

# DEMBO•JONES

CERTIFIED PUBLIC ACCOUNTANTS & ADVISORS

July 8, 2022

Leveling the Playing Field, Inc.  
9170 Brookville Road  
Silver Spring, MD 20910

Leveling the Playing Field, Inc.:

Enclosed are the original and one copy of the 2021 Exempt Organization return, as follows...

2021 Form 990

Each original should be dated, signed and filed in accordance with the filing instructions. The copy should be retained for your files.

We have prepared the return from information you furnished us without verification. Upon examination of the return by tax authorities, requests may be made for underlying data. We therefore recommend that you preserve all records which you may be called upon to produce in connection with such possible examinations.

Please review the return for completeness and accuracy.

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions concerning the tax return.

Very truly yours,

Bert L. Swain, CPA

# TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING  
December 31, 2021

<b>Prepared for</b>	Leveling the Playing Field, Inc. 9170 Brookville Road Silver Spring, MD 20910
<b>Prepared by</b>	DEMBO JONES, P.C. 6116 EXECUTIVE BLVD, SUITE 500 NORTH BETHESDA, MD 20852
<b>Amount due or refund</b>	Not applicable
<b>Make check payable to</b>	Not applicable
<b>Mail tax return and check (if applicable) to</b>	Not applicable
<b>Return must be mailed on or before</b>	Not applicable
<b>Special Instructions</b>	This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-TE to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS. Return Form 8879-TE to us by November 15, 2022.

IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2021, or fiscal year beginning \_\_\_\_\_, 2021, and ending \_\_\_\_\_, 20\_\_

2021

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879TE for the latest information.

Name of filer

LEVELING THE PLAYING FIELD, INC.

EIN or SSN

45-2682632

Name and title of officer or person subject to tax

MAX LEVITT EXECUTIVE DIRECTOR

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, 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.

Table with 2 columns: Line number and description, and Amount. Includes rows for Form 990, Form 990-EZ, Form 1120-POL, Form 990-PF, Form 8868, Form 990-T, Form 4720, Form 5227, Form 5330, and Form 8038-CP.

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) ... and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete.

PIN: check one box only

I authorize DEMBO JONES, P.C. to enter my PIN 82632. Enter five numbers, but do not enter all zeros.

as my signature on the tax year 2021 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 or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 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.

Signature of officer or person subject to tax Max Levitt

Date 7/11/2022

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.

52693560104

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return 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 DEMBO JONES, P.C.

Date 07/08/22

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

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

Form 8879-TE (2021)

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

Department of the Treasury  
Internal Revenue Service

▶ **File a separate application for each return.**  
▶ **Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits](http://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits).

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

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

<b>Type or print</b>	Name of exempt organization or other filer, see instructions. <b>LEVELING THE PLAYING FIELD, INC.</b>	Taxpayer identification number (TIN) <b>45-2682632</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>9170 BROOKVILLE ROAD</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>SILVER SPRING, MD 20910</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

**MAX LEVITT**

• The books are in the care of ▶ **6001 MONTROSE ROAD - ROCKVILLE, MD 20852**

Telephone No. ▶ **301-801-0738**

Fax No. ▶ \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and TINs of all members the extension is for.

**1** I request an automatic 6-month extension of time until **NOVEMBER 15, 2022**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
▶  calendar year **2021** or  
▶  tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_.

**2** If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

<b>3a</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	0.
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	0.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	0.

**Caution:** If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

**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](http://www.irs.gov/Form990) for instructions and the latest information.

**A For the 2021 calendar year, or tax year beginning and ending**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>LEVELING THE PLAYING FIELD, INC.</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>9170 BROOKVILLE ROAD</b> City or town, state or province, country, and ZIP or foreign postal code <b>SILVER SPRING, MD 20910</b> <b>F</b> Name and address of principal officer: <b>MAX LEVITT</b> <b>6001 MONTROSE ROAD, ROCKVILLE, MD 20852</b>	<b>D</b> Employer identification number <b>45-2682632</b> <b>E</b> Telephone number <b>301-844-5620</b> <b>G</b> Gross receipts \$ <b>4,157,983.</b> <b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <b>WWW.LEVELINGTHEPLAYINGFIELD.ORG</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		
<b>L</b> Year of formation: <b>2011</b>		<b>M</b> State of legal domicile: <b>MD</b>

**Part I Summary**

<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>TO PROVIDE KIDS IN UNDER-RESOURCED COMMUNITIES WITH FREE SPORTS EQUIPMENT.</b>		
<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
<b>3</b>	Number of voting members of the governing body (Part VI, line 1a) .....	<b>3</b>	<b>12</b>
<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b) .....	<b>4</b>	<b>12</b>
<b>5</b>	Total number of individuals employed in calendar year 2021 (Part V, line 2a) .....	<b>5</b>	<b>7</b>
<b>6</b>	Total number of volunteers (estimate if necessary) .....	<b>6</b>	<b>704</b>
<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12 .....	<b>7a</b>	<b>0.</b>
<b>7b</b>	Net unrelated business taxable income from Form 990-T, Part I, line 11 .....	<b>7b</b>	<b>0.</b>
<b>8</b>	Contributions and grants (Part VIII, line 1h) .....	<b>Prior Year</b>	<b>Current Year</b>
<b>9</b>	Program service revenue (Part VIII, line 2g) .....	<b>1,928,289.</b>	<b>3,922,124.</b>
<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....	<b>113,705.</b>	<b>235,859.</b>
<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....	<b>0.</b>	<b>0.</b>
<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....	<b>0.</b>	<b>0.</b>
<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....	<b>2,041,994.</b>	<b>4,157,983.</b>
<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4) .....	<b>589,695.</b>	<b>2,463,184.</b>
<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .....	<b>0.</b>	<b>0.</b>
<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e) .....	<b>289,793.</b>	<b>375,510.</b>
<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>19,935.</b>	<b>0.</b>	<b>0.</b>
<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) .....	<b>1,896,084.</b>	<b>783,219.</b>
<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .....	<b>2,775,572.</b>	<b>3,621,913.</b>
<b>19</b>	Revenue less expenses. Subtract line 18 from line 12 .....	<b>-733,578.</b>	<b>536,070.</b>
<b>20</b>	Total assets (Part X, line 16) .....	<b>Beginning of Current Year</b>	<b>End of Year</b>
<b>21</b>	Total liabilities (Part X, line 26) .....	<b>1,507,307.</b>	<b>2,045,609.</b>
<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20 .....	<b>77,629.</b>	<b>79,861.</b>
<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20 .....	<b>1,429,678.</b>	<b>1,965,748.</b>

**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.

<b>Sign Here</b>	Signature of officer <b>MAX LEVITT, EXECUTIVE DIRECTOR</b> Type or print name and title	Date  			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>BERT L. SWAIN, CPA</b>	Preparer's signature <b>BERT L. SWAIN, CPA</b>	Date <b>07/08/22</b>	Check if self-employed <input type="checkbox"/>	PTIN <b>P00238304</b>
	Firm's name ▶ <b>DEMBO JONES, P.C.</b>			Firm's EIN ▶ <b>52-1073331</b>	
	Firm's address ▶ <b>6116 EXECUTIVE BLVD, SUITE 500 NORTH BETHESDA, MD 20852</b>			Phone no. ( <b>301</b> ) <b>770-5100</b>	

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:
LEVELING THE PLAYING FIELD GIVES UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY THE MENTAL AND PHYSICAL BENEFITS OF YOUTH SPORTS PARTICIPATION. WE DO THIS THROUGH THE DONATION OF USED AND EXCESS SPORTING EQUIPMENT TO PROGRAMS AND SCHOOLS SERVING LOW-INCOME

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 [X] 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 [X] No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 3,110,537. including grants of \$ 2,463,184. ) (Revenue \$ 235,859. )

COLLECTION AND DISTRIBUTION PROGRAM:
THE MAJORITY OF THE EQUIPMENT IN OUR WAREHOUSE IS A RESULT OF OUR COLLECTION PROGRAM THAT BRINGS IN DONATED SPORTING GOODS FROM INDIVIDUAL DONORS. BELOW ARE THE MAIN AVENUES THAT EQUIPMENT REACHED OUR WAREHOUSE THROUGH THE COLLECTION PROGRAM:
-EVERYDAY PEOPLE COME TO OUR WAREHOUSE TO DROP OFF EQUIPMENT FROM THEIR HOME. IT RANGES FROM A BAG OF GEAR TO A FULL SUV FULL OF EQUIPMENT.
-WE RUN COLLECTION DRIVES DURING MOST WEEKENDS IN THE FALL & SPRING. WE PARTNER WITH SPORTS LEAGUES, TOURNAMENTS, SCHOOL EVENTS, NEIGHBORHOOD EVENTS AND OTHER COMMUNITY EVENTS WHERE WE FEEL WE CAN BRING IN A LOT OF DONATED EQUIPMENT.
-WE HAVE A LARGE VOLUNTEER COLLECTION PROGRAM WHERE THE COMMUNITY RUNS

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe on Schedule O.)
(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 3,110,537.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions .....		X
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		X
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....		X
<b>5</b> 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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....		X
<b>6</b> 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? <i>If "Yes," complete Schedule D, Part I</i> .....		X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....		X
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV</i> .....		X
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> .....		X
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	X	
<b>b</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? <i>If "Yes," complete Schedule D, Part VII</i> .....		X
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII</i> .....		X
<b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX</i> .....		X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....		X
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....	X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....		X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....		X
<b>b</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? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....		X
<b>15</b> 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? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....		X
<b>16</b> 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? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....		X
<b>17</b> 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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions .....		X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....		X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	X	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 22-38. Includes questions about grants, compensation, tax-exempt bonds, excess benefit transactions, and contributions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V [ ]

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 1a, 1b, 1c. Includes questions about Form 1096, Forms W-2G, and backup withholding rules.



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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee reporting, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
<b>1b</b>	Enter the number of voting members included on line 1a, above, who are independent		
<b>2</b>	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?		X
<b>3</b>	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?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	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?		X
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	The governing body?	X	
<b>8b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	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		X

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>10b</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?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>11b</b>	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>12b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	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?		
<b>15a</b>	The organization's CEO, Executive Director, or top management official		X
<b>15b</b>	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>16b</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?		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **MD**
- 18** Section 6104 requires an organization to make its Forms 1023 (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 **MAX LEVITT - 301-801-0738**  
**6001 MONTROSE ROAD, ROCKVILLE, MD 20852**

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

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) MAX LEVITT EXECUTIVE DIRECTOR	40.00			X				79,744.	0.	1,237.
(2) TRACY SCARROW CHAIR	2.00	X		X				0.	0.	0.
(3) MATT MENASHES VICE CHAIR	2.00	X		X				0.	0.	0.
(4) WILLIE TATE TREASURER	2.00	X		X				0.	0.	0.
(5) JACLYN MAHONEY SECRETARY	2.00	X		X				0.	0.	0.
(6) DANNY CRISWELL DIRECTOR	1.00	X						0.	0.	0.
(7) GRACE FOSTER DIRECTOR	1.00	X						0.	0.	0.
(8) BRENT GURNEY DIRECTOR	1.00	X						0.	0.	0.
(9) EBONI PRESTON-LAURENT DIRECTOR	1.00	X						0.	0.	0.
(10) CHUCK SHUTTLES DIRECTOR	1.00	X						0.	0.	0.
(11) EVAN WAGHELSTEIN DIRECTOR	1.00	X						0.	0.	0.
(12) CHRISTOPHER WEINER DIRECTOR	1.00	X						0.	0.	0.
(13) DAVID SSEABROOK 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
<b>1b Subtotal</b> .....							79,744.	0.	1,237.	
<b>c Total from continuation sheets to Part VII, Section A</b> .....							0.	0.	0.	
<b>d Total (add lines 1b and 1c)</b> .....							79,744.	0.	1,237.	

**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 **0**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> .....		X
<b>4</b> 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? <i>If "Yes," complete Schedule J for such individual</i> .....		X
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> .....		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
NONE		

**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 **0**

**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	103,667.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	3,818,457.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$3,108,199.				
	<b>h Total.</b> Add lines 1a-1f			3,922,124.			
<b>Program Service Revenue</b>	<b>2 a</b> GEAR 4 GOOD	<b>Business Code</b>					
		900099	235,859.	235,859.			
	<b>b</b>						
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
<b>g Total.</b> Add lines 2a-2f			235,859.				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)						
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6 a</b> Gross rents	<b>6a</b>	(i) Real				
			(ii) Personal				
	<b>b</b> Less: rental expenses	<b>6b</b>					
	<b>c</b> Rental income or (loss)	<b>6c</b>					
	<b>d</b> Net rental income or (loss)						
	<b>7 a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities				
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses	<b>7b</b>					
	<b>c</b> Gain or (loss)	<b>7c</b>					
	<b>d</b> Net gain or (loss)						
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>						
<b>b</b> Less: direct expenses	<b>8b</b>						
<b>c</b> Net income or (loss) from fundraising events							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>						
<b>b</b> Less: direct expenses	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities							
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>						
<b>b</b> Less: cost of goods sold	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory							
<b>Miscellaneous Revenue</b>	<b>11 a</b>	<b>Business Code</b>					
	<b>b</b>						
	<b>c</b>						
	<b>d</b> All other revenue						
	<b>e Total.</b> Add lines 11a-11d						
<b>12 Total revenue.</b> See instructions			4,157,983.	235,859.	0.	0.	

**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
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,463,184.	2,463,184.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	80,981.		80,981.	
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	252,183.	252,183.		
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
<b>9</b> Other employee benefits	13,404.	13,404.		
<b>10</b> Payroll taxes	28,942.	23,134.	5,808.	
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal				
<b>c</b> Accounting	31,219.	19,469.	11,750.	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	19,935.			19,935.
<b>12</b> Advertising and promotion	30,065.	29,231.	834.	
<b>13</b> Office expenses	104,223.	104,223.		
<b>14</b> Information technology	18,038.	18,038.		
<b>15</b> Royalties				
<b>16</b> Occupancy	118,668.	98,695.	19,973.	
<b>17</b> Travel	25,516.	25,516.		
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	244.	244.		
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	9,437.		9,437.	
<b>23</b> Insurance	19,734.	12,449.	7,285.	
<b>24</b> 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.)				
<b>a</b> INVENTORY WRITE OFF/DIS	374,729.		374,729.	
<b>b</b> POSTAGE	29,726.	29,726.		
<b>c</b> OTHER	958.	958.		
<b>d</b> BANK FEES	727.	20,083.	-19,356.	
<b>e</b> All other expenses				
<b>25</b> Total functional expenses. Add lines 1 through 24e	3,621,913.	3,110,537.	491,441.	19,935.
<b>26</b> 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 Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	376,117.	<b>1</b>	600,437.
	<b>2</b> Savings and temporary cash investments .....		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>	
	<b>4</b> Accounts receivable, net .....	6,219.	<b>4</b>	25,200.
	<b>5</b> 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....	1,070,238.	<b>8</b>	1,340,524.
	<b>9</b> Prepaid expenses and deferred charges .....		<b>9</b>	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 100,250.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 26,345.	54,733.	<b>10c</b> 73,905.
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	0.	<b>15</b>	5,543.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	1,507,307.	<b>16</b>	2,045,609.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	20,429.	<b>17</b>	27,154.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....	57,200.	<b>23</b>	52,707.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> 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 .....		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	77,629.	<b>26</b>	79,861.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	1,429,678.	<b>27</b>	1,940,748.
	<b>28</b> Net assets with donor restrictions .....	0.	<b>28</b>	25,000.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	1,429,678.	<b>32</b>	1,965,748.
<b>33</b> Total liabilities and net assets/fund balances .....	1,507,307.	<b>33</b>	2,045,609.	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	4,157,983.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	3,621,913.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	536,070.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	1,429,678.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	1,965,748.

**Part XII Financial Statements and Reporting**

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

	Yes	No
<b>1</b> 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 on Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? _____ 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		X
<b>b</b> Were the organization's financial statements audited by an independent accountant? _____ 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	X	
<b>c</b> 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? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
<b>3a</b> 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
<b>b</b> 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 (2021)



**SCHEDULE A**  
**(Form 990)**

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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

Open to Public Inspection

<b>Name of the organization</b> <b>LEVELING THE PLAYING FIELD, INC.</b>	<b>Employer identification number</b> <b>45-2682632</b>
--	--

**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).)
- 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 on 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		
<b>Total</b>						

**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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	1776626.	2038037.	1992729.	1928289.	3922124.	11657805.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	1776626.	2038037.	1992729.	1928289.	3922124.	11657805.
<b>5</b> 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) .....						
<b>6 Public support.</b> Subtract line 5 from line 4.						11657805.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>7</b> Amounts from line 4 .....	1776626.	2038037.	1992729.	1928289.	3922124.	11657805.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						11657805.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	514,721.
<b>13 First 5 years.</b> 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 <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)).....	<b>14</b>	100.00 %
<b>15</b> Public support percentage from 2020 Schedule A, Part II, line 14 .....	<b>15</b>	100.00 %
<b>16a 33 1/3% support test - 2021.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2020.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2021.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2020.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> 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"/>

**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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 5 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**

<b>15</b> Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2020 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2020 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2021.** 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 - 2020.** 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 box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
<b>c</b> 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)? <i>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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> 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)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
<b>b</b> A family member of a person described on line 11a above?		
<b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .		
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
<b>2</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
<b>1</b>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>2</b> 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>3</b> By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.		
<b>1</b>		
<b>2</b>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).			
<b>2</b> Activities Test. Answer lines 2a and 2b below.		Yes	No
<b>a</b> 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 <b>Part VI</b> 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>b</b> Did the activities described on line 2a, above, 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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.			
<b>a</b> 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? If "Yes" or "No" provide details in <b>Part VI</b> .			
<b>b</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 <b>Part VI</b> the role played by the organization in this regard.			
<b>2a</b>			
<b>2b</b>			
<b>3a</b>			
<b>3b</b>			

**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	<b>Adjusted Net Income</b> (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	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (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 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> 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).		

**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	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2021		
a	From 2016		
b	From 2017		
c	From 2018		
d	From 2019		
e	From 2020		
f	<b>Total</b> of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2021 distributable amount		
i	Carryover from 2016 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2021 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2021 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	<b>Excess distributions carryover to 2022.</b> Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2017		
b	Excess from 2018		
c	Excess from 2019		
d	Excess from 2020		
e	Excess from 2021		

**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.)

Horizontal lines for supplemental information input.



**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

Open to Public Inspection

Name of the organization **LEVELING THE PLAYING FIELD, INC.** Employer identification number **45-2682632**

**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).  
 Preservation of land for public use (for example, recreation or education)  Preservation of a historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 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? .....

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)? .....

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) 2021

**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
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 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:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 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  \_\_\_\_\_ %
  - c Term endowment  \_\_\_\_\_ %
- 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:
- |  | Yes    | No |
|--|--------|----|
| (i) Unrelated organizations  | 3a(i)  |    |
| (ii) Related organizations   | 3a(ii) |    |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b     |    |
- 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				
c Leasehold improvements				
d Equipment		100,250.	26,345.	73,905.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				73,905.

**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)		
<b>Total.</b> (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)		
<b>Total.</b> (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)	
<b>Total.</b> (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.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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...

**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.

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>	4,157,983.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>		
<b>b</b>	Donated services and use of facilities	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	0.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	4,157,983.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	0.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)		<b>5</b>	4,157,983.

**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.

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>	3,621,913.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities	<b>2a</b>		
<b>b</b>	Prior year adjustments	<b>2b</b>		
<b>c</b>	Other losses	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	0.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	3,621,913.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	0.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		<b>5</b>	3,621,913.

**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 X, LINE 2:**

LPF IS EXEMPT FROM THE PAYMENT OF INCOME TAXES ON ITS EXEMPT ACTIVITIES UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. UNDER THESE PROVISIONS, NO TAX IS IMPOSED ON ANY INCOME RELATED TO LPF'S TAX-EXEMPT PURPOSE. LPF HAS DETERMINED THAT IT DOES NOT HAVE ANY MATERIAL UNRECOGNIZED TAX BENEFITS OR OBLIGATIONS AS OF DECEMBER 31, 2021 AND 2020. LPF IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS; HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS. LPF'S FEDERAL AND STATE INCOME TAX RETURNS ARE SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE AND STATE TAX AUTHORITIES, GENERALLY FOR A PERIOD OF THREE YEARS AFTER THE RETURNS ARE FILED.

**Part XIII** Supplemental Information *(continued)*

Lined area for supplemental information input.

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

Name of the organization **LEVELING THE PLAYING FIELD, INC.** Employer identification number **45-2682632**

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
BANNER NEIGHBORHOODS COMMUNITY CORPORATION - 2911 PULASKI HWY - BALTIMORE, MD 21224	52-1336621	501(C)(3)	0.	18,523.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
BEECHFIELD ELEMENTARY/MIDDLE SCHOOL - 301 SOUTH BEECHFIELD AVE - BALTIMORE, MD 21229			0.	18,688.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
CHERRY HILL ELEMENTARY/MIDDLE SCHOOL - 801 BRIDEVIEW ROAD - BALTIMORE, MD 21225			0.	9,750.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
DELTA SIGMA THETA - DC CHAPTER 707 NEW HAMPSHIRE AVE NW WASHINGTON, DC 20009	52-0215218	501(C)(7)	0.	5,200.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
ELITE SOCCER YOUTH DEVELOPMENT ACADEMY - 1234 CRESTHAVEN DR - SILVER SPRING, MD 20903	27-3273738	501(C)(3)	0.	21,783.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
FUNDACION LOS NINOS DE MARIA, INC. 12614 KILBOURNE LN BOWIE, MD 20715	27-1422066	501(C)(3)	0.	25,408.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **26.**

3 Enter total number of other organizations listed in the line 1 table **75.**

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

Schedule I (Form 990) 2021

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FURMAN TEMPLETON PREPARATORY ACADEMY - 1200 PENNSYLVANIA AVE - BALTIMORE, MD 21217			0.	9,750.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
IMPACT SILVER SPRING 8807 COLESVILLE RD SILVER SPRING, MD 20910	52-2164844	501(C)(3)	0.	69,067.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
INNER CITY EXCELLENCE (DC-ICE) 1231 GOOD HOPE RD SE WASHINGTON, DC 20020			0.	5,035.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
NORTH COUNTY HIGH SCHOOL 10 E 1ST AVE GLEN BURNIE, MD 21061			0.	6,896.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
PAPADIA UNITED SOCCER ROOTS USA 3312 SOUTH 28TH STREET, APT #102 ALEXANDRIA, VA 22302	80-0492081	501(C)(3)	0.	7,967.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
REACH! PARTNERSHIP HIGH SCHOOL 2555 HARFORD RD BALTIMORE, MD 21218			0.	6,441.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
SIMON SAYS SHOOT HOOPS NOT GUNS AFTER SCHOOL PROGRAM - 2309 NORTH LONGWOOD ST. - BALTIMORE, MD 21216			0.	22,116.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
SOUTHWEST SEMINOLES 501 S. CATHERINE ST. BALTIMORE, MD 21223			0.	49,107.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
THE VOLO CITY KIDS FOUNDATION 1215 E FORT ST. BALTIMORE, MD 21230	47-4697427	501(C)(3)	0.	14,400.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WINNERS LACROSSE 1509 16TH ST., NW WASHINGTON, DC 20036	52-2272259	501(C)(3)	0.	15,554.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
WOODLAWN HIGH SCHOOL 1801 WOODLAWN DR BALTIMORE, MD 21207			0.	24,433.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
10:12 SPORTS P.O. BOX 4392 BALTIMORE, MD 21223-9998	46-2870578	501(C)(3)	0.	19,502.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
ACADEMY FOR COLLEGE AND CAREER EXPLORATION - 1300 W 36TH ST. - BALTIMORE, MD 21211			0.	7,160.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
ALEXANDRIA SOCCER ASSOCIATION 1108 JEFFERSON ST. ALEXANDRIA, VA 22314	54-0902413	501(C)(3)	0.	8,024.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
ANACOSTIA AMP OUTREACH EMPOWERMENT CENTER - 2516 SHERIDAN RD., APT #214 - WASHINGTON, DC 20020	47-4887868	501(C)(3)	0.	5,475.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
ARGYLE MIDDLE SCHOOL 2400 BEL PRE RD SILVER SPRING, MD 20906			0.	8,744.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
ARROW CENTER FOR EDUCATION CROMWELL BRIDGE - 1605 CROMWELL BRIDGE RD - BALTIMORE, MD 21234			0.	15,576.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
BALTIMORE BENGALS 3909 WOODRIDGE RD BALTIMORE, MD 21229			0.	27,050.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT

Schedule I (Form 990)



**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BALTIMORE CITY COLLEGE HIGH SCHOOL 3220 THE ALAMEDA BALTIMORE, MD 21218			0.	8,218.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
BALTIMORE TERPS 3500 W. NORTHERN PARKWAY BALTIMORE, MD 21215			0.	9,968.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
BARD HIGH SCHOOL EARLY COLLEGE 2801 N. DUKELAND ST. BALTIMORE, MD 21216			0.	5,609.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
BENJAMIN FRANKLIN HIGH SCHOOL 1201 CAMBRIA ST. BALTIMORE, MD 21225			0.	5,959.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
BLADENSBURG HIGH SCHOOL 4200 58TH AVE BLADENSBURG, MD 20710			0.	9,236.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
BLAIR JV LACROSSE 2 PARK ST, P.O. BOX 600 BLAIRSTOWN, NJ 07825			0.	6,607.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
BLAKE HIGH SCHOOL 300 NORWOOD RD COLESVILLE, MD 20905			0.	5,649.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
C.H.FLOWERS HIGH SCHOOL 10001 ARDWICK ARDMORE RD. SPRINGDALE, MD 20774			0.	21,670.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
CECIL KIRK RECREATION CENTER 909 E. 22ND ST. BALTIMORE, MD 21218			0.	17,110.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CECIL OWLS 2000 CECILL AVE BALTIMORE, MD 21218			0.	22,420.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
CENTER CITY BRIGHTWOOD PCS 6008 GEORGIA AVE NW. WASHINGTON, DC 20011			0.	5,266.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
CENTRALCITY TIGERS TANGLEWOOD COMMUNITY PARK CLINTON, MD 20735			0.	6,350.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
CHARM CITY BUCCANEERS 1113 N. GILMOR ST. BALTIMORE, MD 21217			0.	5,922.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
CHERRY HILL EAGLES FOUNDATION 501 CHERRY HILL RD. BALTIMORE, MD 21225	47-1063964	501(C)(3)	0.	12,013.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
CITY SPRINGS ELEMENTARY/MIDDLE 100 S. CAROLINE ST. BALTIMORE, MD 21231			0.	12,975.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
CLAREMONT MIDDLE/HIGH SCHOOL 5301 ERDMAN AVE BALTIMORE, MD 21205			0.	16,369.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
COLUMBIA HEIGHTS PANTHERS 1275 1ST ST NE., 8TH FLOOR WASHINGTON, DC 20002			0.	33,290.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
CONNEXIONS A COMMUNITY BASED ARTS SCHOOL - 2801 N. DUKELAND ST. - BALTIMORE, MD 21216			0.	12,812.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DC POLICE FOUNDATION 1310 L ST. NW. WASHINGTON, DC 20005	41-2250114	501(C)(3)	0.	74,325.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
DETERMINED TO MAKE A CHANGE 5419 MOORES RUN DRIVE BALTIMORE, MD 21206	82-3856927	501(C)(3)	0.	23,825.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
DREW FREEMAN MIDDLE SCHOOL @ FORESTVILLE HS - 7001 BELTZ DR. - DISTRICT HEIGHTS, MD 20747			0.	5,525.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
EDMONDSON VILLAGE YOUTH ACADEMY JAGUARS - 501 N. ATHOL AVE - BALTIMORE, MD 21229			0.	10,430.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
FCA PARK HEIGHTS SAINTS P.O. BOX 10814 BALTIMORE, MD 21234			0.	12,022.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
FELLOWSHIP OF CHRISTIAN ATHELETES - CARROLL COUNTY - 25 UNION ST. - WESTMINSTER, MD 21157			0.	93,631.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
FORT WORTHINGTON ELEMENTARY/MIDDLE SCHOOL - 2710 E. HOFFMAN ST. - BALTIMORE, MD 21213			0.	5,161.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
FRIENDS OF CARROLL PARK 1500 WASHINGTON BLVD. BALTIMORE, MD 21230	26-0061940	501(C)(3)	0.	6,753.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
FUNDACION ASISTIENDO ESTUDIANTES D (FAEDOM) - 1441 SPRING RD NW - WASHINGTON, DC 20010			0.	55,531.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GAITHERSBURG HIGH SCHOOL 101 EDUCATION BLVD. GAITHERSBURG, MD 20877			0.	6,700.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
GAMEON!FITNESS 1406 N. ELLAMONT ST. BALTIMORE, MD 21215			0.	46,798.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
GLOBAL IMPACT SPORT INC. 10100 LAKE ARBOR WAY BOWIE, MD 20721	45-3712524	501(C)(3)	0.	14,198.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
GRACELAND PARK O'DONNELL HEIGHTS ELEMENTARY MIDDLE SCHOOL - 6300 O'DONNELL ST. - BALTIMORE, MD 21224			0.	6,500.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
GRIND HARD ENRICHMENT PROGRAM 5025 DICKEY HILL RD. BALTIMORE, MD 21207	85-3777436	501(C)(3)	0.	35,268.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
HARFORD HEIGHTS ELEMENTARY SCHOOL 1919 N. BROADWAY BALTIMORE, MD 21213			0.	11,594.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
HARLEM LACROSSE - ACCE 11300 W. 36TH ST. BALTIMORE, MD 21231			0.	5,140.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
HARLEM LACROSSE - JAMES MCHENRY 31 S. SCHROEDER ST. BALTIMORE, MD 21223			0.	8,137.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
HARMONY BASEBALL ACADEMY 12748 MARTIN RD SMITHSBURG, MD 21783	46-3776734	501(C)(3)	0.	14,695.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JACKSON ROAD ELEMENTARY SCHOOL 900 JACKSON RD. SILVER SPRING, MD 20904			0.	8,770.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
KATHERINE JOHNSON GLOBAL ACADEMY 1100 WHITMORE AVE BALTIMORE, MD 21216			0.	5,027.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
KEYS EMPOWERS, INC. 7501 LIBERTY RD BALTIMORE, MD 21207	81-2737275	501(C)(3)	0.	9,690.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
LAKELAND ELEMENTARY/MIDDLE SCHOOL 2921 STRANDEN RD. BALTIMORE, MD 21230			0.	7,325.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
LANSDOWNE HIGH SCHOOL 3800 HOLLINS FERRY RD. LANSDOWNE, MD 21227			0.	26,477.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
LAUREL LITTLE LEAGUE 7302 SPLIT RAIL LANE LAUREL, MD 20707			0.	5,079.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
LIBERTY ELEMENTARY SCHOOL 3901 MAINE AVE BALTIMORE, MD 21207			0.	7,823.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
LIFE SUCCESS CENTER FOR CHILDREN YOUTH AND FAMILIES - 615 LONGFELLOW ST. NW. - WASHINGTON, DC 20011	46-2703552	501(C)(3)	0.	10,669.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
LILLIAN JONES RECREATION CENTER 1310 N. STRICKER ST. BALTIMORE, MD 21217			0.	7,256.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOCH RAVEN HIGH SCHOOL 1212 COWPENS AVE TOWSON, MD 21286			0.	9,519.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
LUKE C MOORE SENIOR ALTERNATIVE HIGH SCHOOL - 1001 MONROE ST. NE. - WASHINGTON, DC 20017			0.	9,909.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
NORTHERN MARYLAND FCA 2806 WESLEYAN DR. CHURCHVILLE, MD 21028			0.	112,863.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
NORTHWOOD BASEBALL LEAGUE, INC. 1801 ARGONNE DR. BALTIMORE, MD 21218	52-0792337	501(C)(3)	0.	20,043.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
OLD MILL YOUTH ATHLETICS 600 PATRIOT LN MILLERSVILLE, MD 21108			0.	6,817.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
OLDTOWN GATORS COMMUNITY DEVELOPMENT CORPORATION - 1401 E. BIDDLE ST. - BALTIMORE, MD 21213	81-5389999	501(C)(3)	0.	16,659.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
OWINGS MILLS HIGH SCHOOL 124 S. TOLLGATE RD OWINGS MILLS, MD 21117			0.	6,588.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
PARKDALE HIGH SCHOOL 6001 GOOD LUCK RD. RIVERDALE, MD 20737			0.	14,470.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
PARKVILLE HIGH SCHOOL 2600 PUTTY HILL AVE BALTIMORE, MD 21234			0.	7,830.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PHELPS ACE HS 704 26TH ST. NE. WASHINGTON, DC 20002			0.	7,650.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
PIKESVILLE HIGH SCHOOL 7621 LABYRINTH RD. PIKESVILLE, MD 21208			0.	11,132.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
PLAY BALL ACADEMY 20203 GOSHEN RD GAITHERSBURG, MD 20879			0.	6,155.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
POWELL ELEMENTARY SCHOOL 1350 UPSHUR ST. NW WASHINGTON, DC 20011			0.	5,105.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
ROBERT R. GRAY ELEMENTARY SCHOOL 4949 ADDISON RD CAPITOL HEIGHTS, MD 20743			0.	5,912.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
ROCKVILLE BASEBALL ASSOCIATION 8 SUNNYMEADE CT POTOMAC, MD 20854	26-4319865	501(C)(3)	0.	12,433.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
ROGER HEIGHTS ELEMENTARY SCHOOL 4301 58TH AVE, APT #1900 BLADENSBURG, MD 20710			0.	29,272.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
ROLLING TERRACE ELEMENTARY SCHOOL 705 BAYFIELD ST. SILVER SPRING, MD 20903			0.	6,893.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
SENECA VALLEY HIGH SCHOOL 19401 CRYSTAL ROCK DR. GERMANTOWN, MD 20874			0.	6,523.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPRINGBROOK HIGH SCHOOL 201 VALLEY BROOK DR. SILVER SPRING, MD 20904			0.	8,199.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
SUDBROOK MAGNET MIDDLE SCHOOL 4300 BEDFORD RD PIKESVILLE, MD 21208			0.	5,150.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
SUMMIT HALL ELEMENTARY 101 W. DEER PARK RD. GAITHERSBURG, MD 20877			0.	7,150.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
THE AVENUE BEARS 1201 PENNSYLVANIA AVE BALTIMORE, MD 21217			0.	9,950.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
THE EMPOWERMENT ACADEMY (BALTIMORE CITY SCHOOL #262) - 851 BRADDISH AVE - BALTIMORE, MD 21216			0.	5,051.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
THE FOUNDATION SCHOOLS 1330 MCCORMICK DR LARGO, MD 20774			0.	11,615.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
TRIUMPHANT LEADERS YOUTH MENTORING PROGRAM - P.O. BOX 30124 - WASHINGTON, DC 20030			0.	7,735.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
US LACROSSE 2 LOVETON CIRCLE SPARK, MD 21152	65-1039059	501(C)(3)	0.	10,644.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
VISIONS SELECT BASEBALL 3924 KIMBLE RD BALTIMORE, MD 21218	85-1678880	501(C)(3)	0.	15,181.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT

Schedule I (Form 990)



<b>Part II</b> Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WARD 5 WARRIORS 1249 OWEN PL NE WASHINGTON, DC 20002			0.	6,239.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
WASHINGTON NATIONALS YOUTH BASEBALL ACADEMY - 3675 ELY PL SE - WASHINGTON, DC 20019	45-3990897	501(C)(3)	0.	6,335.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
WESTPORT PATRIOTS ORGANIZATION/YOUTH DEVELOPMENT - 1000 ARION PARK RD, APT #100 - BALTIMORE, MD 21229	84-3264430	501(C)(3)	0.	24,928.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
WILLIAM B GIBBS E.S. 12615 ROYAL CROWN DR. GERMANTOWN, MD 20876			0.	6,207.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT
WILLIAM WIRT MIDDLE SCHOOL - TNI 6200 TUCKERMAN ST. RIVERDALE, MD 20737			0.	8,029.	FMV	SPORT EQUIPMENT	PROVIDE UNDERPRIVILEGED CHILDREN THE OPPORTUNITY TO ENJOY ATHLETIC INVOLVEMENT

**Part III** Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

**Part IV** Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

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**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2021**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization **LEVELING THE PLAYING FIELD, INC.** Employer identification number **45-2682632**

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 .....				
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 .....				
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 ▶ ( <u>SPORTS EQUIPM</u> )	X	155,675	3,108,199.	FMV
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 V, Donee Acknowledgement ..... **29**

	Yes	No
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? .....		X
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? .....		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? .....		X
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.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2021



**SCHEDULE O  
(Form 990)**

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 Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization

LEVELING THE PLAYING FIELD, INC.

Employer identification number

45-2682632

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

COMMUNITIES.

OUR DONATIONS ALLOW PROGRAMS TO ALLOCATE FUNDS SAVED BY LOWERING  
REGISTRATION FEES, EXPANDING THEIR SCHOLARSHIP PROGRAMS, ENHANCING  
THEIR EXISTING ATHLETIC PROGRAM AND/OR DEVELOPING NEW ONES.

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

THEIR OWN DRIVES TO BENEFIT OUR MISSION. THESE OFTEN INCLUDE EAGLE  
SCOUT PROJECTS AND MITZVAH PROJECTS.

-WE HAVE BINS LOCATED THROUGHOUT THE COMMUNITY AT LOCAL PARKS, ICE  
RINKS, SPORTS GOODS STORES, FITNESS CENTERS AND OTHER VENUES.

WE ALSO RECEIVE EQUIPMENT FROM MANUFACTURERS SUCH AS UNDER ARMOUR AND  
STX. THESE ARE TYPICALLY ITEMS THE COMPANIES ARE LOOKING TO LIQUIDATE  
AND WRITE OFF. IN ADDITION TO THE MANUFACTURERS AND SOME SPORTS GOODS  
STORES LIQUIDATING TO US, WE ALSO RECEIVE EQUIPMENT FROM PROFESSIONAL  
SPORTS TEAMS AND COLLEGIATE ATHLETIC DEPARTMENTS THROUGHOUT THE YEAR.

VOLUNTEERS WORK IN THE WAREHOUSE TO COLLECT, SORT, AND INVENTORY THE  
DONATIONS. MOST OF THESE VOLUNTEERS ARE IN MIDDLE OR HIGH SCHOOL, BUT  
WE ALSO REGULARLY SEE CORPORATE GROUPS AND COLLEGE STUDENTS. IN A  
NON-COVID YEAR, WE WILL SEE ABOUT 1,000 VOLUNTEERS PER YEAR IN THE  
WAREHOUSE.

WE TYPICALLY DISTRIBUTE ABOUT \$1.5M WORTH OF EQUIPMENT TO AROUND 400  
PROGRAMS ANNUALLY. ON AVERAGE THE BREAKDOWN LOOKS LIKE 50% SCHOOLS, 35%

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

Schedule O (Form 990) 2021

132211 11-11-21

Name of the organization

LEVELING THE PLAYING FIELD, INC.

Employer identification number

45-2682632

YOUTH DEVELOPMENT/AFTER SCHOOL PROGRAMS AND 15% PURE SPORTS TEAMS AND LEAGUES. TO RECEIVE EQUIPMENT FROM US, PROGRAMS HAVE TO SUBMIT AN EQUIPMENT REQUEST FORM AND THEN CONDUCT EITHER A SITE VISIT OR INTERVIEW WITH OUR STAFF. ONCE APPROVED, WE INVITE PROGRAMS TO VISIT OUR WAREHOUSE AS MANY TIMES AS THEY NEED WITHOUT EVER HAVING TO REAPPLY. SOME PROGRAMS COME ONCE OR TWICE A YEAR AND OTHERS WE SEE LITERALLY EVERY FEW WEEKS THROUGHOUT THE YEAR.

CERTAIN SURPLUS ITEMS OR ITEMS THAT ARE NOT SIZE APPROPRIATE FOR THE KIDS WE SERVE ARE SOLD ONLINE OR DIRECTLY TO A SPORTING GOODS CONSIGNMENT STORE SUCH AS PLAY-IT-AGAIN SPORTS. WE CALL WITH THE GEAR 4 GOOD PROGRAM, HOWEVER, IT IS NOT A STANDALONE PROGRAM, IT'S ALL PART OF THE COLLECTION AND DISTRIBUTION OF SPORTS EQUIPMENT.

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

THE RETURN IS REVIEWED AND DISCUSSED AT THE FINANCE COMMITTEE LEVEL BEFORE FILING. THE COMMITTEE REPORTS TO THE FULL BOARD.

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

THE CONFLICT OF INTEREST POLICY IS CONSISTENTLY MONITORED BY THE FINANCE COMMITTEE.

FORM 990, PART VI, SECTION C, LINE 18:

FORM 990 IS AVAILABLE ON GUIDESTAR AND LPF'S WEBSITE, AS WELL AS OTHERS.

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

AVAILABLE UPON REQUEST

Name of the organization

LEVELING THE PLAYING FIELD, INC.

Employer identification number

45-2682632

PART XII, LINE 2C

THE PROCESS HAS NOT CHANGED.

Multiple horizontal lines for additional text input.