required to complete Schedule O 't V Statements Regarding Other IRS Filings and Tax Compliance	1 30		
	Check if Schedule O contains a response or note to any line in this Part V			
	Chook is Contidued Contrained a response of flote to any line in this fact v		Voo	Na
4	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
C		10	Х	
	(gambling) winnings to prize winners?	1c		(2021)

132004 12-09-21

CHESAPEAKE BAY FOUNDATION INC 52-6065757 Page 5 Form 990 (2021) Statements Regarding Other IRS Filings and Tax Compliance Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 264 filed for the calendar year ending with or within the year covered by this return Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions. Х **3a** Did the organization have unrelated business gross income of \$1,000 or more during the year? За Х b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **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? X Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). Х Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? Х 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7с Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? X Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g 7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. N/A 9a Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A 9b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 N/A Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders N/A Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a 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 N/A 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? N/A 13a Note: See the instructions for additional information the organization must report on Schedule O. 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 Enter the amount of reserves on hand Х Did the organization receive any payments for indoor tanning services during the tax year? **b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or Х excess parachute payment(s) during the year? 15 If "Yes," see the instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?

> Form **990** (2021) 2021.05080 CHESAPEAKE BAY FOUNDATION 03858 1

If "Yes," complete Form 6069.

CHESAPEAKE BAY FOUNDATION INC 52-6065757 Form 990 (2021) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 32 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 31 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a **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 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a Х b Each committee with authority to act on behalf of the governing body? 8b 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 on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes

10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	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 on 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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed	▶See	Schedule	C
----	----------------------------------------------------------------------------	------	----------	---

18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available
	for public inspection. Indicate how you made these available. Check all that apply.

X Own website Another's website X Upon request Other (explain on Schedule O)

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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 David Fogle - 410-268-8816

Form **990** (2021)

21403-4503

6 HERNDON AVENUE, ANNAPOLIS

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

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

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

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

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

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

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

(A)	(B)	T	iiiZu		<u> </u>	ipoi	Jack	(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
ramo and the	hours per					than o		compensation	compensation	amount of
	week	offi	cer ar	nd a d	irecto	r/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dir	as as			rted		organization	(W-2/1099-MISC/	from the
	related	ıstee	truste		gy.	bens		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee		1099-NEC)		and related
	line)	divid	stitut	Officer	ey em	ighes	Former			organizations
(1) William C. Baker	40.00	=	=	0	~	工画	Œ			
President (through 12/21)		х		х				356,063.	0.	18,941.
(2) David A. Fogle	40.00							,		<u>, </u>
Treasurer; Chief Financial Officer				Х				241,380.	0.	20,518.
(3) Alison H. Prost	40.00									
VP - Env. Prot. & Restoration					Х			193,332.	0.	25,660.
(4) Jon A. Mueller	40.00									
Vice President - Litigation						X		210,624.	0.	8,108.
(5) Katharene P. Snavely	40.00									
Chief Development Officer					Х			191,229.	0.	23,230.
(6) Robert J. Beach	40.00	<u> </u>								
Vice President - Communications						X		168,467.	0.	22,062.
(7) Thomas W. Ackerman	40.00]							_	
Vice President - Education					Х			177,368.	0.	8,243.
(8) William A. Agee III	40.00]							_	
Secretary; VP Administration				Х				173,039.	0.	6,368.
(9) Kristen M. Diggs	40.00	1							_	
Vice President - Human Resources					Х			150,751.	0.	17,649.
(10) Shannon B. Lyons	40.00	1				l		404 055		
Campaign Director	10.00					X		121,857.	0.	20,306.
(11) Denise F. Stranko	40.00	4				l		115 040	•	00 000
Federal Executive Director	40.00					X		117,242.	0.	20,023.
(12) Rachel E. Hlavay	40.00	-				,,		110 412	0	10 600
Senior Director - Dev'l Operations	40.00		_			Х		118,413.	0.	12,688.
(13) Hilary H. Falk	40.00	·		37					0	0
President (beginning 01/22)	4.00	Х		Х				0.	0.	0.
(14) Elizabeth Oliver-Farrow Chair	4.00	х		х					0.	0
(15) Otis S. Jones	2.00	^		^				0.	0.	0.
Vice Chair	2.00	Х		х				0.	0.	0.
(16) Marnie Abramson	1.00	┢		^		\vdash		0.	0.	<u> </u>
Trustee (beginning 01/22)	1.00	Х						0.	0.	0.
(17) Dara C. Bachman	1.00	┢	\vdash	\vdash	\vdash	\vdash		0.	0.	U •
Trustee	1.00	Х						0.	0.	0.
	L	22		<u> </u>	<u> </u>			1 0.	U •]	Form 990 (2021)
132007 12-09-21				_	_					1 01111 000 (2021)

	EAKE BAY F	'OU	ND	AΤ	'IO	N	IN	C	52-6065	757 Page 8
Part VII Section A. Officers, Directors,	Trustees, Key Emp	oloye	ees,	and	l Hiç	ghes	t Co	pmpensated Employee	s (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do			ition _{more}	l than c	one	Reportable	Reportable	Estimated
	hours per week	box,	unles	ss per	son is	s both	an	compensation	compensation	amount of
	(list any		Jor un			17 11 413		from the	from related	other
	hours for	Individual trustee or director				_		organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or (stee			ısatec		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	nstitutional trustee		yee	ım per		1099-NEC)	,	and related
	below	idual	tution	er	Key employee	est co loyee	ıer	,		organizations
	line)	Indiv	Insti	Officer	Key 6	Highest compensated employee	Former			
(18) R. Bruce Bradley	1.00									
Trustee		Х						0.	0.	0.
(19) Joan P. Brock	1.00									
Trustee		Х						0.	0.	0.
(20) George L. Bunting Jr.	1.00									
Trustee		Х						0.	0.	0.
(21) Keith D. Campbell	1.00									
Trustee (through 01/22)		Х						0.	0.	0.
(22) Michael J. Chiaramonte	4.00									
Trustee		Х						0.	0.	0.
(23) Brian Cobb	1.00									
Trustee (beginning 01/22)		Х						0.	0.	0.
(24) Robert S. Evans	1.00									
Trustee (through 01/22)		Х						0.	0.	0.
(25) Margaret M. Freeman	1.00									
Trustee		Х						0.	0.	0.
(26) Alexandra Grayson	1.00									
Trustee (beginning 01/22)		Х						0.	0.	0.
1b Subtotal							>	2,219,765.	0.	203,796.
c Total from continuation sheets to Pa							>	0.	0.	0.
d Total (add lines 1b and 1c)							<u> </u>	2,219,765.	0.	203,796.
2 Total number of individuals (including b	out not limited to th	ose	liste	d ab	ove) wh	o re	ceived more than \$100,	000 of reportable	
compensation from the organization	<u> </u>									24
									ı	Yes No

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Conrad Brothers of VA Inc., 800 Industrial	Building	
Ave, PO Box 5445, Chesapeake, VA 23324	construction	1,503,994.
Production Solutions, Inc.	Mass production	
P.O. Box 26168, Oklahoma, OK 73126-0618	printing	1,243,560.
Allegiance Fundraising Group, LLC		
P.O. Box 9132, Fargo, ND 58106-9132	Media Consultants	488,376.
Traction Sales & Mrkting, 2700 Production	Software system	
Way, 5F1, Burnaby, BC, CANADA V5A 0C2	implementation	257,129.
Delmarva RC&D Council, Inc.		
15 Washington Street, Cambridge, MD 21613	Landscaping services	231,168.
2 Total number of independent contractors (including but not limited to those liste	d above) who received more than	
\$100,000 of compensation from the organization		
	•	000

See Part VII, Section A Continuation sheets

Form 990 CHESAPEAI	10 0111 1				_	_		<u> </u>		5757
Part VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	yee	s, an	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)			(C				(D)	(E)	(F)
Name and title	Average			Posi	tion			Reportable	Reportable	Estimated
	hours	(c	heck	all t	hat	appl	y)	compensation	compensation	amount of
	per							from	from related	other
	week	or				loyee		the	organizations	compensation from the
	(list any hours for	direct				d em p		organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
	related	3e or 0	stee			ısatec		(88-2/1099-181130)		and related
	organizations	truste	al tru		yee	эшы				organizations
	below	Individual trustee or director	Institutional trustee	-e-	Key employee	Highest compensated employee	Jer			· ·
	line)	Indi	Insti	Officer	Key	High	Former			
(27) Jennifer E. Green	1.00									
Trustee		Х						0.	0.	0.
(28) Harry S. Gruner	4.00									
Trustee		Х						0.	0.	0 .
(29) Michael J. Hanley	1.00									
Trustee (through 01/22)		Х						0.	0.	0 .
(30) Jeanne Trimble Hoffman	1.00									
Trustee (through 01/22)		Х						0.	0.	0 .
(31) Ann D. Horner	1.00									
Trustee		Х						0.	0.	0 .
(32) Robert A. Kinsley II	1.00							_	_	
Trustee		Х						0.	0.	0 .
(33) Katie Z. Leavy	4.00							_	_	_
Trustee		Х						0.	0.	0 .
(34) Jonathan D. Manekin	1.00									
Trustee	1 00	Х						0.	0.	0 .
(35) Anne Mehringer	1.00								•	•
Trustee	4 00	Х						0.	0.	0 .
(36) Pamela B. Murphy	4.00	٠,,						_	0	0
Trustee	1 00	Х						0.	0.	0 .
(37) Devan B. Ogburn	1.00	. ,						_	0	0
Trustee (through 01/22)	1 00	Х		-				0.	0.	0
(38) Mamie A. Parker	1.00	х						0.	0	0
Trustee (39) Crystal Patterson	4.00	Δ						0.	0.	0
· · •	4.00	х						0.	0.	0
Trustee (40) Anna R. Pauletta	1.00	Λ						0.	0.	U
Trustee	1.00	Х						0.	0.	0
(41) Ann Pelham	1.00	Λ		\dashv				0.	0.	0 .
Trustee	1.00	Х						0.	0.	0 .
(42) Nathanial J. Rose	1.00	22	\vdash	\vdash				•	0 •	<u></u>
Trustee (beginning 01/22)	1.00	Х						0.	0.	0 .
(43) Janine J. Smith	1.00		\vdash	\vdash				-	0.	<u> </u>
Trustee		Х						0.	0.	0 .
(44) J. Sedwick Sollers III	4.00		\vdash	\vdash				·	•	
Trustee		х						0.	0.	0 .
(45) R. Todd Stravitz	1.00	_ <u>-</u>	П	\Box						
Trustee		х						0.	0.	0
(46) Sandra E. Taylor	1.00	<u> </u>							3.	
		4		ı I				ı	0.	0.

Form 990 CHESAPEAR	KE BAY F	'OU	IND	TA	'IO	N	IN	<u>C</u>	52-606	5757
Part VII Section A. Officers, Directors, Tru	ıstees, Key En	nplo	yee	s, aı	nd H	lighe	est (Compensated Employe	ees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(cl			that		ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensation
	(list any	recto				em pl		organization	(W-2/1099-MISC)	from the
	hours for related	ord	tee			sated		(W-2/1099-MISC)		organization and related
	organizations	Individual trustee or director	Institutional trustee		ee/	Highest compensated employee				organizations
	below	dualt	utiona	_	oldm	stco	JE.			organizations
	line)	Indivi	Institu	Officer	Key employee	Highe	Former			
(47) Preston M. White	1.00									
Trustee		Х						0.	0.	0.
(48) Robert N. Whitescarver	1.00									
Trustee (beginning 01/22)		Х						0.	0.	0.
(49) Stephen M. Wolf	1.00									
Trustee		Х						0.	0.	0.
_			_							
			_							
			L							
	<u> </u>									
Tatalita Bast VIII. Ocalian A. F 4										
Total to Part VII, Section A, line 1c									l	

		Check if Schedule O contains a response of	or note to any lin	e in this Part VIII			
				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
					lunction revenue	business revenue	sections 512 - 514
S S	1:	Federated campaigns 1a	299,914.				
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues 1b	,				
جَ ۾		Fundraising events 1c	1,011,486.				
fts, r A		Related organizations 1d	, , .				
ig ig		Government grants (contributions)	1,222,306.				
Sin		All other contributions, gifts, grants, and					
ē Ė		l I	28,540,602.				
등		similar amounts not included above 1f	5,065,159.				
o d		Noncash contributions included in lines 1a-1f	3,003,133.	31,074,308.			
Oa		Total. Add lines 1a-1f	Business Code	31,074,300.			
	_	Contract Indomo	900099	314,760.	314,760.		
ice	2 :	Contract Income Farm Income	900099	262,284.	262,284.		
er v	-		900099		· · · · · · · · · · · · · · · · · · ·		
n S	(Tuition and Education		258,810.	258,810.		
Program Service Revenue	(Store Income	900099	27,494.	27,494.		
5	(
<u>-</u>	1	All other program service revenue		262 242			
		Total. Add lines 2a-2f		863,348.			
	3	Investment income (including dividends, interes					
		other similar amounts)		2,263,850.		492,773.	1771077.
	4	Income from investment of tax-exempt bond pr	roceeds				
	5	Royalties		11,195.			11,195.
		(i) Real	(ii) Personal				
	6	Gross rents 6a 409,073.					
	١	Less: rental expenses 6b 0.					
	•	Rental income or (loss) 6c 409,073.					
	(Net rental income or (loss)		409,073.			409,073.
	7 :	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 16,112,998.	800.				
	ı	Less: cost or other basis					
e		and sales expenses	984,089.				
/en	,	Gain or (loss) 7c 4,174,166.	-983,289.				
ther Revenue		Net gain or (loss)		3,190,877.			3190877.
ē	8	Gross income from fundraising events (not					
₹		including \$1,011,486. of					
		contributions reported on line 1c). See					
		Part IV, line 188a	133,205.				
	-	Less: direct expenses 8b	512,405.				
		Net income or (loss) from fundraising events		-379,200.			-379,200.
	9 :	Gross income from gaming activities. See					
		Part IV, line 19 9a					
	1	Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
		Gross sales of inventory, less returns					
		and allowances 10a					
		Less: cost of goods sold 10b					
		Net income or (loss) from sales of inventory					
		, , , , , , , , , , , , , , , , , , , ,	Business Code				
Snc	11 :	Miscellaneous	900099	38,782.			38,782.
Miscellaneous Revenue		Credit card rebate	900099	9,979.			9,979.
ella ¥ei				,			,
SS B		All other revenue					
Σ		• Total. Add lines 11a-11d		48,761.			
	12	Total revenue. See instructions	>	37,482,212.	863,348.	492,773.	5051783.

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Form 990 (2021) CHESAPEAKE BAY FOUNDATION INC Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4)	organizations must comple	ete all columns. All other or	ganizations must com	plete column (A).

	Check if Schedule O contains a respon	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations	E40 40E	540 405		
	and domestic governments. See Part IV, line 21	510,137.	510,137.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1,575,464.	714,335.	589,567.	271,562
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	11,173,480.	9,234,015.	623,565.	1,315,900
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	440,745.	362,464.	25,566.	52,715 502,876
9	Other employee benefits	4,066,538.	3,192,955.	370,707.	502,876
10	Payroll taxes	1,115,312.	873,115.	103,887.	138,310
1	Fees for services (nonemployees):				
а	Management				
b	Legal	22,892.	14,866.	4,754.	3,272
С	Accounting	98,861.		98,861.	
d	Lobbying	154,800.	154,800.		
е	Professional fundraising services. See Part IV, line 17	674,760.			674,760
f	Investment management fees	255,493.		255,493.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	2,436,599.	2,122,179.	116,908.	197,512
12	Advertising and promotion	143,954.	130,380.		13,574
13	Office expenses	3,511,150.	3,086,277.	195,009.	229,864
14	Information technology	1,005,883.	684,383.	169,003.	152,497
15	Royalties			- 100	
16	Occupancy	311,485.	299,636.	7,186.	4,663
17	Travel	240,260.	216,332.	11,391.	12,537
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	405.001		20.510	
19	Conferences, conventions, and meetings	136,934.	77,160.	33,619.	26,155
20	Interest	79,465.	59,916.	11,177.	8,372
21	Payments to affiliates	1 (02 (07	1 410 015	100 556	00 51
22	Depreciation, depletion, and amortization	1,603,687.	1,412,215.	108,756.	82,716
23	Insurance	486,432.	417,209.	49,355.	19,868
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	Repairs & maintenance	1,226,111.	1,062,879.	109,884.	53,348
b	Memberships & dues	64,017.	44,906.	5,988.	13,123
С	Stipends & honoraria	41,256.	41,256.		
d	Donated goods	23,887.	21,871.		2,016
е	All other expenses	138,387.	106,769.	21,260.	10,358
25	Total functional expenses. Add lines 1 through 24e	31,537,989.	24,840,055.	2,911,936.	3,785,998
26	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 X if following SOP 98-2 (ASC 958-720)	2,589,249.	1,835,911.	0.	753,338

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Par	rt X	Balance Sheet				
		Check if Schedule O contains a response or note to a	ny line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		6,474.	1	3,544.
	2	Savings and temporary cash investments		24,425,867.	2	26,873,533.
	3	Pledges and grants receivable, net		11,963,812.	3	10,563,478.
	4	Accounts receivable, net		979,221.	4	874,450.
	5	Loans and other receivables from any current or form				
		trustee, key employee, creator or founder, substantial				
		controlled entity or family member of any of these per	sons		5	
	6	Loans and other receivables from other disqualified p	ersons (as defined			
		under section 4958(f)(1)), and persons described in se	ction 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
۲	9	Prepaid expenses and deferred charges		702,858.	9	525,801.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D10a	53,573,676.			
	b		23,801,926.	30,887,854.	10c	29,771,750.
	11	Investments - publicly traded securities		38,468,334.	11	34,123,645.
	12	Investments - other securities. See Part IV, line 11		29,601,336.	12	22,854,479.
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets	005 710	14	156 420	
	15	Other assets. See Part IV, line 11		225,712.	15	156,439.
	16	Total assets. Add lines 1 through 15 (must equal line		137,261,468.	16	125,747,119.
	17	Accounts payable and accrued expenses		2,229,552.	17	1,767,716.
	18	Grants payable		1,482,112.	18	1,061,294.
	19	Deferred revenue		1,736,408.	19 20	1,001,294.
	20	Tax-exempt bond liabilities		1,730,400.		1,019,147
	21 22	Escrow or custodial account liability. Complete Part N			21	
Liabilities	22	Loans and other payables to any current or former off trustee, key employee, creator or founder, substantial				
ij		controlled entity or family member of any of these per			22	
Lia	23	Secured mortgages and notes payable to unrelated the			23	
	24	Unsecured notes and loans payable to unrelated third			24	
	25	Other liabilities (including federal income tax, payable			2-7	
	20	parties, and other liabilities not included on lines 17-2.				
		of Schedule D		957,278.	25	656,483.
	26	Total liabilities. Add lines 17 through 25		6,405,350.		4,504,640.
		Organizations that follow FASB ASC 958, check he				
es		and complete lines 27, 28, 32, and 33.	, —			
anc	27	Net assets without donor restrictions		42,059,259.	27	39,093,810.
Bal	28	Net assets with donor restrictions		88,796,859.	28	82,148,669.
pu		Organizations that do not follow FASB ASC 958, cl				
T		and complete lines 29 through 33.				
ž o	29	Capital stock or trust principal, or current funds			29	
set	30	Paid-in or capital surplus, or land, building, or equipm			30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income			31	
Net	32	Total net assets or fund balances		130,856,118.	32	121,242,479.
_	33	Total liabilities and net assets/fund balances		137,261,468.	33	125,747,119.

Pai	Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>,48</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2		<u>,53</u>		
3	Revenue less expenses. Subtract line 2 from line 1	3		<u>,94</u>		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	130			
5	Net unrealized gains (losses) on investments	5	-15	,63	2,5	<u>46.</u>
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9		7	4,6	84.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	121	,24	2,4	79.
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit	:			
	Act and OMB Circular A-133?			3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	X	
				Form	990	(2021)

132012 12-09-21

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

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

2021

Open to Public Inspection

Employer identification number Name of the organization CHESAPEAKE BAY FOUNDATION INC 52-6065757 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).) 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.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving 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). (iv) Is the organization listed n your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	26494920.	26413351.	32090232.	23177187.	31074308.	139249998
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	26494920.	26413351.	32090232.	23177187.	31074308.	139249998
	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)						4845156.
6	Public support. Subtract line 5 from line 4.						134404842
	tion B. Total Support	ı		ı		ı	
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
		26494920.					
	Gross income from interest,						
_	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1230371.	1256278.	743,038.	990,704.	2191345.	6411736.
9	Net income from unrelated business			,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Ŭ	activities, whether or not the						
	business is regularly carried on					317.105.	317,105.
10	Other income. Do not include gain					01/,1000	02.7200
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	35,729.	77.625.	156,747.	49,694.	48.761.	368,556.
11	Total support. Add lines 7 through 10	007.200	, 0200				146347395
	Gross receipts from related activities,	etc (see instruction	nne)				,871,732.
	First 5 years. If the Form 990 is for the	•	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	fourth or fifth tax y			707277020
10	organization, check this box and stor	-			<u>.</u>		ightharpoonup
Sec	etion C. Computation of Publi						
	Public support percentage for 2021 (I			column (f))		14	91.84 %
	Public support percentage from 2020					15	91.53 %
	33 1/3% support test - 2021. If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2020. If the o						
-	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	ū					,
	meets the facts-and-circumstances te					viriow the organiz	▶ □
h	10% -facts-and-circumstances test	ū	•				
_	more, and if the organization meets the	-					
	organization meets the facts-and-circu				-		
18	Private foundation. If the organization				•		
	ato roundationi ii tile organizatio	did not bricon a	20x 011 mile 10, 10	a, 100, 17a, 01 17k	, chock this box a	na oce monacione	· ······

Schedule A (Form 990) 2021

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.)

Secti	on A. Public Support	now, picase comp	note i art ii.j				
	ar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 G	ifts, grants, contributions, and lembership fees received. (Do not clude any "unusual grants.")						
2 G m fo ar	ross receipts from admissions, lerchandise sold or services per- ormed, or facilities furnished in a pactivity that is related to the reganization's tax-exempt purpose						
ar	ross receipts from activities that re not an unrelated trade or bus- ess under section 513						
iz	ax revenues levied for the organ- ation's benefit and either paid to r expended on its behalf						
fu	ne value of services or facilities irnished by a governmental unit to be organization without charge						
6 T	otal. Add lines 1 through 5					1	
	mounts included on lines 1, 2, and received from disqualified persons						
fro ex	nounts included on lines 2 and 3 received on other than disqualified persons that ceed the greater of \$5,000 or 1% of the nount on line 13 for the year						
c A	dd lines 7a and 7b						
8 P	ublic support. (Subtract line 7c from line 6.) on B. Total Support						
	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	mounts from line 6	(4) 2011	(6) 2010	(6) 2013	(4) 2020	(6) 2021	(i) Total
10a G di se	ross income from interest, ividends, payments received on ecurities loans, rents, royalties, and income from similar sources						
	nrelated business taxable income						
,	ess section 511 taxes) from businesses equired after June 30, 1975						
c A	dd lines 10a and 10b						
11 N ac w	et income from unrelated business ctivities not included on line 10b, hether or not the business is egularly carried on						
12 O	ther income. Do not include gain r loss from the sale of capital ssets (Explain in Part VI.)						
	otal support. (Add lines 9, 10c, 11, and 12.)						
14 Fi	irst 5 years. If the Form 990 is for the	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organization	on,
cl	neck this box and stop here	<u></u>					.
Secti	on C. Computation of Public	Support Per	centage				
15 P	ublic support percentage for 2021 (lir	ne 8, column (f), c	livided by line 13,	column (f))		15	%
	ublic support percentage from 2020					16	%
Secti	on D. Computation of Invest	tment Income	e Percentage				
17 In	vestment income percentage for 202	21 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18 In	vestment income percentage from 2	.020 Schedule A,	Part III, line 17			18	%
19a 33	3 1/3% support tests - 2021. If the	organization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
m	ore than 33 1/3%, check this box and	d stop here. The	organization qual	fies as a publicly s	supported organiza	ation	>
	3 1/3% support tests - 2020. If the	· ·			•	•	
	ne 18 is not more than 33 1/3%, chec rivate foundation. If the organization						

132023 01-04-22

Schedule A (Form 990) 2021

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
•		
2		
3a		
3b		
30		
_		
3c		
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Par	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	ction B. Type I Supporting Organizations			
			Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership o			
	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 su			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated amo	, ,		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	11		<u> </u>
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	ction 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 in	ıstructions).		
а				
b				
С	3 11 3 7 December 11 4 10 11 year dapper too a governmentar of	entity (see instruction	l ' l	
	Activities Test. Answer lines 2a and 2b below.		Yes	No
	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		
	, , , , , , , , , , , , , , , , , , ,			
	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		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

132025 01-04-22

of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

instructions).

Sche	dule A (Form 990) 2021 CHESAPEAKE BAY FOUNDATI			52-6065757 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ıg Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ig trust on	Nov. 20, 1970 (explain	in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	t complete	e Sections 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 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		

Schedule A (Form 990) 2021

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990) 2021

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Name of the organization

CHESAPEAKE BAY FOUNDATION INC

52-6065757

Organization type (check one):						
Filers of:	Section:					
Form 990 or	990-EZ $X = 501(c)(3)$ (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	organization is covered by the General Rule or a Special Rule . section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
For prop	an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or perty) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rule	S .					
sect con	an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under ions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one tributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; Form 990-EZ, line 1. Complete Parts I and II.					
con liter	an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one cributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, ary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "in column (b) instead of the contributor name and address), II, and III.					
year is ch purp	an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box necked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., consecuence of the parts unless the General Rule applies to this organization because it received nonexclusively ious, charitable, etc., contributions totaling \$5,000 or more during the year					
answer "No"	organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify the meet the filing requirements of Schedule B (Form 990).					

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021) Page

Name of organization Employer identification number

CHESAPEAKE BAY FOUNDATION INC

52-6065757

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 2,494,964.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>1,100,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>946,250.</u>	Person X Payroll
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	Total contributions \$ 887,870.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>725,157.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)

Name of organization Employer identification number

CHESAPEAKE BAY FOUNDATION INC

52-6065757

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	626 INTU, 120 GOOGL, 1148 DHR, 86 AMZN, 430 ADBE, 779 ETSY, 293 IDXX & 1338 EW shares of stock		
		\$ 2,277,283.	11/22/21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	165 MPWR, 385 3ECL & 454 FTV shares of stock		
		\$\$	11/22/21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
		I *	Cohodulo D (Form 000) (0004)

Name of organization **Employer identification number** CHESAPEAKE BAY FOUNDATION INC 52-6065757 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. Open to Public ► Go to www.irs.gov/Form990 for instructions and the latest information. Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.			
Nan	ne of organization			Empl	oyer identification number
		<u>AKE BAY FOUNDATI</u>			52-6065757
Pa	art I-A Complete if the org	anization is exempt und	er section 501(c)	or is a section 527 or	ganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures		> \$	
Pa	art I-B Complete if the org	anization is exempt und	er section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	▶ \$	
	Enter the amount of any excise tax				
	If the organization incurred a sectio				
	Was a correction made?				Yes No
_ b	of If "Yes," describe in Part IV.				\(0\)
	art I-C Complete if the org			<u> </u>	· · ·
	Enter the amount directly expended			***************************************	
2	Enter the amount of the filing organ		~		
2	exempt function activities				
3	line 17b				
4					
5	Enter the names, addresses and en				
	made payments. For each organiza	• •			
	contributions received that were pro-	omptly and directly delivered to	a separate political orga	anization, such as a separat	e segregated fund or a
	political action committee (PAC). If	additional space is needed, prov	vide information in Part	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990) 2021

LHA

132041 11-03-21

Lobbying Expenditures During 4-Year Averaging Period								
Calendar year				(4) 2021	(a) Total			
(or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total			
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.			
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.			
c Total lobbying expenditures	314,167.	433,419.	210,565.	270,411.	1,228,562.			
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.			
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.			
f Grassroots lobbying expenditures	9,234.	12,158.	8,899.	40,942.	71,233.			

Schedule C (Form 990) 2021

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	No		Amo	ount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		=		
e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		4		
f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		$\neg \uparrow$		
g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	1			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or	sec	tion	
501(c)(6).				
	_		Yes	N
Were substantially all (90% or more) dues received nondeductible by members?	L	1		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?	L	2		
Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior yart III-B Complete if the organization is exempt under section 501(c)(4), section 501	ear?	3		
answered "Yes." 1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
expenses for which the section 527(f) tax was paid).				
expenses for which the section 527(f) tax was paid). a Current year		2a		
a Current year		2a 2b		
a Current year				
a Current year b Carryover from last year c Total		2b		
a Current year b Carryover from last year c Total		2b 2c		
a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		2b 2c		
a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		2b 2c		
a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political		2b 2c 3		

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Inspection

Name of the organization

CHESAPEAKE BAY FOUNDATION INC

Employer identification number 52-6065757

Pa	rt I	Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		imilar Funds or A	occounts.	Complete if the
		organization answered Tes Off Offi 990, Part IV, line	(a) Donor advise	d funds	(b) Funds and	l other accounts
1	Total	number at end of year	(,,		()	
2		egate value of contributions to (during year)				
3		egate value of grants from (during year)				
4		egate value at end of year				
5		e organization inform all donors and donor advisors in w	riting that the assets he	ld in donor advised fu	nds	
J		e organization's property, subject to the organization's ex	-			Yes No
6		e organization inform all grantees, donors, and donor ad				
Ū		aritable purposes and not for the benefit of the donor or			•	
		missible private benefit?		• •	-	Yes No
Pai		Conservation Easements. Complete if the organic				
1	Purpo	ose(s) of conservation easements held by the organization			,	
•	. G., p.	Preservation of land for public use (for example, recreation		Preservation of a his	torically import	ant land area
	X	Protection of natural habitat		Preservation of a cer		
		Preservation of open space				
2		plete lines 2a through 2d if the organization held a qualifie	ed conservation contrib	ution in the form of a c	onservation ea	sement on the last
		f the tax year.				t the End of the Tax Year
а	Total	number of conservation easements			2a	12
b						940.00
С		per of conservation easements on a certified historic struc			_ 	
d		per of conservation easements included in (c) acquired af				
		in the National Register	•		2d	
3		per of conservation easements modified, transferred, relea			nization during	the tax
	year	^		, ,	· ·	
4	Numb	per of states where property subject to conservation ease	ement is located	2		
5		the organization have a written policy regarding the period		ion, handling of		
		ons, and enforcement of the conservation easements it h				X Yes No
6	Staff	and volunteer hours devoted to monitoring, inspecting, h				during the year
	\ _	75				
7	Amou	int of expenses incurred in monitoring, inspecting, handli	ng of violations, and en	forcing conservation e	asements durir	ng the year
	▶\$	4,263.				
8	Does	each conservation easement reported on line 2(d) above	satisfy the requirement	s of section 170(h)(4)(E	3)(i)	
	and s	ection 170(h)(4)(B)(ii)?				X Yes No
9		t XIII, describe how the organization reports conservation				
	balan	ce sheet, and include, if applicable, the text of the footno	te to the organization's	financial statements t	hat describes t	he
		ization's accounting for conservation easements.				
Pa	rt III	Organizations Maintaining Collections of	Art, Historical Tre	asures, or Other	Similar Ass	ets.
		Complete if the organization answered "Yes" on Form 9	990, Part IV, line 8.			
1a	If the	organization elected, as permitted under FASB ASC 958	, not to report in its rev	enue statement and ba	alance sheet wo	orks
	of art	historical treasures, or other similar assets held for publi	c exhibition, education	, or research in further	ance of public	
	servic	e, provide in Part XIII the text of the footnote to its finance	cial statements that des	cribes these items.		
b	If the	organization elected, as permitted under FASB ASC 958	, to report in its revenue	e statement and baland	ce sheet works	of
	art, hi	storical treasures, or other similar assets held for public ϵ	exhibition, education, o	research in furtherand	ce of public ser	vice,
	provid	de the following amounts relating to these items:				
	(i) R	evenue included on Form 990, Part VIII, line 1			🕨 \$	0.
	(ii) A	ssets included in Form 990, Part X			• \$	17,000.
2	If the	organization received or held works of art, historical treas	sures, or other similar a	ssets for financial gain	, provide	
	the fo	llowing amounts required to be reported under FASB AS	C 958 relating to these	items:		
а	Rever	nue included on Form 990, Part VIII, line 1			• \$	
		s included in Form 990, Part X			🕨 \$	
LHA	For P	aperwork Reduction Act Notice, see the Instructions	for Form 990.		Sched	lule D (Form 990) 2021

	t III Organizations Maintaining Co	ollections of Art	, Historical Tre	asures, o	r Other	Similar A	ssets	(continuec	<u>1 age</u> d)
3	Using the organization's acquisition, accession	n, and other records	, check any of the f	ollowing tha	t make sig	nificant use	of its		
	collection items (check all that apply):								
а	Public exhibition	d	Loan or excl	nange progra	am				
b	Scholarly research	е	X Other De			rposes	on1	V	
c	Preservation for future generations				_				
4	Provide a description of the organization's co	llections and explain	how they further th	e organizatio	nn's exem	nt nurnose	in Part X	III	
5	During the year, did the organization solicit or						iiii ait X		
·	to be sold to raise funds rather than to be ma							Yes :	X No
Par	t IV Escrow and Custodial Arrang				"Yes" on F	Form 990 P			110
	reported an amount on Form 990, Par		to il tilo organization	T GITOWOTOG	100 0111	01111 000, 1	a ,	0,01	
1a	Is the organization an agent, trustee, custodia	an or other intermedia	arv for contributions	or other as	sets not in	ncluded			
	on Form 990, Part X?							Yes	No
h	If "Yes," explain the arrangement in Part XIII a						—	.00	
	11 100, explain the unangement in tare xin e	and complete the follo	owing table.					Amount	
С	Beginning balance					1c			
						1d			
	Additions during the year								
_	Distributions during the year					1e			
f	Ending balance							у г	
	Did the organization include an amount on Fo					y?		Yes	No
	If "Yes," explain the arrangement in Part XIII.							L	
Par	t V Endowment Funds. Complete if								
		(a) Current year	(b) Prior year	(c) Two yea		d) Three year		(e) Four year	
1a	Beginning of year balance	76,257,134.	63,530,119.	63,01		61,792	_	57,758	
b	Contributions	2,119,243.	291,075.		6,294.	70	,804.		6,335.
С	Net investment earnings, gains, and losses	-9,529,560.	15,927,131.	3,56	2,336.	4,352	,872.	6,46	7,859.
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	4,840,726.	3,491,191.	3,17	3,796.	3,201	,058.	3,009	9,668.
f	Administrative expenses								
g	End of year balance	64,006,091.	76,257,134.	63,53	0,119.	63,015	,285.	61,792	2,667.
2	Provide the estimated percentage of the curre	ent vear end balance							
-	Board designated or quasi-endowment	18.5700	%	, mora ao.					
b	Permanent endowment ► 64.1700	%							
	1 = 0.600	/0 %							
C	The percentages on lines 2a, 2b, and 2c shou	· =							
2-	-	•	tion that are hald an	d administa	ad for the	oracnizatia			
Sa	Are there endowment funds not in the posses	ssion of the organizat	tion that are neid an	u auministe	rea for the	organizatio	ori	Yes	s No
	by:								
	(i) Unrelated organizations								
	(ii) Related organizations							3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organizate	· ·						3b	
4	Describe in Part XIII the intended uses of the		vment funds.						
Pai	t VI Land, Buildings, and Equipme			_					
	Complete if the organization answered	l "Yes" on Form 990,	Part IV, line 11a. S	ee Form 990), Part X, li	ne 10.			
	Description of property	(a) Cost or ot basis (investm	` '			cumulated reciation	((d) Book va	lue
1a	Land		11,48	0,646.			11	,480,	646.
b	Buildings		-						
c	Leasehold improvements		30.47	6,394.	15.5	51,561	. 14	,924,8	833.
d	Equipment			,	, , <u>, , , , , , , , , , , , , , , , , </u>	,		/	
	Other		11.61	6,636.	8.2	50,365	3	,366,	271.
	I. Add lines 1a through 1e. (Column (d) must ed	•	<u> </u>					771,	
. J.a		<u>juai FUIIII 990, Faft 7</u>	<u>, colullii (D), liile 10</u>	/U./ ·····				<u>, /</u>	

Schedule D (Form 990) 2021

Part VII	Investments -	Other	Securities

Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) Partnerships/Alternative		
(B) Investments	19,240,082.	End-of-Year Market Value
(C) Beneficial Interest in		
(D) Perpetual Trust	3,614,397.	End-of-Year Market Value
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	22,854,479.	
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	I1c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		

(9)
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶
Part IX Other Assets.

(4) (5) (6) (7) (8)

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description		(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total (October (b) social social Social Social October (D) lise 15	$\overline{}$	

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Split Interest Agreement	641,702.
(3) Interest Rate Swap Obligation	14,781.
(4)	
(5)	
(6)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	▶ 656,483.

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

Schedule D (Form 990) 2021

Part XI Reconciliation of Revenue per Audited Financial S		Revenue per Re		OOOS/S/ Page 7
Complete if the organization answered "Yes" on Form 990, Part I				
1 Total revenue, gains, and other support per audited financial statements	;		1	22,450,233.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a Net unrealized gains (losses) on investments	2a -1	5,632,546.		
b Donated services and use of facilities	2b	268,971.		
c Recoveries of prior year grants	2c		_	
d Other (Describe in Part XIII.)	1 4 . 1	587,089.		
e Add lines 2a through 2d			2e	<u>-14,776,486.</u>
3 Subtract line 2e from line 1			3	37,226,719.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	0== 400		
a Investment expenses not included on Form 990, Part VIII, line 7b		255,493.	4	
b Other (Describe in Part XIII.)	4b			055 400
c Add lines 4a and 4b			4c	255,493.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	9 12.)	Evnances nor [5	37,482,212.
Part XII Reconciliation of Expenses per Audited Financial		Expenses per r	retur	n.
Complete if the organization answered "Yes" on Form 990, Part I			1	32,063,872.
Total expenses and losses per audited financial statementsAmounts included on line 1 but not on Form 990, Part IX, line 25:				32,003,072.
a Donated services and use of facilities	2a	268,971.		
b Prior year adjustments		200,371.	1	
c Other losses			1	
d Other (Describe in Part XIII.)		512,405.	1	
e Add lines 2a through 2d		•	2e	781,376.
3 Subtract line 2e from line 1			3	31,282,496.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:				, ,
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	255,493.		
b Other (Describe in Part XIII.)		•	1	
c Add lines 4a and 4b			4c	255,493.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I. li.			5	31,537,989.
Part XIII Supplemental Information.	,			
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide the part to provide the part to provide the part XII, lines 2d and 4b. Also complete this part to provide the part XII, lines 2d and 4b. Also complete this part to provide the part XII, lines 2d and 4b. Also complete this part to provide the part XII, lines 2d and 4b. Also complete this part to provide the part XII, lines 2d and 4b. Also complete this part to provide the part XII, lines 2d and 4b. Also complete this part to provide the part XII, lines 2d and 4b. Also complete this part to provide the part XII, lines 2d and 4b. Also complete this part to provide the part XII, lines 2d and 4b. Also complete this part to provide the part XII, lines 2d and 4b. Also complete this part to provide the part XII, lines 2d and 4b. Also complete this part to provide the part XII, lines 2d and 4b. Also complete this part to provide the part XII, lines 2d and 4b. Also complete this part to provide the part XII, lines 2d and 4b. Also complete this part to provide the part XIII and XII			; Part	X, line 2; Part XI,
Part II, line 9:				
A monetary value has not been placed on	conservatio	on easement	s;	therefore,
they are not included in financial state	ements.			
Part III, line 4:				
A scale model of a Chesapeake Bay crabb	ing skiff ha	ngs in the	fo	yer of the
Merrill Center. It is a reminder that C				
which includes restoring its bounty to	ieveis that	can suppor	ι a	ii the
people who make a living on the Bay.				
Greeting visitors to the Merrill Center	is a bronze	e and silve	r s	culpture
of an osprey, representing the fact tha	t approximat	ely one-qu	art	er of all

Schedule D (Form 990) 2021

ospreys in the contiguous United States nest in the Chesapeake Bay region.

Part V, line 4:

Endowment funds are used for donor restricted projects as well as to fund unrestricted activities. Donor restricted endowments are used for education in general, field education, farm operations, support and maintenance of facilities and boats, and restoration projects. It is the policy of the Foundation to spend 5% of a twelve quarter trailing average of the sum of accumulated investments.

Part X, Line 2:

For the years ended June 30, 2022 and 2021, the Foundation has documented its consideration of FASB ASC 740-10, Income Taxes, that provides guidance for reporting uncertainty in income taxes and has determined that no material uncertain tax positions qualify for either recognition or disclosure in the financial statements.

Part XI. Line 2d - Other Adjustments:

rait AI, line 2d - Other Adjustments:	
Special Event Expenses reported as an expense on the	512,405.
financial statements and netted against revenue on the	
Form 990, Part VIII, line 8b.	
Unrealized gain on interest rate swap	74,684.
Total to Schedule D, Part XI, Line 2d	587,089.
Part XII, Line 2d - Other Adjustments:	

Schedule D (Form 990) 2021

512,405.

Special Event Expenses reported as an expense on the

financial statements and netted against revenue on the

Form 990, Part VIII, line 8b.

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

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 instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

CHESAPEAKE BAY FOUNDATION INC

Employer identification number

52-6065757

Fundraising Activities. required to complete this par	Complete if the organization answered "Yes:	on Form 990, Part IV,	line 17. Form 990-EZ fil	ers are not
 a X Mail solicitations b X Internet and email solicitations c X Phone solicitations d X In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P 	g X Special fundraising roral agreement with any individual (including art VII) or entity in connection with profession riduals or entities (fundraisers) pursuant to ag	n-government grants vernment grants ng events officers, directors, trus al fundraising services?	stees, or X Yes	☐ No
	/iii\ a:		(v) Amount paid	

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundi have c or cor contrib	ustody itrol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
Lautman, Maska, Neill &		Yes	No			
Company - 1730 Rhode Island	Membership Consulting		Х	3,413,808.	190,700.	3,223,108.
Allegiance Fundraising, LLC						
dba Allegiance Group - 3064	Digital Consulting		х	1,859,551.	484,060.	1,375,491.
Total				5,273,359.	674,760.	4,598,599.

Total

5,273,359.

674,760.

4,598,599.

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.

AL,AK,AR,CA,CO,CT,DC,FL,GA,HI,IL,KS,KY,ME,MD,MA,MI,MN,MS,NV,NH,NJ,NM,NY,NC

ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI

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

See Part IV for continuations

Schedule G (Form 990) 2021

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro	oss income on Form 990-	EZ, lines 1 and 6b. List e		s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			DC on the	Bands in the		(add col. (a) through
			Half Shell	Sands	1	col. (c)
			(event type)	(event type)	(total number)	Coi. (C)
nue						
Revenue	1	Gross receipts	626,101.	464,050.	54,540.	1,144,691.
ď				-		
	2	Less: Contributions	580,701.	376,245.	54,540.	1,011,486.
				-		
	3	Gross income (line 1 minus line 2)	45,400.	87,805.		133,205.
	4	Cash prizes				
	5	Noncash prizes		5,242.		5,242.
es						
Šue	6	Rent/facility costs	14,500.	64,968.		79,468.
X						
Direct Expenses	7	Food and beverages	57,827.	39,687.		97,514.
	8	Entertainment	3,500.	25,015.		28,515.
	9	Other direct expenses	207,563.	79,515.	14,588.	301,666.
	10	Direct expense summary. Add lines 4 through	n 9 in column (d)		>	512,405.
		Net income summary. Subtract line 10 from li				-379,200.
Pa	ırt l	Gaming. Complete if the organization	answered "Yes" on Form	990, Part IV, line 19, or r	eported more than	
		\$15,000 on Form 990-EZ, line 6a.				T
Φ			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue				bingo/progressive bingo		col. (a) through col. (c))
3eV						
_	1	Gross revenue				
es	2	Cash prizes				
ens		Name and authors				
Expenses	3	Noncash prizes				
덫	۱,	Pont/facility conta				
Direct	4	Rent/facility costs				
	_	Other direct expenses				
	۲	Ctrici direct experieds	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
				110		
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	
		,	()			
	۱ ـ		fuere line 4 eal, was (al)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (a)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (a)			
9		Net gaming income summary. Subtract line 7 ter the state(s) in which the organization condu				
	En		ucts gaming activities:			Yes No
a	En:	ter the state(s) in which the organization condu	ucts gaming activities:ctivities in each of these s	states?		Yes No
a	En:	ter the state(s) in which the organization condu	ucts gaming activities:ctivities in each of these s	states?		Yes No
a	En:	ter the state(s) in which the organization condu	ucts gaming activities:ctivities in each of these s	states?		Yes No
10a	En ls t	ter the state(s) in which the organization condute organization licensed to conduct gaming at No," explain: ere any of the organization's gaming licenses re	ucts gaming activities:ctivities in each of these s	states? rminated during the tax y		
10a	En ls t	ter the state(s) in which the organization condu the organization licensed to conduct gaming a No," explain:	ucts gaming activities:ctivities in each of these s	states? rminated during the tax y		
10a	En ls t	ter the state(s) in which the organization condute organization licensed to conduct gaming at No," explain: ere any of the organization's gaming licenses re	ucts gaming activities:ctivities in each of these s	states? rminated during the tax y		

Schedule G (Form 990) 2021

132082 10-21-21

Sch	edule G (Form 990) 2021 CHESAPEAKE BAY FOUNDATION INC 52-	6065757	Page 3
11	Does the organization conduct gaming activities with nonmembers?	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:		
а	ı The organization's facility	13a	<u>%</u>
	An outside facility	13b	<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party \$\bigs\\$		
С	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:		
	s 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 the		
<u> </u>	organization's own exempt activities during the tax year > \$		
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and P	art III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
Sc	hedule G, Part I, Line 2b, List of Ten Highest Paid Fundraiser	s:	
<u>(i</u>) Name of Fundraiser: Lautman, Maska, Neill & Company		
<u>(i</u>) Address of Fundraiser:		
17	30 Rhode Island Ave, NW, Ste 301, Washington, DC 20036		
(i) Name of Fundraiser: Allegiance Fundraising, LLC dba Allegian	ce Grou	p
(i) Address of Fundraiser: 3064 49th Street, Fargo, VA 58104		

Schedule G	G (Form 990)	CHESAPEAKE	BAY	FOUNDATION	INC	52-6065757	Page 4
Part IV	G (Form 990) Supplemental Infor	mation (continued)					J
		(continued)					
-							
-							
-							
-							
-							
-							

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

Open to Public

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

CHESAPEAK	E BAY FOU	NDATION INC					52-6065757
Part I General Information on Grants a							<u> </u>
 Does the organization maintain records t criteria used to award the grants or assis Describe in Part IV the organization's pro 	stance?						
Part II Grants and Other Assistance to I recipient that received more than \$\frac{1}{2}\$					anization answered "\	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Lynnhaven River Now							Eastern Oyster
Brock Environmental Center, 3663							Restoration in the
Marlin Bay Drive - Virginia Beach,							Western Branch of the
<u>VA 23455</u>	16-1647860	501(c)(3)	183,000.	0.			Lynnhaven River
Chesapeake Bay Trust 108 Severn Avenue Annapolis, MD 21403	52-1454182	501(c)(3)	127,206.	0.			Chesapeake Bay Trust Grant Program Administration
Virginia Department of Forestry			,				
Commonwealth of Virginia - 900							Mountains to Bay Grazing
Natural Resources Drive, Suite 800							Alliance to promote
- Charlottesville, VA 22903	54-6001800	Government	38,306.	0.			rotational grazing
Solar Oysters, LLC 1850 Frankfurst Avenue Baltimore, MD 21226	85-3165616	Other	37,500.	0.			Restoring Oysters in the Baltimore Harbor
Capital RC&D Area Council, Inc. 401 E. Louther Street, Suite 307							Mountains to Bay Grazing Alliance to promote
Carlisle, PA 17013	04-3691329	501(c)(3)	33,311.	0.			rotational grazing
			,				Accelerating Riparian
Alliance for the Chesapeake Bay							Forest Buffer
501 Sixth Street							Implementation in
Annapolis, MD 21403	54-1060924	501(c)(3)	21,949.	0.			Priority Pennsylvania
2 Enter total number of section 501(c)(3) ar	nd government or	ganizations listed in th	e line 1 table				12.
3 Enter total number of other organizations	s listed in the line	1 table					> 2.

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

See Part IV for Column (h) descriptions

Schedule I (Form 990) 2021

(a) Name and address of organization or government	1 , ,		(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Groundwork RVA							
3001 Meadowbridge Rd.							Greening Southside
Richmond, VA 23222	46-2191744	501(c)(3)	11,088.	0.			Richmond (VA)
	10 2252711		11,000.				Systemic Solutions:
ShoreRivers, Inc							Advancing Environmental
114 South Washington St. Suite 301							Literacy & Supporting
Easton, MD 21601	26-3187608	501(c)(3)	10,307.	0.			Clean Water Initiatives
,			,				
Virginia Forage & Grasslands							Mountains to Bay Grazing
Council - 3599 Indian Oak Road -							Alliance to promote
Crewe, VA 23930	54-1061472	501(c)(3)	7,658.	0.			rotational grazing
			,				
Crow and Berry							NE SARE Silvopasture
2860 Best Road							Pilot Project in
Morgantown, PA 19543	50-4210444	Other	7,120.	0.			Lancaster County, PA
Virginia Polytechnic Institute and							
State University - 300 Turner							Mountains to Bay Grazing
Street, Suite 4200 - Blacksburg,							Alliance to promote
VA 24061	54-6001805	Government	6,660.	0.			rotational grazing
Chesapeake Conservancy, Inc							
716 Giddings Avenue Suite 42	06 0074 077						Buffer Restoration in the
Annapolis, MD 21401	26-2271377	501(c)(3)	6,392.	0.			Upper James Watershed
EnRichmond Foundation (Southside							
ReLeaf) - P.O. Box 25609 -							Greening Southside
Richmond, VA 23260	54-1610700	501(c)(3)	6,295.	0.			Richmond (VA)
Treimena, VII 20200	31 1010700	301(0)(3)	0,255.	•			ATOMAGNA (VII)
Future Harvest CASA							Mountains to Bay Grazing
1114 Shawan Road, Suite 1							Alliance to promote
Cockeysville, MD 20130	52-2132982	501(c)(3)	5,335.	0.			rotational grazing
		(0)(0)	2,333.				
			1				

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.			T		Т
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
-					
Part IV Supplemental Information. Provide the information rec	I quired in Part I, lin	e 2; Part III, column	I n (b); and any other ac	l Iditional information.	
Part I, Line 2:					
			_		
Grant agreements require detailed	project r	eports tha	<u>at are revi</u>	ewed by	
departmental financial managers be	fore paym	ents are m	made. Progr	am managers	
will also review and approve the g	rantee's	project pe	erformance	according to	
		<u>p-ogodo p</u>		<u></u>	
the details of the grant.					
Part II, line 1, Column (h):					
Name of Organization or Government	: Allianc	e for the	Chesapeake	Bay	
(h) Purpose of Grant or Assistance	· Acceler	ating Rina	arian Fores	t Buffer	
11, 141pose of orante of mostiscance	. 11000101	asing mipe			

SCHEDULE J (Form 990)

Compensation Information

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

2021

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

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

CHESAPEAKE BAY FOUNDATION INC

Employer identification number 52-6065757

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		_X_
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:	_		v
a	The organization?	<u>5a</u>		X
b	Any related organization?	5b		\vdash
_	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:	0-		v
	The organization?	6a		X
D	Any related organization?	6b		\vdash
-	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	_	Х	
_	not described on lines 5 and 6? If "Yes," describe in Part III	7	Λ	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			У
•	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2021

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MISC compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) William C. Baker	(i)	339,816.	1,987.	14,260.	11,600.	7,341.	375,004.	0.
President (through 12/21)	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) David A. Fogle	(i)	211,846.	3,534.	26,000.	19,504.	1,014.	261,898.	0.
Treasurer; Chief Financial Officer	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) Alison H. Prost	(i)	180,041.	296.	12,995.	8,108.	17,552.	218,992.	0.
VP - Env. Prot. & Restoration	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) Jon A. Mueller	(i)	186,566.	296.	23,762.	8,024.	84.	218,732.	0.
Vice President - Litigation	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) Katharene P. Snavely	(i)	171,433.	296.	19,500.	8,108.	15,122.	214,459.	0.
Chief Development Officer	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) Robert J. Beach	(i)	148,671.	296.	19,500.	7,095.	14,967.	190,529.	0.
Vice President - Communications	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) Thomas W. Ackerman	(i)	169,969.	296.	7,103.	7,095.	1,148.	185,611.	0.
Vice President - Education	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) William A. Agee III	(i)	147,835.	15,768.	9,436.	6,284.	84.	179,407.	0.
Secretary; VP Administration	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) Kristen M. Diggs	(i)	141,080.	3,583.	6,088.	6,081.	11,568.	168,400.	0.
Vice President - Human Resources	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

Part	Τ.	Line	7

The following individuals received bonuses in 2021:

The following individuals received bonuses in 2021:									
William C. Baker	\$1,987								
David A. Fogle	\$3,534								
Alison H. Prost	\$296								
Jon A. Mueller	\$296								
Katharene P. Snavely	\$296								
Robert J. Beach	\$296								
Thomas W. Ackerman	\$296								
William A. Agee III	\$15,768								
Kristen M. Diggs	\$3,583								
Shannon B. Lyons	\$326								
Denise F. Stranko	\$307								
Rachel E. Hlavay	\$2,565								

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021
Open to Public Inspection

Name of the organization

CHESAPEAKE BAY FOUNDATION INC

Employer identification number 52-6065757

Part I Bond Issues						_							
(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	i (e) Issu	ue price	(f) Descri	ption of purpose	(g) De	(g) Defeased (h) On beha of issuer			(i) Po finan	
								Yes	No	Yes	No	Yes	No
Maryland Economic													
A Development Corporation	n 52-1376562	None	10/01/13	6,195	<u>,000.</u>	Refund	1998 Bond	ls	X		X		X
<u>B</u>													
<u>C</u>													
D													
Part II Proceeds			I.			<u> </u>		I.				•	
				١		В С			D				
1 Amount of bonds retired			5,16	54,197.									
2 Amount of bonds legally defeased													
3 Total proceeds of issue	Total proceeds of issue			5,000.									
4 Gross proceeds in reserve funds													
5 Capitalized interest from proceeds													
6 Proceeds in refunding escrows													
-													
8 Credit enhancement from proceeds													
9 Working capital expenditures from proceed													
10 Capital expenditures from proceeds													
11 Other spent proceeds				80,803.	-								
12 Other unspent proceeds				0000									
13 Year of substantial completion				2000	<u> </u>		 ,, 		-				
14 Were the bonds issued as part of a refundi	ag inqua of toy over	anda (ar	Yes	No	Yes	No	Yes	No		Yes	+	No	
14 Were the bonds issued as part of a refunding if issued prior to 2018, a current refunding	-	• •	x										
15 Were the bonds issued as part of a refunding			21								+		
issued prior to 2018, an advance refunding	-			Х									
16 Has the final allocation of proceeds been n			37								\top		
17 Does the organization maintain adequate b											\top		
final allocation of proceeds?			X										
HA For Paperwork Reduction Act Notice, se	e the Instructions for Fo	orm 990	1						Sche	dule K	(Forn	9901	2021

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

Schedule K (Form 990) 2021

Par	t III Private Business Use										
			Α	E	3	(С	Γ)		
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No		
	which owned property financed by tax-exempt bonds?		X								
2	Are there any lease arrangements that may result in private business use of										
	bond-financed property?		X								
За	Are there any management or service contracts that may result in private										
	business use of bond-financed property?		X								
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside										
	counsel to review any management or service contracts relating to the financed property?										
С	Are there any research agreements that may result in private business use of										
	bond-financed property?		X								
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other										
	outside counsel to review any research agreements relating to the financed property?										
4	Enter the percentage of financed property used in a private business use by entities										
	other than a section 501(c)(3) organization or a state or local government		.00 %		%		%		%		
5	Enter the percentage of financed property used in a private business use as a										
	result of unrelated trade or business activity carried on by your organization,										
	another section 501(c)(3) organization, or a state or local government		.00 %		% %		%		%		%
_6	Total of lines 4 and 5		.00 %		% %		%				
7	Does the bond issue meet the private security or payment test?		X								
8a	Has there been a sale or disposition of any of the bond-financed property to a non-										
	governmental person other than a 501(c)(3) organization since the bonds were issued?		X								
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or										
	disposed of		%		%		%		%		
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations										
	sections 1.141-12 and 1.145-2?										
9	Has the organization established written procedures to ensure that all										
	nonqualified bonds of the issue are remediated in accordance with the										
	requirements under Regulations sections 1.141-12 and 1.145-2?	X									
Par	t IV Arbitrage										
			Ą	Е	3	(Ç)		
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No		
	Penalty in Lieu of Arbitrage Rebate?		X								
2	If "No" to line 1, did the following apply?										
а	Rebate not due yet?		X								
b	Exception to rebate?		X								
	No rebate due?	Х									
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was								<u> </u>		
	performed										
3	Is the bond issue a variable rate issue?	Х									

Part IV Arbitrage (continued)								
		A	Е	3		0)
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b Name of provider	N/A	_						
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		Х						
6 Were any gross proceeds invested beyond an available temporary period?		Х						
7 Has the organization established written procedures to monitor the								
requirements of section 148?	X							
Part V Procedures To Undertake Corrective Action				•	•			
		A	E	3	(<u> </u>
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under						1		1
applicable regulations?	X							
Part VI Supplemental Information. Provide additional information for responses to questions	s on Schedule	e K. See instru	uctions.					
Schedule K, Part IV, line 2d:								
The Bond Year Five (First Installment) Arbitrage	Rebate	Compli	ance					
Report was completed on April 24, 2018 with an Ev	raluatio	on Date	of:					
September 30, 2018.								
							,	

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

➤ Attach to Form 990.

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

Name of the organization CHESAPEAKE BAY FOUNDATION INC Employer identification number 52-6065757

Pai	πι Types of Property									
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contributio amounts reported or	n	(d) Method of determining noncash contribution amounts			s	
	-	77		Form 990, Part VIII, line			l I	. 1	ı _	
1	Art - Works of art	X	1	/5	O.Fai	r mar	кет	val	Lue	
2	Art - Historical treasures									
3	Art - Fractional interests									
4	Books and publications									
5	Clothing and household goods									
6	Cars and other vehicles									
7	Boats and planes									
8	Intellectual property									
9	Securities - Publicly traded	X	108	5,036,03	0.Fai	r mar	<u>ket</u>	va]	Lue	
10	Securities - Closely held stock									
11	Securities - Partnership, LLC, or									
	trust interests									
12	Securities - Miscellaneous									
13	Qualified conservation contribution -									
	Historic structures									
14	Qualified conservation contribution - Other									
15	Real estate - Residential									
16	Real estate - Commercial									
17	Real estate - Other									
18	Collectibles									
19	Food inventory									
20	Drugs and medical supplies									
21	Taxidermy									
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts									
25	Other ▶ (farm. goods)	X	1	15,75	1. Fai	r mar	ket	va]	Lue	
26	Other ▶ (equip./supp.)	X	8	7,38	6. Fai	r mar	ket	va]	Lue	
27	Other (prizes)	X	7	5,24	2.Fai	r mar	ket	va1	Lue	
28	Other ()			•						
29	Number of Forms 8283 received by the organiz	ation during	the tax year for co	ontributions						
	for which the organization completed Form 828									
	·		· ·		•				Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1 th	rough 28,	that it				
	must hold for at least three years from the date									
	exempt purposes for the entire holding period?		•	,				30a		Х
b	If "Yes," describe the arrangement in Part II.						·····			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?							31	х	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash									
	contributions?							32a	х	
b	If "Yes," describe in Part II.									
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	for which column (a) is	checked,					
	describe in Part II.									
ΙЦΔ	For Danarwork Poduction Act Notice see t	the Instruct	ions for Form 990	1		Schoo	M Aluk	(Earm	2001	2024

132142 11-17-21 Schedule M (Form 990) 2021

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or Form 990-EZ.

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

2021
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

CHESAPEAKE BAY FOUNDATION INC

Employer identification number 52-6065757

Form 990, Part I, Line 1, Description of Organization Mission:
We define a saved Bay as having a score of 70 (out of 100) on CBF's
State of the Bay health index. Thanks largely to a dramatic reduction
in the amount of pollution entering the system, at 70 the Chesapeake
Bay and its tributary rivers will be highly productive and in good
health as measured by established water-quality standards. The result
will be clear water, free of the impacts from toxic contaminants, and
healthy oxygen levels, able to support living resources in all parts of
the Bay.
-

Founded in 1966, CBF is the largest regional conservation organization dedicated solely to saving a national treasure-the Chesapeake Bay and its rivers and streams.

With headquarters in Annapolis, MD; state offices in MD, VA, and PA;
and educational centers and programs across the region; CBF works

throughout the 64,000-square-mile Chesapeake watershed to: Educate build an informed citizenry; Advocate - advance pollution reduction;

Litigate - encourage enforcement of environmental law; and Restore rebuild the Bay system's natural filters such as oysters, underwater
grasses, and streamside forests.

CBF is supported by more than 300,000 members and e-subscribers.

Form 990, Part III, Line 4a, Description of Program Service:

Environmental Protection and Restoration (EPR), continued from page 2:

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

Schedule O (Form 990) 2021

Schedule O (Form 990) 2021 Page 2

Name of the organization

CHESAPEAKE BAY FOUNDATION INC

Employer identification number 52-6065757

To achieve its objectives, the department utilizes a team of lawyers,
water quality and restoration scientists, outreach experts, citizen
organizers, lobbyists, and policy specialists with expertise in
fisheries, pollution reduction, land use, and agriculture. Their focus
is local, state, and federal government policies; private sector
practices; and citizen engagement. The Program develops and employs
strategies and tactics designed to define the necessary governmental
policies and programs, create the needed "political will" to ensure
implementation of these policies and programs, and organizes CBF
members to interact with decision-makers. When appropriate, the
department uses the law as a tool to protect and preserve the
Chesapeake Bay.

Form 990, Part III, Line 4b, Description of Program Service:

Education, continued from page 2:

Designed to engage tomorrow's environmental leaders, these students now participate in CBF events, share what they learned with peers, and create projects in their communities to better the environment. In addition, the Education Department conducts professional learning courses for educators throughout Maryland, Virginia, Pennsylvania, and the District of Columbia. Known as Chesapeake Classrooms, these courses provide teachers first-hand experience on local waterways and help them to develop lesson plans that incorporate Bay studies. The department also teaches principals and school administrators through our Principal Environmental Leadership Courses. These courses increase support for school-wide environmental education programs. Furthermore, the department helps to educate elected officials, policy makers,

Schedule O (Form 990) 2021

journalists, and other community leaders and advocates through

Schedule O (Form 990) 2021 Page 2

Name of the organization

CHESAPEAKE BAY FOUNDATION INC

Employer identification number 52-6065757

on-the-water field experiences. These trips inform influential members
of the community about the issues facing the Bay and the ways that they
can help further the Bay's restoration.

Form 990, Part III, Line 4c, Description of Program Service:

Communications, continued from page 2:

Communications' tactics are to develop well-researched messages and deliver them through integrated channels, including: publications such as CBF's member magazine, brochures, and regular and special reports; earned, paid, or donated media; digital media, including the CBF website, social media, and outbound e-mails; and any other forms of direct or indirect communications with our members and the public at large. The Communications Department is organized around four primary functional areas: creative services; media; digital communications, and integrated communications/marketing.

Form 990, Part VI, Section B, line 11b:

An independent audit firm was engaged to conduct the financial statements' audit and to assist in preparing the Form 990. The Chief Financial Officer and Finance staff directly participated in preparing the form, drafting responses to questions and reviewing the Form 990 in draft. The Chief Financial Officer then reviewed it with the President and Chairman of the Audit and Finance Committee. The 990 was provided to the Audit and Finance Committee, comprised of Board of Trustee members, for their review and comments, after which it was sent to the full Board before being electronically filed with the IRS.

Form 990, Part VI, Section B, Line 12c:

CHESAPEAKE BAY FOUNDATION INC

Each Trustee, officer, key employee and employees in positions to obligate

CBF are required to review a copy of the conflict of interest policy
annually and complete a disclosure form identifying any relationship
positions or circumstances which he or she believes could contribute to a
conflict. The conflict of interest disclosure form is completed, signed and
returned to the Chief Financial Officer who notifies the Chairman of the
Audit and Finance Committee and the General Counsel of any concerns. This
process is also covered in orientation sessions held for new Trustees as
well as for new employees. If items arise during Board meetings that are
conflicts of interest, the board member having possible conflicts of
interest cannot vote or participate in Board or Committee deliberations on
the subject or be counted toward meeting a quorum. However, they may answer
questions.

Form 990, Part VI, Section B, Line 15:

During the annual budget approval meeting of the Audit and Finance

Committee of the Board of Trustees, the Committee reviews and approves the

salary and any proposed pay increase for the President and key employees.

Compensation related decisions are documented within the minutes. The

committee will provide this information to the full board for approval. The

President's last compensation review took place in November 2022.

Generally, compensation for all staff is independently reviewed and

determined annually based on performance evaluation, and analysis of

comparable data obtained from industry resources and peer organizations. An

overall increase pool, based on market data, is approved by the Committee

for use in the process.

<u>Schedule O (Form 990) 2021</u> Page **2**

Name of the organization **Employer identification number** CHESAPEAKE BAY FOUNDATION INC 52-6065757 In addition, the Chief Financial Officer and Vice President of Human Resources informally review and approve all staff alignment to ensure consistency and continuity of various positions within the appropriate pay grades and ranges. Form 990, Part VI, Line 17, List of States receiving copy of Form 990: AL,AR,CA,FL,GA,HI,IL,KS,KY,MD,MA,MI,MN,MS,NH,NJ,NM,NY,NC,OR,PA,RI,SC,TN,UT VA,WV,WI Form 990, Part VI, Section C, Line 19: CBF's governing documents and conflict of interest policy are available to the public upon request using contact information on the website. Audited financial statements, the Form 990, and the Annual Report can be found on CBF's website. Audited financial statements and the Form 990 are also filed with state charitable solicitation registrations, and are also available through not-for-profit internet portals such as Guidestar and Charity Navigator. Form 990, Part XI, line 9, Changes in Net Assets: Unrealized gain on interest rate swap 74,684.