

Form 8879-EO

IRS e-file Signature Authorization
for an Exempt Organization

OMB No. 1545-1878

For calendar year 2019, or fiscal year beginning JUL 1, 2019, and ending JUN 30, 2020

2019

Department of the Treasury
Internal Revenue ServiceDo not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879EO for the latest information.

Name of exempt organization

Employer identification number

THE GLASS-GLEN BURNIE MUSEUM, INC.

54-1857973

Name and title of officer

DANA HAND EVANS
CEO AND DIRECTOR

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	6,311,455.
2a Form 990-EZ check here <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

☒ I authorize YOUNT, HYDE & BARBOUR, P.C.
ERO firm name

 to enter my PIN 54185
Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature  Date 11/23/2020

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

54556422601

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature  Date 11/23/20
 ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Paperwork Reduction Act Notice, see instructions.

Form 8879-EO (2019)

923051 10-03-19

11471123 781823 13178000.0

2019.05000 THE GLASS-GLEN BURNIE MUS 13178001

EXTENDED TO MAY 17, 2021

OMB No. 1545-0047

Form **990**
(Rev. January 2020)
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ 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.

2019
Open to Public
Inspection

A For the 2019 calendar year, or tax year beginning **JUL 1, 2019** and ending **JUN 30, 2020**

B Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization

THE GLASS-GLEN BURNIE MUSEUM, INC.Doing business as **THE MUSEUM OF THE SHENANDOAH VAL**

Number and street (or P.O. box if mail is not delivered to street address)

901 AMHERST STREET

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

WINCHESTER, VA 22601F Name and address of principal officer: **DANA HAND EVANS****901 AMHERST ST, WINCHESTER, VA 22601**

D Employer identification number

CLIENT COPY**** - ***7973**

E Telephone number

540-662-1473G Gross receipts \$ **18,494,415.**

H(a) Is this a group return

for subordinates? ☐ Yes ☒ NoH(b) Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527J Website: ▶ **WWW.THEMSV.ORG**K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶L Year of formation: **1997** M State of legal domicile: **VA****Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: DEDICATED TO PRESERVING AND ENRICHING THE CULTURAL LIFE AND HERITAGE OF THE SHENANDOAH VALLEY.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	25
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	25
	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	64
	6	Total number of volunteers (estimate if necessary)	6	66
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, line 39	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	5,089,015.	4,962,186.
	9	Program service revenue (Part VIII, line 2g)	421,067.	250,158.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-85,965.	1,018,474.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	105,022.	80,637.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,529,139.	6,311,455.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,629,401.	2,557,962.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 382,611.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,055,303.	3,206,873.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,684,704.	5,764,835.
19	Revenue less expenses. Subtract line 18 from line 12	-155,565.	546,620.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	38,353,198.	38,534,347.
	21	Total liabilities (Part X, line 26)	3,954,523.	3,924,905.
	22	Net assets or fund balances. Subtract line 21 from line 20	34,398,675.	34,609,442.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date		
	DANA HAND EVANS, CEO AND DIRECTOR Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	CHRIS FRYE, CPA	CHRIS FRYE, CPA	11/23/20		P01068721
	Firm's name ▶ YOUNT, HYDE & BARBOUR, P.C.	Firm's EIN ▶ ** - ***9263			
	Firm's address ▶ P.O. BOX 2560 WINCHESTER, VA 22604-1760	Phone no. 540-662-3417			

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III Statement of Program Service Accomplishments

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

☒ X**1** Briefly describe the organization's mission:

THE MISSION OF THE MUSEUM OF THE SHENANDOAH VALLEY (MSV) IS TO PRESERVE AND ENRICH THE CULTURAL LIFE AND HERITAGE OF THE VALLEY. A CULTURAL SITE THAT SERVES THE ENTIRE REGION, THE MSV FULFILLS ITS MISSION BY PRESENTING A WIDE VARIETY OF EXHIBITIONS, OFFERING AN

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?☐ Yes ☒ No

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 ☒ 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 \$ 1,975,187. including grants of \$) (Revenue \$ 72,908.)
EDUCATIONAL, COMMUNITY, AND PUBLIC PROGRAMS

THE MSV UTILIZES ITS ENTIRE CAMPUS FOR EDUCATIONAL AND PUBLIC PROGRAMMING INCLUDING GARDEN SPACES, GALLERIES, CLASSROOMS, AND A MAKERSPACE STUDIO. ROSE HILL PARK ALSO PROVIDES SPACE FOR EDUCATIONAL AND PUBLIC PROGRAMS.

IN FY 2020, THE MSV OFFERED 274 EDUCATIONAL AND COMMUNITY PROGRAMS THAT SERVED 31,416 PEOPLE OF ALL AGES.

THE MSV OFFERED 169 YOUTH, FAMILY, AND ADULT EDUCATIONAL PROGRAMS ATTENDED BY 4,209 PEOPLE. FOR YOUTH, NEW PROGRAMS INCLUDED TEEN ART

4b (Code:) (Expenses \$ 1,925,998. including grants of \$) (Revenue \$)
OUR COLLECTION

THE MUSEUM OF THE SHENANDOAH VALLEY CARES FOR A PERMANENT COLLECTION CONTAINING MORE THAN 19,000 OBJECTS, INCLUDING THE FINE AND DECORATIVE ART COLLECTED BY MSV BENEFACTOR JULIAN WOOD GLASS JR., THE MINIATURE HOUSES AND ROOMS ASSEMBLED IN THE VALLEY BY GLASS'S PARTNER R. LEE TAYLOR, AND A COLLECTION OF OBJECTS AND ARTIFACTS THAT TELL THE STORY OF SHENANDOAH VALLEY. IN FY 2020, THE MSV ESTABLISHED THE GLEN BURNIE QUEER STUDIES COLLECTION AS COMPONENT OF THE MSV PERMANENT COLLECTION. THIS NEW COLLECTION CONSISTS OF THE EVERYDAY, MATERIAL LIFE OBJECTS OWNED BY JULIAN WOOD GLASS JR. (1910-1992) AND R. LEE TAYLOR (1924-2000) DATING TO THEIR OCCUPANCY OF GLEN BURNIE, INCLUDING OBJECTS

4c (Code:) (Expenses \$ 772,190. including grants of \$) (Revenue \$ 61,693.)
OUR EXHIBITIONS

THE MSV CONTAINS FOUR GALLERY SPACES HOUSED ON THE SECOND LEVEL OF THE MAIN MUSEUM BUILDING. IN THE SHENANDOAH VALLEY GALLERY, OBJECTS, MULTI-MEDIA PRESENTATIONS, AND EXHIBITS EXPLORE THE SWEEP OF VALLEY HISTORY, AND TWO ADDITIONAL ROOMS DISPLAY CHANGING EXHIBITIONS HIGHLIGHTING THE VALLEY'S DECORATIVE ARTS AND WORKS BY CONTEMPORARY VALLEY ARTISTS. THE FOUNDERS GALLERY PRESENTS ROTATING EXHIBITIONS FEATURING OBJECTS FROM THE COLLECTION OF EUROPEAN AND AMERICAN FINE AND DECORATIVE ARTS ASSEMBLED BY MSV BENEFACTOR JULIAN WOOD GLASS JR. THE R. LEE TAYLOR MINIATURES GALLERY IS HOME TO A FASCINATING COLLECTION OF FURNISHED HOUSES AND ROOMS ASSEMBLED BY R. LEE TAYLOR, GLASS'S PARTNER

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 4,673,375.

Form 990 (2019)

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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	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		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		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	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		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	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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
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		X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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		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		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		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		X
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		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X

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		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	X	
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		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a 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		X
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		X
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		X
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		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		X
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O.

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	1a	1b	1c	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	49				
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		0			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			X		

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 64		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15		X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		X

Form 990 (2019)

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**

	1a	25	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year		25		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b Enter the number of voting members included on line 1a, above, who are independent	1b	25		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6 Did the organization have members or stockholders?	6			X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
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			X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8a		X	
b Each committee with authority to act on behalf of the governing body?	8b		X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9			X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	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	X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	X
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
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 **NONE**

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

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

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 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 **DIRECTOR OF FINANCE - 540-662-1473**
901 AMHERST STREET, WINCHESTER, VA 22601

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ALLAN G. PATERSON JR. FOUNDATION TRUSTEE	1.00 20.00	X						0.	78,000.	0.
(2) DAVID H.O. ROTH FOUNDATION TRUSTEE	1.00 15.00	X						0.	48,000.	0.
(3) DIANNE H. WAKE VICE PRESIDENT	1.00	X		X				0.	0.	0.
(4) THE HONORABLE RONALD L. NAPIER DIRECTOR	1.00	X						0.	0.	0.
(5) JAMES T. HOLLAND FOUNDATION TRUSTEE	1.00 15.00	X						0.	78,000.	0.
(6) JOHN B. ADAMS, JR. FOUNDATION TRUSTEE	1.00 10.00	X						0.	48,000.	0.
(7) JOHN B. WILLEY, M.D. DIRECTOR	1.00	X						0.	0.	0.
(8) NICOLE H. PERRY SECRETARY	1.00	X		X				0.	0.	0.
(9) PETER G. BULLOUGH, M.D. FOUNDATION TRUSTEE	1.00 10.00	X						0.	40,320.	0.
(10) RUPERT W. WERNER 2ND VICE PRESIDENT	1.00	X		X				0.	0.	0.
(11) WILBORN M. ROBERSON PRESIDENT	1.00	X		X				0.	0.	0.
(12) TODD BROCKWELL FOUNDATION TRUSTEE	1.00 10.00	X						0.	48,000.	0.
(13) W. BLAKELY CURTIS DIRECTOR	1.00	X						0.	0.	0.
(14) KAY S. WHITWORTH DIRECTOR	1.00	X						0.	0.	0.
(15) ILONA BENHAM DIRECTOR	1.00	X						0.	0.	0.
(16) GINA S. BYRD DIRECTOR	1.00	X						0.	0.	0.
(17) CEEANN DAVIS, M.D. DIRECTOR	1.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) CHRISTOPHER R. VERSEN, PH.D. DIRECTOR	1.00	X						0.	0.	0.
(19) MATTHEW M. VOLLMERS DIRECTOR	1.00	X						0.	0.	0.
(20) JENNIFER B. BAKER DIRECTOR	1.00	X						0.	0.	0.
(21) TAMARA BJELLAND DIRECTOR	1.00	X						0.	0.	0.
(22) JEFF W. COKER, PH.D. DIRECTOR	1.00	X						0.	0.	0.
(23) GRADY W. PHILIPS, III TREASURER	1.00	X						0.	0.	0.
(24) TERESE MERRILL DIRECTOR	1.00	X						0.	0.	0.
(25) MICHAEL S. PERRY DIRECTOR	1.00	X						0.	0.	0.
(26) DANA HAND EVANS CEO AND DIRECTOR	40.00			X				163,340.	0.	31,072.
1b Subtotal								163,340.	340,320.	31,072.
c Total from continuation sheets to Part VII, Section A								82,338.	0.	9,324.
d Total (add lines 1b and 1c)								245,678.	340,320.	40,396.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

- 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual **3** **X**
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual **4** **X**
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person **5** **X**

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
HOWARD SHOCKEY AND SONS 1057 MARTINSBURG PIKE, WINCHESTER, VA 22601	CONSTRUCTION	324,620.
BLAUCH BROTHERS 166 GARBER LANE, WINCHESTER, VA 22602	MECHANICAL CONTRACTING	182,163.
SECURITAS, 14200 PARK MEADOW DRIVE STE S-350, CHANTILLY, VA 20151	SECURITY SERVICES	115,679.
DAVE ROGERS BIG BUGS, INC. PO BOX 668, GLEN COVE, NY 11542	MUSEUM DISPLAYS	103,500.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **4**

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2019)

Part VII

Total to Part VII, Section A, line 1c

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b	157,229.			
	c	Fundraising events	1c				
	d	Related organizations	1d	3,579,537.			
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,225,420.			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 25,884.			
	h	Total. Add lines 1a-1f		4,962,186.			
Program Service Revenue				Business Code			
	2 a	GIFT SHOP SALES	453220	92,895.			92,895.
	b	ADMISSIONS	713990	61,693.	61,693.		
	c	PUBLIC EVENTS	713990	39,163.	39,163.		
	d	EDUCATIONAL PROGRAMS	713990	33,745.	33,745.		
	e	PLANT SALES	110000	22,662.			22,662.
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		250,158.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		221,575.			221,575.
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	(i) Real 78,254.				
	b	Less: rental expenses	0.				
	c	Rental income or (loss)	78,254.				
	d	Net rental income or (loss)		78,254.			78,254.
	7 a	Gross amount from sales of assets other than inventory	(i) Securities 12,979,859.				
	b	Less: cost or other basis and sales expenses	12,181,722.	1,238.			
	c	Gain or (loss)	798,137.	-1,238.			
	d	Net gain or (loss)		796,899.			796,899.
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18					
	b	Less: direct expenses					
	c	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See Part IV, line 19					
b	Less: direct expenses						
c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances						
b	Less: cost of goods sold						
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue				Business Code			
	11 a	MISCELLANEOUS INCOME	713990	2,383.			2,383.
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d		2,383.			
12	Total revenue. See instructions		6,311,455.	134,601.	0.	1,214,668.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
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	265,228.	89,391.	141,280.	34,557.
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	1,843,640.	1,656,666.	79,317.	107,657.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	90,767.	73,781.	10,815.	6,171.
9 Other employee benefits	199,351.	170,011.	22,955.	6,385.
10 Payroll taxes	158,976.	127,074.	21,484.	10,418.
11 Fees for services (nonemployees):				
a Management				
b Legal	7,154.	6,011.	715.	428.
c Accounting	27,044.		26,720.	324.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	44,010.		44,010.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	116,962.	90,981.	8,759.	17,222.
12 Advertising and promotion	156,129.	154,723.	1,159.	247.
13 Office expenses	81,217.	53,641.	9,373.	18,203.
14 Information technology				
15 Royalties				
16 Occupancy	350,057.	342,475.	4,591.	2,991.
17 Travel	23,387.	14,773.	3,861.	4,753.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	60,884.		60,884.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,446,209.	1,181,417.	168,069.	96,723.
23 Insurance	111,419.	88,513.	15,999.	6,907.
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.)				
a GROUPS MAINTENANCE	124,566.	116,106.	5,076.	3,384.
b COLLECTION, CARE, CONSERVATION	118,539.	118,539.	0.	0.
c BUILDING MAINTENANCE	111,175.	93,883.	10,375.	6,917.
d EVENTS AND PUBLIC PROGRAMS	82,549.	43,148.	0.	39,401.
e All other expenses	345,572.	252,242.	73,407.	19,923.
25 Total functional expenses. Add lines 1 through 24e	5,764,835.	4,673,375.	708,849.	382,611.
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 ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	106,185.	1	588,823.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	299,737.	3	246,392.
	4 Accounts receivable, net	0.	4	4,792.
	5 Loans and other receivables from 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		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	38,956.	8	36,996.
	9 Prepaid expenses and deferred charges	197,365.	9	304,854.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 38,465,881.		
	b Less: accumulated depreciation	10b 11,270,340.	10c	27,195,541.
	11 Investments - publicly traded securities	9,891,230.	11	10,007,160.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	173,913.	15	149,789.
16 Total assets. Add lines 1 through 15 (must equal line 33)	38,353,198.	16	38,534,347.	
Liabilities	17 Accounts payable and accrued expenses	709,791.	17	635,750.
	18 Grants payable		18	
	19 Deferred revenue	1,313,704.	19	1,319,578.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other 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		22	
	23 Secured mortgages and notes payable to unrelated third parties	28,467.	23	21,635.
	24 Unsecured notes and loans payable to unrelated third parties	0.	24	541,400.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	1,902,561.	25	1,406,542.
	26 Total liabilities. Add lines 17 through 25	3,954,523.	26	3,924,905.
	Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.		
27 Net assets without donor restrictions		24,061,828.	27	24,242,334.
28 Net assets with donor restrictions		10,336,847.	28	10,367,108.
Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
29 Capital stock or trust principal, or current funds			29	
30 Paid-in or capital surplus, or land, building, or equipment fund			30	
31 Retained earnings, endowment, accumulated income, or other funds			31	
32 Total net assets or fund balances		34,398,675.	32	34,609,442.
33 Total liabilities and net assets/fund balances	38,353,198.	33	38,534,347.	

Form 990 (2019)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,311,455.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,764,835.
3	Revenue less expenses. Subtract line 2 from line 1	3	546,620.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	34,398,675.
5	Net unrealized gains (losses) on investments	5	-335,853.
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	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	34,609,442.

Part XII Financial Statements and ReportingCheck 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		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:		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
2b Were the organization's financial statements audited by an independent accountant?	X	
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:		
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
2c 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?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Form 990 (2019)

SCHEDULE A
(Form 990 or 990-EZ)

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

2019

Open to Public
Inspection

Name of the organization

THE GLASS-GLEN BURNIE MUSEUM, INC.

Employer identification number

****-***7973**

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ 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: _____
- 5 ☐ 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).**
- 7 ☒ 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.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ 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 university: _____
- 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **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.**
- 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.**
- 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.**
- d ☐ **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.**
- e ☐ 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.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4435090.	4630173.	7050526.	5089015.	4962186.	26166990.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	4435090.	4630173.	7050526.	5089015.	4962186.	26166990.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						19077566.
6 Public support. Subtract line 5 from line 4.						7089424.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	4435090.	4630173.	7050526.	5089015.	4962186.	26166990.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	436,462.	419,311.	405,423.	361,459.	299,829.	1922484.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	13,967.	11,507.	17,410.	14,649.	2,383.	59,916.
11 Total support. Add lines 7 through 10						28149390.
12 Gross receipts from related activities, etc. (see instructions)					12	1,642,113.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	25.19	%
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	23.60	%
16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2019

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐**b** 33 1/3% support tests - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐**20** Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

Part IV Supporting Organizations (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons?
- a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
- b A family member of a person described in (a) above?
- c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 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.

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 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).

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 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?
- 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).
- 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

	Yes	No
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a ☐ The organization satisfied the Activities Test. Complete line 2 below.
- b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.
- c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

2 Activities Test. Answer (a) and (b) below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

	Yes	No
2a		
2b		

3 Parent of Supported Organizations. Answer (a) and (b) below.

- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	Yes	No
3a		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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

Section A - Adjusted Net 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	

Section 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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2019

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

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

PART II, SECTION C, LINE 17A, FACTS AND CIRCUMSTANCES TEST:

THE ORGANIZATION'S PUBLIC SUPPORT PERCENTAGE AS CALCULATED PER SCHEDULE A FOR 2019 IS 25.19%, WHICH MEETS THE 10% SUPPORT TEST. THE ORGANIZATION PROVIDES FACILITIES OR SERVICES DIRECTLY FOR THE BENEFIT OF THE GENERAL PUBLIC ON A CONTINUOUS BASIS. THE ORGANIZATION MAINTAINS A DEFINITIVE PROGRAM FOR ACCOMPLISHING ITS CHARITABLE WORK IN THE COMMUNITY. THE ORGANIZATION SOLICITS DUES-PAYING MEMBERS IN A WAY DESIGNED TO ENROLL A SUBSTANTIAL NUMBER OF PERSONS IN THE COMMUNITY AREA. THE ORGANIZATION MAKES MEMBERSHIP AVAILABLE TO A BROAD CROSS SECTION OF THE INTERESTED PUBLIC. THE ACTIVITIES OF THE ORGANIZATION ARE LIKELY TO APPEAL TO PERSONS WITH BROAD COMMON INTERESTS OR PURPOSES.

Identification of Excess Contributions Included on Part II, Line 5

2019

*** Not Open to Public Inspection ***

[illegible]

Name of organization

Employer identification number

THE GLASS-GLEN BURNIE MUSEUM, INC.

-*7973

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 Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

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

2019Open to Public
Inspection

Name of the organization

THE GLASS-GLEN BURNIE MUSEUM, INC.

Employer identification number

**** - ***7973****Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2019

932051 10-02-19

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a ☒ Public exhibition d ☐ Loan or exchange program
 b ☐ Scholarly research e ☐ Other _____
 c ☒ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☒ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☒ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☒ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	9,839,703.	11,203,969.	11,746,246.	10,406,910.	12,920,571.
b Contributions					
c Net investment earnings, gains, and losses	633,123.	49,506.	234,471.	2,127,348.	-1,795,853.
d Grants or scholarships					
e Other expenditures for facilities and programs	518,211.	1,413,772.	776,748.	788,012.	717,808.
f Administrative expenses					
g End of year balance	9,954,615.	9,839,703.	11,203,969.	11,746,246.	10,406,910.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ☐ %
 b Permanent endowment ☒ 67.70 %
 c Term endowment ☒ 32.30 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) Unrelated organizations
 (ii) Related organizations

	Yes	No
3a(i)		<input checked="" type="checkbox"/>
3a(ii)		<input checked="" type="checkbox"/>
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		19,478,652.	7,412,503.	12,066,149.
c Leasehold improvements		16,636,312.	2,746,864.	13,889,448.
d Equipment		364,694.	185,113.	179,581.
e Other		1,986,223.	925,860.	1,060,363.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ☒ 27,195,541.

Schedule D (Form 990) 2019

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

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

(a) Description of liability	(b) Book value
1. (1) Federal income taxes	
(2) SECURITY DEPOSIT	1,561.
(3) LINE OF CREDIT	1,404,981.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

1,406,542.

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

Schedule D (Form 990) 2019

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	5,931,592.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-335,853.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	-335,853.
3	Subtract line 2e from line 1	3	6,267,445.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	44,010.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	44,010.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	6,311,455.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	5,720,825.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	5,720,825.
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	44,010.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	44,010.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	5,764,835.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 1A:

THE COLLECTIONS, WHICH WERE ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS SINCE THE MUSEUM'S INCEPTION, ARE NOT RECOGNIZED AS ASSETS ON THE STATEMENT OF FINANCIAL POSITION. PURCHASES OF COLLECTION ITEMS ARE RECORDED AS EXPENSES IN THE YEAR IN WHICH THE ITEMS ARE ACQUIRED. CONTRIBUTED COLLECTION ITEMS ARE NOT REFLECTED ON THE FINANCIAL STATEMENTS. FORTY PERCENT OF THE PROCEEDS FROM ANY DEACCESSIONS OR INSURANCE RECOVERIES IS DESIGNATED BY THE BOARD OF DIRECTORS FOR FUTURE PURCHASES OF COLLECTION ITEMS. SIXTY PERCENT OF PROCEEDS FROM DEACCESSIONS OR INSURANCE RECOVERIES WOULD BE REFLECTED AS INCREASES IN THE GENERAL OPERATING FUND DESIGNATED FOR CONSERVATION OF COLLECTION ITEMS.

Part XIII Supplemental Information (continued)

PART III, LINE 4:

THE MUSEUM OF THE SHENANDOAH VALLEY COMPLEX CONTAINS FIVE DISTINGUISHED COLLECTIONS DISPLAYED IN THREE LOCATIONS. ON VIEW IN THE HISTORIC HOUSE IS THE GLEN BURNIE HOUSE COLLECTION, WHICH INCLUDES PAINTINGS, FINE FURNITURE, AND DECORATIVE OBJECTS ACQUIRED BY JULIAN WOOD GLASS JR. FOR HIS ANCESTRAL HOME. THE MUSEUM'S LIVING COLLECTION IS COMPOSED OF SEVEN ACRES OF SPECTACULAR GARDENS SURROUNDING THE GLEN BURNIE HOUSE. FINALLY, THE MUSEUM OF THE SHENANDOAH VALLEY COLLECTION, THE JULIAN WOOD GLASS JR. COLLECTION, AND THE R. LEE TAYLOR MINIATURES COLLECTION ARE EACH ON PERMANENT DISPLAY IN GALLERIES. THE SECOND LEVEL OF THE MSV PRESENTS FOUR MAIN GALLERIES COMPRISED OF ELEVEN GALLERY ROOMS. IN THE SHENANDOAH VALLEY GALLERY, THREE GALLERY ROOMS EXPLORE THE SWEEP OF VALLEY HISTORY, AND ONE ADDITIONAL ROOM DISPLAYS DECORATIVE ARTS, PAINTINGS, FURNITURE, AND OBJECTS OF MATERIAL CULTURE MADE IN THE VALLEY FROM THE MID-1700S TO THE PRESENT. THE ADJACENT GALLERY ROOM PRESENTS EXHIBITIONS OF WORKS BY CONTEMPORARY VALLEY ARTISTS OR VALLEY THEMES. THE FOUNDERS GALLERY PRESENTS WORKS FROM THE MSV JULIAN WOOD GLASS JR. COLLECTION AND TRAVELING EXHIBITIONS. THE R. LEE TAYLOR MINIATURES GALLERY IS HOME TO A FASCINATING COLLECTION OF FURNISHED MINIATURE HOUSES AND ROOMS, ALSO ASSEMBLED IN THE SHENANDOAH VALLEY, WHILE THE CHANGING EXHIBITIONS GALLERY DISPLAYS CONTINUALLY CHANGING EXHIBITIONS THROUGHOUT THE YEAR.

PART V, LINE 4:

THE MUSEUM'S ENDOWMENT CONSISTS OF TWO ENDOWMENT FUNDS ESTABLISHED MAINLY TO PROVIDE FOR THE COLLECTIONS ENDOWMENT AND VARIOUS PROGRAM-RELATED EXPENDITURES.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

- For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public
Inspection

Name of the organization

THE GLASS-GLEN BURNIE MUSEUM, INC.

Employer identification number
****-***7973**

Part I Questions Regarding Compensation

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.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

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?

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.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment? **4a**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c**
- 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:

- a** The organization? **5a**
- b** Any related organization? **5b**
- 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:

- a** The organization? **6a**
- b** Any related organization? **6b**
- 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 not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2019

... if additional space is needed.

Note: The sum of columns (B)-(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.

[illegible]

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.

[illegible]

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

- ▶ 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.

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Name of the organization

THE GLASS-GLEN BURNIE MUSEUM, INC.

Employer identification number

****-***7973**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art	X	8	0.	
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	4	25,884.	STOCK QUOTE
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 ▶ ()				
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

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?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31	X	
32a	X	
33		

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

Schedule M (Form 990) 2019

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THE COLLECTIONS ARE VALUED AT ZERO BECAUSE THE MUSEUM HAS ELECTED TO
NOT CAPITALIZE ITS COLLECTIONS.

SCHEDULE M, LINE 32B:

STOCK DONATIONS ARE SENT DIRECTLY TO INVESTMENT ADVISORS. INVESTMENT
ADVISORS PROCESS THE SALE AT THE DIRECTION OF THE DIRECTOR OF FINANCE.

SCHEDULE M, LINE 33:

THE ORGANIZATION HAS ELECTED, AS PERMITTED UNDER ACCOUNTING STANDARDS,
NOT TO REPORT IN ITS STATEMENT OF ACTIVITIES, REVENUE FROM THE
CONTRIBUTION OF ART, HISTORICAL TREASURES, OR OTHER SIMILAR ASSETS HELD
FOR PUBLIC EXHIBITION, EDUCATION, OR RESEARCH IN FURTHERANCE OF PUBLIC
SERVICE.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

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Name of the organization

THE GLASS-GLEN BURNIE MUSEUM, INC.

Employer identification number

**** - ***7973**

FORM 990, PART I, DOING BUSINESS AS:

THE MUSEUM OF THE SHENANDOAH VALLEY

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

**EXTENSIVE SCHEDULE OF EDUCATIONAL AND COMMUNITY PROGRAMMING, PRESERVING
THE LARGEST GREEN SPACE AND ONLY WORKING FARM IN THE CITY OF
WINCHESTER, AND ACTIVELY BUILDING AND CARING FOR A COLLECTION OF
OBJECTS WHICH TELL THE VALLEY'S STORY, INCLUDING THE GLEN BURNIE HOUSE
AND SURROUNDING SEVEN-ACRE GARDENS AND ROSE HILL FARM PARK, A PUBLIC
PARK AND CIVIL WAR BATTLEFIELD SITE. THE MSV CELEBRATES THE VALLEY'S
PAST, SERVES AS A VIBRANT CULTURAL CENTER IN THE PRESENT, AND, IN
NOVEMBER OF 2020, WILL EXPAND INTO A CULTURAL PARK BY OPENING 90 ACRES
OF THE MSV LANDSCAPE TO THE PUBLIC AS A FREE-ADMISSION ART PARK WITH A
SYSTEM OF HIKING AND WALKING TRAILS WITH OUTDOOR ART DISPLAYS
CONNECTING THE MSV CAMPUS TO THE COMMUNITY.**

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

**CLUB. FOR ADULTS, 89 MSV PROGRAMS SERVED 1,436 PEOPLE. NEW PROGRAMS
INCLUDED MEMORIES AT THE MSV FOR VISITORS WITH MEMORY LOSS, LUNCH AND
LEARN, AND THE VIRTUAL PROGRAMS ART @ HAPPY HOUR AND HISTORY IN THE
KITCHEN. CONTINUING ADULT PROGRAMS INCLUDED GALLERY TALKS, POTTERY
WORKSHOPS IN THE MAKERSPACE STUDIO, GUIDED GARDEN TALKS, CURATOR-LED
TALKS, AND A VARIETY OF HANDS-ON WORKSHOPS. MSV SCHOOL PROGRAMMING
ENGAGED 2,893 STUDENTS OF ALL AGES.**

THE MSV OFFERED 33 COMMUNITY PROGRAMS SERVING 9,658 PEOPLE. EVENTS

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

Schedule O (Form 990 or 990-EZ) (2019)

932211 09-06-19

Name of the organization

THE GLASS-GLEN BURNIE MUSEUM, INC.

Employer identification number

-*7973

INCLUDED THREE SUMMER GARDENS AT NIGHT CONCERTS IN 2019 WITH 5,186 IN ATTENDANCE AND FOUR ADMISSION-FREE EVENTS FOR FAMILIES ATTRACTED 1,677 PEOPLE. IN ADDITION TO OFFERING A HOLIDAY CONCERT SERIES, THE MSV PARTNERED WITH SHENANDOAH UNIVERSITY FOR VARIOUS CONCERTS FEATURING ITS CONSERVATORY FACULTY AND STUDENTS. THE MSV PRESENTED A MONTHLY FILM SERIES FROM OCTOBER TO APRIL AND PROVIDED RENT-FREE USE OF CAMPUS PROPERTY TO A LOCAL PRESERVATION GROUP AND A REGIONAL ARTS COUNCIL AND PROVIDED REDUCED OR RENT-FREE USE OF MSV SPACE TO 20 COMMUNITY NON-PROFIT ORGANIZATIONS. THANKS TO CORPORATE UNDERWRITING, 5,593 PEOPLE EXCLUSIVE OF MUSEUM MEMBERS RECEIVED FREE GENERAL ADMISSION TO THE MSV. THE MUSEUM SERVES VALLEY ARTISTS THROUGH A CONSIGNMENT PROGRAM IN ITS MUSEUM STORE AND OFFERS SPECIALTY ITEMS AND BOOKS COMPLEMENTING MSV EXHIBITIONS, AND EDUCATIONAL PROGRAMS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: THAT SPEAK TO THEIR TIME AS A GAY COUPLE. IT ALSO CONTAINS SELECT OBJECTS OWNED BY THE GROUP OF FRIENDS AND IMMEDIATE FAMILY THAT SUPPORTED THEM.

LOCATED ON A 214-ACRE LANDSCAPE THAT IS THE LARGEST GREEN SPACE AND ONLY WORKING FARM IN THE CITY OF WINCHESTER, THE MSV IS A REGIONAL CULTURAL CENTER THAT INCLUDES GALLERIES, THE GLEN BURNIE HOUSE, AND SEVEN ACRES OF FORMAL GARDENS.

THE GLEN BURNIE HOUSE, THE OLDEST PORTIONS OF WHICH DATE TO 1794, IS SURROUNDED BY SEVEN ACRES OF FORMAL GARDENS WHICH WERE INSTALLED IN THE LATTER HALF OF THE TWENTIETH CENTURY BY MSV BENEFACTOR JULIAN WOOD GLASS JR. AND HIS PARTNER R. LEE TAYLOR. THE MUSEUM SITS ON LAND

Name of the organization

THE GLASS-GLEN BURNIE MUSEUM, INC.

Employer identification number

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ORIGINALLY CLAIMED BY GLASS'S ANCESTOR AND WINCHESTER FOUNDER JAMES WOOD IN 1735. THE PROPERTY WAS PASSED THROUGH GENERATIONS OF WOOD AND GLASS FAMILIES UNTIL BEING ACQUIRED IN 1952 BY JULIAN WOOD GLASS JR. FOLLOWING THE DEATH OF HIS FATHER. BEGINNING IN THE 1950S, THE PROPERTY WAS EXTENSIVELY RENOVATED AND TRANSFORMED INTO A COUNTRY RETREAT. THE HOME WAS FURNISHED WITH OBJECTS PASSED THROUGH FAMILY GENERATIONS ALONG WITH EIGHTEENTH- AND NINETEENTH-CENTURY FURNITURE AND FINE ARTS ACQUIRED BY JULIAN WOOD JR. THE MSV IS SUPPORTED BY THE GLASSGLEN BURNIE FOUNDATION AND MANAGES THE PROPERTY IN ACCORDANCE WITH A WRITTEN COOPERATIVE AGREEMENT WITH THE FOUNDATION.

UPON MR. GLASS'S DEATH AND AS A CONDITION OF HIS WILL, THE HOUSE AND GARDENS WERE OPENED TO THE PUBLIC ON A SEASONAL BASIS IN 1997. IN 2005, THE MUSEUM OF THE SHENANDOAH VALLEY (MSV), A 50,000 SQUARE FOOT MUSEUM BUILDING, WAS ADDED AS AN ANCHOR TO THE SITE TO FULFILL GLASS'S VISION OF SHARING HIS SIGNIFICANT COLLECTION WITH THE PUBLIC AND TO EXPAND UPON THAT VISION TO INCLUDE A SPACE WHERE THE ART, HISTORY, AND CULTURE OF THE VALLEY COULD BE INTERPRETED.

FOLLOWING A TWO-YEAR RENOVATION PROJECT, THE GLEN BURNIE HOUSE REOPENED IN FY 14 AS A VERSATILE SPACE FOR EDUCATIONAL AND CULTURAL PROGRAMMING FEATURING NEW DISPLAYS AND INTERPRETATION. THE GLEN BURNIE HOUSE AND ADJACENT GARDENS ARE AMONG THE MSV'S MOST IMPORTANT COLLECTION ASSETS. IN 2014, THE MSV UNVEILED A LARGER LAND USE PLAN, THE MASTER PLAN, WHICH OUTLINED THE FUTURE DEVELOPMENT OF THE MSV LANDSCAPE.

IN ACCORDANCE WITH THE MSV COLLECTIONS MANAGEMENT POLICY AND SINCE OPENING IN 2005, THE MUSEUM'S COLLECTIONS COMMITTEE, UPON ADVICE OF THE

Name of the organization

THE GLASS-GLEN BURNIE MUSEUM, INC.

Employer identification number

-*7973

MSV'S STAFF, ACTIVELY COLLECTS ITEMS OF SIGNIFICANCE TO THE SHENANDOAH VALLEY. THE MSV FUNDS ACQUISITION AND CONSERVATION EFFORTS WITH ITS COLLECTIONS AND EXHIBITIONS ENDOWMENT AND A NEWLY FORMED GAUNT COLLECTORS SOCIETY. THE MSV BUILDING INCLUDES A COLLECTIONS STORAGE SPACE FOR ITEMS NOT ON DISPLAY.

IN ADDITION TO THE MSV CAMPUS, THE MSV MANAGES THE ANCESTRAL HOME OF THE GLASS FAMILY, KNOWN AS THE ROSE HILL FARM. THE SITE INCLUDES A VERNACULAR FEDERAL-STYLE HOUSE AND IS NOTABLE FOR BEING THE LOCATION OF THE CIVIL WAR'S FIRST BATTLE OF KERNSTOWN. A RENOVATION PROJECT TO STABILIZE AND PRESERVE THE HOME WAS COMPLETED IN FY 2015 AND THE HOUSE IS RENTED TO THE MSV EXECUTIVE DIRECTOR WHO OVERSEES ITS MAINTENANCE AND CARE. IN FY 2017, THANKS TO A PARTNERSHIP WITH THE FREDERICK COUNTY PARKS AND RECREATION DEPARTMENT, THE HISTORIC PORTIONS OF THE ROSE HILL LANDSCAPE ADJACENT TO THE HOUSE OPENED TO THE PUBLIC AS A COMMUNITY PARK FEATURING A 1.3 MILE WALKING TRAIL WITH INTERPRETIVE SIGNAGE, A PARKING LOT, RESTROOMS, AND OPEN PLAY FIELDS. THE ROSE HILL PARK IS CO-MANAGED BY LEASE TO FREDERICK COUNTY.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

AND HE MUSEUM'S LATE CURATOR OF GARDENS. THE MINIATURES GALLERY ALSO PRESENTS SHADOWBOXES CREATED BY VALLEY MINIATURES ARTIST WILLIAM P. MASSEY (ACTIVE 1930'S TO 1940'S).

THE CHANGING EXHIBITIONS GALLERY, FOUNDERS GALLERY, AND SHENANDOAH VALLEY GALLERY DISPLAY CONTINUALLY CHANGING EXHIBITIONS THROUGHOUT THE YEAR. IN ADDITION, AN EXHIBITION IS PRESENTED ANNUALLY IN THE DRAWING ROOM OF THE MSV GLEN BURNIE HOUSE. THE MSV ORGANIZES CHANGING

Name of the organization

THE GLASS-GLEN BURNIE MUSEUM, INC.

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EXHIBITIONS AND BRINGS TRAVELING EXHIBITIONS TO THE REGION WITH THE GOAL OF SERVING DIVERSE AUDIENCES. IN FY 2020, THE MSV PRESENTED 10 SEPARATE EXHIBITIONS. THE MSV PRESENTED THE FOLLOWING EXHIBITIONS IN THE GALLERIES DURING FY 2020: VITAL FORCE (FEBRUARY 8, 2019 - JULY 19, 2020), STEINLEN: CATS (MAY 2, 2019 - SEPTEMBER 1, 2019), TIFFANY GLASS: PAINTING WITH COLOR AND LIGHT (JUNE 1, 2019 - SEPTEMBER 8, 2019), BILL RUTHERFOORD: ALLEGORY OF NO REGION (OCTOBER 11, 2019 - JANUARY 12, 2020), REMBRANDT AND HIS CONTEMPORARIES: PRINTS FROM THE DUTCH GOLDEN AGE (NOVEMBER 9, 2019 - MARCH 8, 2020), GHOSTS OF A FORGOTTEN LANDSCAPE: PAINTINGS BY SALLY VEACH (JULY 13, 2019 - MARCH 15, 2020), THINGS COME APART (FEBRUARY 15, 2020 - JULY 12, 2020), DAVID ROGERS' BIG BUGS (JUNE 23, 2020 - NOVEMBER 15, 2020). THE EXHIBITION MICHAEL T. DAVIS: MODERN REALIST PAINTINGS (APRIL 1, 2019 - DECEMBER 31, 2019) WAS PRESENTED IN GLEN BURNIE HOUSE AND THE EXHIBITION GIVE ME SHELTER: SCENIC VIEWS OF THE APPALACHIAN TRIAL BY SARAH JONES DECKER (JUNE 20, 2020 - DECEMBER 31, 2020), ORIGINALLY PLANNED FOR DISPLAY IN THE DRAWING ROOM OF THE HOUSE, WAS PRESENTED AS AN OUTDOOR PHOTOGRAPHY EXHIBITION IN THE GARDENS WHEN HOUSE WAS TEMPORARILY CLOSED DURING THE COVID-19 PANDEMIC. THE EXHIBITION COLLECT, PRESERVE, INTERPRET HIGHLIGHTING THE BEST OF THE MSV'S SHENANDOAH VALLEY COLLECTION CONTINUED ITS DISPLAY IN THE SHENANDOAH VALLEY GALLERY. ALONG WITH THESE MAJOR EXHIBITIONS, THE MSV PRESENTED THE WORK OF NUMEROUS CONTEMPORARY VALLEY ARTISTS THROUGH FOUR DISPLAYS IN THE MSV ART IN THE HALLS PROGRAM.

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

THE BOARD OF DIRECTORS REVIEWED THE 990 PRIOR TO FILING WITH THE IRS.

Name of the organization

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

THE CONFLICT OF INTEREST POLICY IS UPDATED ANNUALLY WITH BOARD MEMBERS
REQUIRED TO LIST CONFLICTS. BOARD MEMBERS ARE NOT ALLOWED A VOTE REGARDING
AREAS WITH WHICH THERE IS A CONFLICT.

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

THE EXECUTIVE COMMITTEE EVALUATED THE CEO AND DIRECTOR IN 2019 AND REVIEWED
SALARY COMP BOOKS AND MADE A DETERMINATION BASED UPON PERFORMANCE AND
INDUSTRY COMPARABLES.

THE CEO AND DIRECTOR EVALUATES KEY EMPLOYEES ANNUALLY AND REVIEWS SALARY
COMP BOOKS TO MAKE A DETERMINATION BASED UPON PERFORMANCE AND POSITION
COMPARABLES.

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS
WILL BE MADE AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 2C

THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.

FORM 990, PART VII, SECTION A, LINE 1(A)

REPORTABLE COMPENSATION FROM RELATED ORGANIZATIONS: THE PAYMENTS
LISTED IN COLUMN E, REPORTABLE COMPENSATION FROM RELATED ORGANIZATIONS,
INCLUDES PAYMENTS TO INDIVIDUALS THAT WERE PAID BY THE GLASS-GLEN
BURNIE FOUNDATION. THE GLASS-GLEN BURNIE FOUNDATION IS LISTED AS A
RELATED ORGANIZATION ON SCHEDULE R.

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SCHEDULE O - ADDITIONAL INFORMATION

IN-KIND RENTAL OF THE HEXAGON HOUSE: THE MUSEUM (PROPERTY MANAGER)

ENTERED INTO A SUBLEASE AGREEMENT WITH THE NON-PROFIT ORGANIZATIONS

PRESERVATION OF HISTORIC WINCHESTER (LESSEE) AND THE SHENANDOAH ARTS

COUNCIL (LESSEE) FOR THE RENTAL OF THE RESIDENCE KNOWN AS THE HEXAGON

HOUSE. THE HEXAGON HOUSE IS OWNED BY THE GLASS-GLEN BURNIE FOUNDATION.

THE MUSEUM HAS VALUED THE IN-KIND RENTAL OF THE HOUSE FOR FY 2020, AT

\$24,561. THIS VALUE INCLUDES CONSIDERATION OF THE SQUARE-FOOT RENTAL

VALUE AND THE MUSEUM'S OBLIGATION UNDER THE LEASE TO PROVIDE YEAR-ROUND

GROUNDS MAINTENANCE INCLUDING MOWING AND SNOW REMOVAL, WATER AND SEWER

SERVICE, INSURANCE, TAXES AND STRUCTURAL MAINTENANCE.

SCHEDULE O - ADDITIONAL INFORMATION

IN-KIND RENTAL OF RECEPTION HALL: AS PART OF THE MUSEUM'S ONGOING

COMMITMENT TO SERVING THE COMMUNITY IN WHICH IT OPERATES, THE MSV FROM

TIME TO TIME, DONATES THE USE OF ITS RECEPTION HALL TO NON-PROFIT

ORGANIZATIONS WITHIN THE COMMUNITY. THE MUSEUM HAS VALUED THE IN-KIND

RENTAL OF THIS SPACE AT \$10,425 FOR FY 2020.

SCHEDULE O - ADDITIONAL INFORMATION

FREE GENERAL ADMISSIONS: AS PART OF THE MSV'S ONGOING COMMITMENT TO

SERVE THE COMMUNITY IN WHICH IT OPERATES, THE MUSEUM OFFERS FREE

ADMISSION ON WEDNESDAYS (5,593 SERVED); AND YEAR-ROUND FREE ADMISSION

TO AGES 12 AND UNDER (850 SERVED). BETWEEN MEMORIAL DAY AND LABOR DAY,

THE MSV PARTICIPATES IN THE BLUE STAR MUSEUMS PROGRAM PROVIDING FREE

ADMISSION TO ACTIVE MILITARY PERSONNEL AND THEIR FAMILIES (327 SERVED).

Name of the organization

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SCHEDULE O - ADDITIONAL INFORMATION

FREE EVENTS AND PROGRAMS: THANKS TO CORPORATE UNDERWRITING AND GRANTS, THE MSV PROVIDES FREE ADMISSION TO VARIOUS COMMUNITY EVENTS AND EDUCATIONAL PROGRAMS FOR ALL AGES. DURING THE YEAR ENDED JUNE 30, 2020, MORE THAN 2,235 INDIVIDUALS ATTENDED FREE PROGRAMS AT THE MSV.

SCHEDULE O - ADDITIONAL INFORMATION

DONOR PRIVACY POLICY: ANY INFORMATION SUPPLIED TO THE MUSEUM OF THE SHENANDOAH VALLEY BY DONORS WILL BE USED SOLELY TO FULFILL THEIR DONATION AND SHALL NOT BE SHARED FOR ANY REASON UNLESS PERMISSION IS GIVEN BY THE DONOR TO SHARE SUCH INFORMATION. ALL REQUESTS TO REMAIN ANONYMOUS SHALL BE HONORED. THE MSV DOES NOT SELL OR SHARE DONOR LISTS. DONORS WHO SUPPLY THE MSV WITH THEIR POSTAL ADDRESS OR EMAIL ADDRESS MAY BE CONTACTED PERIODICALLY FOR SOLICITATION PURPOSES AND/OR WITH INFORMATION REGARDING UPCOMING EVENTS. DONORS MAY REQUEST TO BE PERMANENTLY REMOVED FROM MSV'S MAILING LIST BY CONTACTING THE MSV BY EMAIL, PHONE OR MAIL. ALL REQUESTS TO BE REMOVED FROM MSV'S MAILING LIST SHALL BE HONORED.

SCHEDULE O - ADDITIONAL INFORMATION

CONSTRUCTION ON THE TRAILS AT THE MSV CONTINUED IN FY 2020. SCHEDULED TO OPEN ON NOVEMBER 25, 2020, THIS 90-ACRE FREE ADMISSION ART PARK ON THE MSV CAMPUS WILL INCLUDE OUTDOOR ART DISPLAYS AND APPROXIMATELY THREE MILES OF TRAILS FOR WALKING, HIKING, AND BIKING.

IN FY 2020 THE MSV ACHIEVED ACCREDITATION BY THE AMERICAN ALLIANCE OF MUSEUMS (AAM), THE HIGHEST NATIONAL RECOGNITION AFFORDED THE NATION'S MUSEUMS. ALLIANCE ACCREDITATION BRINGS NATIONAL RECOGNITION TO A MUSEUM

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FOR ITS COMMITMENT TO EXCELLENCE, ACCOUNTABILITY, HIGH PROFESSIONAL
STANDARDS, AND CONTINUED INSTITUTIONAL IMPROVEMENT.

IN FY 2020, THE MSV CLOSED TO THE PUBLIC TEMPORARILY DUE TO THE
COVID-19 PANDEMIC. THE GALLERIES WERE CLOSED FROM MARCH 17, 2020 - JUNE
22, 2020. THE GARDENS REOPENED TO THE PUBLIC ON AN
ADMISSION-BY-DONATION BASIS FROM JUNE 2-19, 2020. THE MSV REOPENED ITS
GALLERIES TO THE PUBLIC ON JUNE 23, 2020. LARGE COMMUNITY EVENTS, FIELD
TRIPS, AND INDOOR EDUCATION PROGRAMS WERE CANCELLED DURING THE FOURTH
QUARTER OF THE FISCAL YEAR. THE MSV ENDED FY 2020 WITH VISITATION OF
54,522 AND 2,418 MEMBERS.

(Form 990)

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► **Attach to Form 990.**

Department of the Treasury
Internal Revenue Service

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

Name of the organization

THE GLASS-GLEN BURNIE MUSEUM, INC.

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****_***7973**

2019

Open to Public Inspection

Part I

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

[illegible]

Part II

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

[illegible]

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

SEE PART VII FOR CONTINUATIONS

Schedule R (Form 990) 2019

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) THE GLASS-GLEN BURNIE FOUNDATION	C	3,579,537.CASH	
(2)			
(3)			
(4)			
(5)			
(6)			

Part VII Supplemental Information

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

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:**NAME OF RELATED ORGANIZATION:**

THE GLASS-GLEN BURNIE FOUNDATION

PRIMARY ACTIVITY: RESTORATION AND MAINTENANCE OF HISTORIC PROPERTIES IN
WINCHESTER, VA

2019 DEPRECIATION AND AMORTIZATION REPORT

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990

[illegible]

928111 04-01-19

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Department of the Treasury
Internal Revenue Service (990)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

THE GLASS-GLEN BURNIE MUSEUM, INC.

FORM 990 PAGE 10

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Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,020,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,550,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2018 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	1,446,209.

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2019	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year	/		30 yrs.	MM	S/L	
d 40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	1,446,209.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**Section A - Depreciation and Other Information** (Caution: See the instructions for limits for passenger automobiles.)**24a** Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
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25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use **25****26** Property used more than 50% in a qualified business use:

		%						
		%						
		%						

27 Property used 50% or less in a qualified business use:

		%			S/L -			
		%			S/L -			
		%			S/L -			

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 **28****29** Add amounts in column (i), line 26. Enter here and on line 7, page 1 **29****Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle	(b) Vehicle	(c) Vehicle	(d) Vehicle	(e) Vehicle	(f) Vehicle
30 Total business/investment miles driven during the year (don't include commuting miles)						
31 Total commuting miles driven during the year						
32 Total other personal (noncommuting) miles driven						
33 Total miles driven during the year. Add lines 30 through 32						
34 Was the vehicle available for personal use during off-duty hours?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
35 Was the vehicle used primarily by a more than 5% owner or related person?						
36 Is another vehicle available for personal use?						

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
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42 Amortization of costs that begins during your 2019 tax year:

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43 Amortization of costs that began before your 2019 tax year **43****44** Total. Add amounts in column (f). See the instructions for where to report **44**