Forms 990 / 990-EZ Return Summary

For calendar year 2024, or tax year beginning 07/01/24 , and ending 06/30/25

52-1850874

AVALON FOUNDATION, INC.

Net Asset / Fund Balance at Begin	ning of Year			5,791,221
Revenue				
Contributions		85,452		
Program service revenue		91,211		
Investment income	1	97,183		
Capital gain / loss				
Fundraising / Gaming:				
Gross revenue				
Direct expenses				
Net income				
Other income		2,230		
Total revenue			3,276,076	
Expenses				
Program services		87 , 334		
Management and general	3	60,781		
Fundraising	2	43,720		
Total expenses			3,291,835	
Excess / (deficit)				
Changes				
Net Asset / Fund Ba	alance at End of Year			5,775,462
Reconciliation of R Total revenue per financial statements Less:	evenue 3,276,076	Total exper Less:	Reconciliation of nses per financial statemen	
Unrealized gains		Donate	ed services	
Donated services		Prior ye	ear adjustments	
Recoveries		Losses		
Other		Other		
Plus:	_	Plus:		
Investment expenses		Investm	nent expenses	
Other		Other		
Total revenue per return	3,276,076	To	tal expenses per return	3,291,835
		Balance Sheet		
	Beginning	Ending	Differences	
Assets	6,732,573	6,936,06		
Liabilities	941,352	1,160,60		
Net assets	5,791,221	5,775,46		759
	Miscellaneous Ir	nformation		
	Amended return Return / extended due date	05/15/2	2 <u>6</u>	
	Failure to file penalty _		~ ~ ~	+ ()
			Cilen	t Copy

Kullman CPA, LLC 888 Bestgate Road, Suite 316 Annapolis, MD 21401 410-266-9885

November 12, 2025

CONFIDENTIAL

Avalon Foundation, Inc. 40 East Dover St. Easton, MD 21601

Dear Al:

We have prepared the following returns from information provided by you without verification or audit.

Return of Organization Exempt From Income Tax (Form 990)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

Kullman CPA, LLC



Filing Instructions

Avalon Foundation, Inc.

Exempt Organization Tax Return

Taxable Year Ended June 30, 2025

Date Due: May 15, 2026

Remittance: None is required. Your Form 990 for the tax year ended 6/30/25 shows no

balance due.

Signature: You are using a Personal Identification Number (PIN) for signing your return

electronically. Form 8879-TE, IRS e-file Signature Authorization for an Exempt

Organization should be signed and dated by an authorized officer of the

organization and returned to:

Kullman CPA, LLC

888 Bestgate Road, Suite 316 Annapolis, MD 21401

Important: Your return will not be filed with the IRS until the signed Form

8879-TE has been received by this office.

Other: Your return is being filed electronically with the IRS and is not required to be

mailed. If you Mail a paper copy of your return to the IRS it will delay the

processing of your return.



Form

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.

OMB No. 1545-0047 2024 Open to Public

Depa	artment of	the Treasury ue Service		-	s on this form as it may be estructions and the latest	-		Open to Public Inspection
			•	7/01/24 , an				mopodion
	Check if a	a 11	of organization	, , , , , , , , , , , , , , , , , , , ,			D Employer	identification number
П	Address cl	• •	AVALON FO	JNDATION, IN	c.			
Ħ	Name cha	Doing	business as	•			52-18	850874
님		Numbe	er and street (or P.O. box if mail is not delivered	d to street address)		Room/suite	E Telephone	
닏	Initial retur		EAST DOVER ST.				410-8	822-0345
\bigsqcup	Final return terminated		r town, state or province, country, and ZIP or fo					
	Amended	roturn	STON	MD 21601			G Gross rece	eipts \$ 3,276,076
Ħ	Application	r Name	and address of principal officer:			H(a) Is this a gro	oup return for su	ubordinates? Yes X No
Ш	Арріісаціон	· • .	LL WITOWSKY				•	7. 7.
			EAST DOVER ST.	.c. 01.6	.01	H(b) Are all sub		
_			STON	MD 216		II NO,	allacii a iisi. S	See instructions
				sert no.) 494	7(a)(1) or 527	_		
J	Website:		VALONTHEATRE.COM	–		H(c) Group exer		
	Porm of c		Corporation Trust Association	Other	L	Year of formation: 1	993	M State of legal domicile: MD
	T	Summar	•	::f:				
		•	he organization's mission or most s	ŭ		e amprended	י שנים	CII
၁င			DATION INSPIRES, ENRI					Сп
Governance			JCATIONAL, AND CULTUR			HISTORIC A	AVALON	
ě	:		AND THROUGHOUT MARYLA					
တိ	2 (<u> </u>	if the organization discontinued		oosed of more than 25%	of its net assets.	ایا	0
త	1	•	members of the governing body (P				3	<u>8</u> 8
Activities	4 1	Number of indepe	endent voting members of the gover	ning body (Part VI, I	ine 1b)		4	15
ξį	5 7		ndividuals employed in calendar year	ir 2024 (Part V, line	2a)			261
Ą	6		volunteers (estimate if necessary)				6	0
			usiness revenue from Part VIII, colu					0
	1 0 1	Net unrelated bus	siness taxable income from Form 99	0-1, Part I, line 11 .		Prior Yea		Current Year
	8 (Contributions and	grants (Part VIII, line 1h)				4,991	1,185,452
ne	9 F	Program service	revenue (Part VIII, line 2g)				5,185	1,891,211
Revenue	10 1	nvestment incom	ne (Part VIII, column (A), lines 3, 4,	and 7d)			5,517	197,183
æ	11 (Other revenue (P	art VIII, column (A), lines 5, 6d, 8c,	9c 10c and 11e)			1,009	2,230
	1		add lines 8 through 11 (must equal F			3,130	6,702	3,276,076
			ar amounts paid (Part IX, column (A	\ lines 4 0\			.,	0
			or for members (Part IX, column (A),		0			
	15 9	Salaries, other co	ompensation, employee benefits (Pa	rt IX. column (A). lin	es 5–10)	1,000	0,507	1,149,202
ses	16a F		raising fees (Part IX, column (A), lir				,	0
Expen	. b ī		expenses (Part IX, column (D), line		243,720			
Ж	17 (Other expenses ((Part IX, column (A), lines 11a-11d,	11f–24e)		1,962	2,031	2,142,633
	18 7	Total expenses. <i>A</i>	Add lines 13–17 (must equal Part IX	, column (A), line 25	······································		2,538	3,291,835
			penses. Subtract line 18 from line 1				4,164	-15,759
JO S	S					Beginning of Cur		End of Year
Net Assets or	20 T	Total assets (Part	t X, line 16)				2,573	6,936,066
A As	21 7	Total liabilities (Pa	V II 00\				1,352	1,160,604
			d balances. Subtract line 21 from lin	ıe 20		5,793	1,221	5,775,462
F	Part II	Signatur	e Block					
			declare that I have examined this return,		•		my knowled	ge and belief, it is
tr	ue, corre	ct, and complete. L	Declaration of preparer (other than office	r) is based on all inform	nation of which preparer ha	s any knowledge.	1	
Si	-	Signature of officer					Date	
He	ere	BILL WI			CHAIR			
_		Type or print name a	and title	T-				
		Preparer's name		Preparer's signature		Date	Check	if PTIN
Pai		STEPHEN J. K	-	STEPHEN J. KUL	LMAN, CPA	11/12	/25 self-emp	
	eparer	Firm's name	<u>-</u>	LC		F	irm's EIN	27-4760605
US	e Only		888 BESTGATE R		316	11:	4	
		Firm's address	ANNAPOLIS, MD	21401		1101	hone no.	410-266-9885
Ma	y the IR	S discuss this re-	turn with the preparer shown above	? See instructions		11011		X Yes No

	Check if Schodule O contains a reappres or note to any line in this Bort III	X
_	Check if Schedule O contains a response or note to any line in this Part III	
•	THE FOUNDATION INSPIRES, ENRICHES, AND CONNECTS DIVERSE AUDIENCES	ਜਸ∆ਪਾ ਰਜ
	ARTS, EDUCATIONAL, AND CULTURAL EXPERIENCES INSIDE THE HISTORIC A	
	THEATRE AND THROUGHOUT MARYLAND'S EASTERN SHORE.	VALION
	THEATRE AND THROUGHOUT MARTHAND & EASTERN BROKE.	
2	2. Did the ergenization undertake any significant program convises during the year which were not listed on the	
2	5 5 9 90 90 570	Yes X No
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	res _A No
•		
3		Yes X No
	services?	Tes A No
	If "Yes," describe these changes on Schedule O.	
4		
	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.	
	45 (O. I	,364,777
	THE FOUNDATION INSPIRES, ENRICHES, AND CONNECTS DIVERSE AUDIENCES T	
	ARTS, EDUCATIONAL, AND CULTURAL EXPERIENCES INSIDE THE HISTORIC AVA	LON
	THEATRE AND THROUGHOUT MARYLAND'S EASTERN SHORE.	
	•	
	•	
	••••••	
	••••••	
	•	
	4b (Code:) (Expenses \$ 740,451 including grants of \$) (Revenue \$	526,434)
7	THE FOUNDATION PRODUCES AND PROMOTES OUTDOOR ART EVENTS, SUCH AS TH	E
(OUTDOOR SUMMER CONCERT SERIES, THE EASTON FARMERS' MARKET, THE TALE	OT
(COUNTY MULTICULTURAL FESTIVAL, AND PLEIN AIR EASTON, THE NATION'S I	ARGEST
(OUTDOOR PAINTING COMPETITION. THE FOUNDATION RECEIVES MAJOR SUPPORT	FROM
7	THE TOWN OF EASTON, AS WELL AS MANY LOCAL BUSINESSES AND INDIVIDUAL	s.
	•••••••••••••••••••••••••••••••••••••••	
	• • • • • • • • • • • • • • • • • • • •	
	••••••	
40	4c (Code:) (Expenses \$ 323,780 including grants of \$) (Revenue \$	<u> </u>
	4c (Code:) (Expenses \$ 323,780 including grants of \$) (Revenue \$ THE FOUNDATION STRIVES TO SERVE AND EDUCATE THE YOUTH IN ITS COMMUN	(ITY.
7	THE FOUNDATION STRIVES TO SERVE AND EDUCATE THE YOUTH IN ITS COMMUN	
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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	_		37
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			v
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
_	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	440	х	
h	complete Schedule D, Part VI	11a		
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more	11b		х
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	110		
C	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more	11c		х
d	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	110		21
u	reported in Part V. line 162 If "Vee." complete Schedule D. Part IV	11d		х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	-110		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete	···		
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
-	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	N	/	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

•	onestine of Required Seriodates (continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	. 23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			37
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	. 24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
4	to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
d 25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	. 240		
ZJa	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	. <u>23a</u>		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Vos " complete Schodule I Port I	25b		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	.		
_0	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule	•		
	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	. 33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	. 35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	. 35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			v
0.7	related organization? If "Yes," complete Schedule R, Part V, line 2	. 36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		v
20	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	. 37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	20	x	
D:	19? Note: All Form 990 filers are required to complete Schedule O. art V Statements Regarding Other IRS Filings and Tax Compliance	. 38	_ A	<u> </u>
Г	Check if Schedule O contains a response or note to any line in this Part V			
_	Chook is Concodic C contains a response of note to any line in this fact v	<u> </u>	Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		103	1.0
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1a 140 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	TOY	7	
	reportable gaming (gambling) winnings to prize winners?	1c	Y	

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (continu	ed)			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	15			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
3a				3a		_X_
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O $_{\cdot}$			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authors.					
	a financial account in a foreign country (such as a bank account, securities account, or other financial ac	count)	?	4a		<u> </u>
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial According to the control of					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \dots			5a		<u>X</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	?		5b		<u> </u>
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					v
				6a		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions of	or				
-				6b		
7	Organizations that may receive deductible contributions under section 170(c).	ام				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good and services provided to the payor?			70		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7a 7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			75		
C	required to file Form 8282?			7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contri			7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by					
	sponsoring organization have excess business holdings at any time during the year?			8		X
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		_		
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a		_		
b	Gross income from other sources. (Do not net amounts due or paid to other sources					
	against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	1		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			420		
а	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which					
b	the organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand			-		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	.00		14a		x
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration					
	excess parachute payment(s) during the year?			15		X
	If "Yes," see instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment inc	ome?		16		<u> </u>
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person, engage in any activities					
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?			17	_	
	If "Yes," complete Form 6069.	16		DI	/	
				For	m 990	J (2024)

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.

Sec	tion A. Governing Body and Management					
566	tion A. Governing body and management				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	8		100	
	If there are material differences in voting rights among members of the governing body, or					
	if the governing body delegated broad authority to an executive committee or similar					
	committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	8			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					
	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors, trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6	Did the organization have members or stockholders?			6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					
	one or more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
	stockholders, or persons other than the governing body?			7b		_X_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year b					
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		<u> </u>
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Inter	nal R	evenue Co	de.)		
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		_X_
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	form?		11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	conflic	ts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe on Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approval by					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b		<u> </u>
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
	with a taxable entity during the year?			16a		<u> </u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its					
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?			16b		
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed MD					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 6104 or 1024-A, if applicable), 990-T (section 6104 or 1024-A, i	n 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website X 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.					

ALEXANDER BOND

40 EAST DOVER ST.

State the name, address, and telephone number of the person who possesses the organization's books and records.

MD 21601

410-822-0345

EASTON

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	Form 990 (2024)	AVALON	FOUNDATION,	INC.
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of 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.

 <u>See</u> the instructions for the order in which to list the persons above.

[X] 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	bo	(c) Position (do not check more than one box, unless person is both a officer and a director/trustee					(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) BILL WITOWSKY										
	1.50									
CHAIR	0.00	X		X				0	0	0
(2) GERRI LEDER										
	1.50									
VICE-CHAIR	0.00	X		X				0	0	0
(3) CAROL SLEEPER										
	1.50									
SECRETARY	0.00	х		X				0	0	0
(4) ABIGAIL ROSENFEL	D									
	1.50									
TREASURER	0.00	x		x				0	0	0
(5) STEVE FORD										
•	1.50									
TRUSTEE	0.00	х						0	0	0
(6) JOHN HASENBERG									-	
	1.50									
TRUSTEE	0.00	х						0	0	0
(7) KENTAVIUS JONES										
(.)	1.50									
TRUSTEE	0.00	x						0	0	0
(8) BILL VOORHEES						\vdash				
(8) 2 2 2 1 3 3 1 2 2 2	1.50									
TRUSTEE	0.00	x						0	0	0
(9) ALEXANDER BOND	0.00									
(9) ALIDAMADER DONE	40.00									
EXEC. DIRECTOR	0.00				х			151,494	0	13,635
(10)	0.00							131,474	<u> </u>	13,033
(10)										
(11)						$\vdash \vdash$				
(11)										4
									liont (01017
	<u> </u>	<u> </u>	<u> </u>							- 2000

(A) Name and title		(B) Average hours per week	(c	do not ox, unl	Pos check ess pe	C) sition more erson i	than o	ne an	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amou of other compensation		amount ier	
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	org	from ganizati	he	s
(12)														
(13)														
(14)														
(15)														
(16)														
(17)														
(18)														
(19)														
1b	Subtotal								151,494				13,	635
c d	Total from continuation shee Total (add lines 1b and 1c)	•							151,494				13,	635
2	Total number of individuals (increportable compensation from	cluding but not lin							who received more than \$1	00,000 of				
3	Did the organization list any for		otor	truct	.oo l	(0)/ (omole	21/00	or highest componented				Yes	No
	employee on line 1a? If "Yes,"	complete Schedu	ıle J	for s	such	indiv	ridual	·				3		х
4	For any individual listed on line organization and related organ	izations greater t	han	\$150	,000	? If '	'Yes,	" cor	mplete Schedule J for such				37	
5	individual	a receive or accr	ue c	ompe	 ensat	 tion f	from	 any	unrelated organization or inc	dividual		4	X	
Soci	for services rendered to the ori ion B. Independent Contracto		es," c	omp	lete 3	Sche	dule	J fo	r such person		<u></u>	5		Х
1	Complete this table for your fiv	e highest compe												
	compensation from the organiz	cation. Report cor (A) I business address	npen	satio	n for	the	cale	ndar 		the organization's tax year. (B) lion of services		Co	(C) mpensat	ion
	name and	Dusiness address							Descrip	ion of services			препза	1011
										liant (101) T	7	
	Total number of independent of	ontractore (includ	ina k	out n	ot lin	nitod	to th	0000	listed above) who	TICHT (-4	4	_	

received more than \$100,000 of compensation from the organization

Form 990 (2024) AVALON FOUNDATION, INC.

Pa	ITT V	Check if Schedule		ins a	respor	nse or note	to any line in this	Part VIII		
					•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ξ, ö	1a	Federated campaigns		1a						
ran	b	Membership dues		1b						
۾ ج	c	Fundraising events		1c						
ifts ar A	d	Related organizations		1d						
ું. છે.≌	e	C		1e		317,943				
Contributions, Gifts, Grants, and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above		1f		867,509				
들	g	Noncash contributions included in		4	Φ					
<u>a</u> <u>a</u>	١.	lines 1a-1f					1,185,452			
<u>0 8</u>	n	Total. Add lines 1a-1f					1,105,452			
	30	DDOGDAN GEDVICE DEV				Business Code	1,891,211	1,891,211		
/ice	2a	PROGRAM SERVICE REVI					1,091,211	1,091,211		
Program Service Revenue	b	• • • • • • • • • • • • • • • • • • • •								
E Sen	ا د									
Res	d									
Pr	e f	All other program service rev								
	l	1 0					1,891,211			
	3	Total. Add lines 2a–2f Investment income (including					1,031,211	1		
	້	-th			•		197,183	197,183		
	4	Income from investment of ta					1377103	1377103		
	5	Royalties	•			····				
	້	Noyanics	(i) Real	· · · · · · · · · · · · · · · · · · ·		Personal				
	62	Gross rents 6a	(7)		()					
	b	Less: rental expenses 6b								
	C									
	d									
		7a Gross amount from (i) Securities				i) Other				
		sales of assets other than inventory 7a	()		,	,				
ø	l b	Less: cost or other								
Revenue	_	basis and sales exps. 7b								
ě	c	Gain or (loss) 7c								
ř	l									
Other		Gross income from fundraising ev								
J		(not including \$								
		of contributions reported on line								
		1c). See Part IV, line 18		8a						
	b	Less: direct expenses		8b						
	С	Net income or (loss) from fur		ents .						
	9a	Gross income from gaming								
		activities. See Part IV, line 19)	9a						
	b	Less: direct expenses		9b						
	С	Net income or (loss) from ga	ming activit	ies						
	10a	Gross sales of inventory, less	6							
		returns and allowances		10a						
	b	Less: cost of goods sold		10b						
		Net income or (loss) from sal		tory						
s						Business Code				
e son	11a	OTHER INCOME					2,230	2,230		
lane	b									
Miscellaneous Revenue	С									
Ĕ	d	All other revenue								
	•	Total. Add lines 11a-11d					2,230		40	10 1 1
	12	Total revenue See instruction	one			I	3 - 276 - 076	2.090.624		1 T 3 7 0

Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must con Check if Schedule O contains a respor	•		ete column (A).	
		(A)	(B)	(C)	(D)
	ot include amounts reported on lines 6b, 7b, lb, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		одрогиесь	gonoral expenses	Сиропосс
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
_	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	155,094	77,547	31,019	46,528
6	Compensation not included above to disqualified		, -		. ,
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	802,793	618,549	63,333	120,911
8	Pension plan accruals and contributions (include	002,770	0_0,0_0	30,000	
	section 401(k) and 403(b) employer contributions)	24,897	18,092	2,453	4,352
9	Other employee benefits	93,545	67,979	9,214	16,352
10	Povroll toxoc	72,873	52,957	7,178	12,738
11	Fees for services (nonemployees):	,	0_//01	.,	
a	Management				
b	Land				
c	Accounting	46,099		46,099	
d	Lobbying	10,000		10,000	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	4,316			4,316
g g	Other. (If line 11g amount exceeds 10% of line 25, column	-,			
9	(A), amount, list line 11g expenses on Schedule O.)	45,925	20,709	24,495	721
12	Advertising and promotion	82,668		82,668	,
13	Office expenses	138,353	109,722	22,048	6,583
14	Information technology				3,333
15	Royalties				
16	Occupancy	82,320	69,206	10,134	2,980
17	Transal		,		_,
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	14,030	11,795	1,727	508
21	Payments to affiliates		,		
22	Depreciation, depletion, and amortization	329,915	277,360	40,612	11,943
23	Incurance	38,923	32,723	4,791	1,409
24	Other expenses. Itemize expenses not covered	, ,	- , -	, -	,
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	ARTIST FEES	650,348	649,348		1,000
b	PRODUCTION	319,787	291,436	14,986	13,365
C	ART SALES EXPENSE	319,581	319,581	,	.,
d	CONCESSION EXPENSES	70,368	70,330	24	14
e	All other expenses	.,	,		
25	Total functional expenses. Add lines 1 through 24e	3,291,835	2,687,334	360,781	243,720
26	Joint costs. Complete this line only if the		•	•	•
	organization reported in column (B) joint costs			1.	
	from a combined educational campaign and fundraising solicitation. Check here if			lient (Onv
	following SOP 98-2 (ASC 958-720)				VUPY
544					

	Check if Schedule O contains a response or note to a	,		(A)	T	(B)
				Beginning of year		End of year
1	Cash—non-interest-bearing			463,520	1	824,396
2	Savings and temporary cash investments	689,011	2	696,421		
3	Pledges and grants receivable, net			100,000	3	100,000
4	Accounts receivable, net			3,341	4	8,259
5	Loans and other receivables from any current or former off			_		
	trustee, key employee, creator or founder, substantial contr					
	controlled entity or family member of any of these persons				5	
6	Loans and other receivables from other disqualified persons					
,	under section 4958(f)(1)), and persons described in section				6	
7					7	
8 5	Inventories for sale or use				8	
9	Prepaid expenses and deferred charges			84,247	9	48,692
10	Land, buildings, and equipment: cost or other	· · · · ·] · · ·		•		•
	basis. Complete Part VI of Schedule D	10a	5,226,530			
6	Less: accumulated depreciation	10b	2,212,804	3,035,770	10c	3,013,726
11	Investments—publicly traded securities			2,316,055	11	2,056,214
12	Investments—other securities. See Part IV, line 11			, ,	12	, ,
13	Investments—program-related. See Part IV, line 11				13	
14	Intangible assets			40,629	14	52,548
15	Other assets. See Part IV, line 11			. ,	15	135,810
16	Total assets. Add lines 1 through 15 (must equal line 33) .			6,732,573	16	6,936,066
17	Accounts payable and accrued expenses	117,056	17	290,908		
18	Grants payable		•	18	-	
19	Deferred revenue		184,552	19	183,975	
20	Tax-exempt bond liabilities			•	20	-
21	Escrow or custodial account liability. Complete Part IV of So	chedule [· · · · · · · · · · · · · · · · · · ·		21	
, 22						
	trustee, key employee, creator or founder, substantial contr		35%			
	controlled entity or family member of any of these persons				22	
i ₂₃				633,685	23	611,552
24	Unsecured notes and loans payable to unrelated third partic				24	
25	Other liabilities (including federal income tax, payables to re					
	parties, and other liabilities not included on lines 17-24). Co	mplete P	art X			
	of Schedule D			6,059	25	74,169
26				941,352	26	1,160,604
	Organizations that follow FASB ASC 958, check here					
3	and complete lines 27, 28, 32, and 33.					
27	Net assets without donor restrictions			4,772,512	27	4,857,185
27 28		1,018,709	28	918,277		
	Organizations that do not follow FASB ASC 958, check	k here	<u> </u>			
2	and complete lines 29 through 33.	•	_			
29	Operital attack on twent university of the experiment formula				29	
30	Paid-in or capital surplus, or land, building, or equipment fu				30	
30 31	Retained earnings, endowment, accumulated income, or of				31	
32				5,791,221	32	5,775,462
33	Total liabilities and net assets/fund balances			6,732,573	33	6,936,066

Form **990** (2024)



Pa	art XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	3,2		
2	Total expenses (must equal Part IX, column (A), line 25)	3,2		
3	Revenue less expenses. Subtract line 2 from line 1		15,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	5 , 7	91,2	221
5	Net unrealized gains (losses) on investments 5			
6	Donated services and use of facilities 6			
7	Investment expenses 7			
8	Prior period adjustments 8			
9	Other changes in net assets or fund balances (explain on Schedule O)			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B)) 10	5 , 7	75,4	<u> 162</u>
Pa	art XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			$oxedsymbol{oxed}$
			Yes	No
1	Accounting method used to prepare the Form 990:	_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both.			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
	separate basis, consolidated basis, or both.			
	X Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on			
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		X
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	3b		

Form **990** (2024)



SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

2024

Open to Public Inspection

AVALON FOUNDATION, INC.

52-1850874

Pa	art I	Reas	on for Public Charity	Status. (All organizations	must co	omplete	this part.) See instruction	IS.		
				it is: (For lines 1 through 12, che		•	,			
1	Ĭ		•	ciation of churches described in	•	,	A)(i).			
2	H		scribed in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)							
3	H			e organization described in secti		V1V				
4	Н	•	·	in conjunction with a hospital des	•			ital'e name		
7	ш			in conjunction with a nospital dec	scribca iii	30001011	Troub)(T)(A)(III). Effect the flosp	ital 3 Hame,		
_		city, and state		a college or university overall or			arramantal unit danarihad in			
5	Ш			a college or university owned or	operated	by a gove	emmental unit described in			
_			(b)(1)(A)(iv). (Complete Part	•	470	/L-\/4\/ A\/.	a			
6	Н		•	vernmental unit described in sec						
7		-	on that normally receives a staction 170(b)(1)(A)(vi). (Co	ubstantial part of its support from emplete Part II.)	a govern	mentai un	it or from the general public			
8	Ш	A community	trust described in section 1	70(b)(1)(A)(vi). (Complete Part II	.)					
9		An agricultura	al research organization desc	ribed in section 170(b)(1)(A)(ix)	operated	in conjur	action with a land-grant college			
		or university of university:	or a non-land-grant college of	agriculture (see instructions). En	ter the na	me, city,	and state of the college or			
10	X			more than 33 1/3% of its support						
				t functions, subject to certain exc						
		• • •	•	unrelated business taxable inco			11 tax) from businesses			
44			•	1975. See section 509(a)(2). (a)/4)			
11	Н	-	•	clusively to test for public safety.			• • •	- 4		
12	Ш	-		cclusively for the benefit of, to per ons described in section 509(a)						
				cribes the type of supporting orga	-	•		HECK		
	а		•	rated, supervised, or controlled by						
	u			er to regularly appoint or elect a r			,,			
			• ,, ,	mplete Part IV, Sections A and						
	b	` `		ervised or controlled in connection		supporte	d organization(s), by having			
				ng organization vested in the sar			• ,, •			
			ion(s). You must complete I	-	•		· · · ·			
	С	Type III 1	functionally integrated. A su	upporting organization operated in	n connect	ion with, a	and functionally integrated with,			
		its suppo	rted organization(s) (see inst	ructions). You must complete P	art IV, Se	ctions A	D, and E.			
	d		, ,	 A supporting organization opera 			•)		
				organization generally must satis	-					
		_ :	,	ust complete Part IV, Sections		•				
	е			ived a written determination from -functionally integrated supporting			Type I, Type II, Type III			
	f		nber of supported organizatio	, , , , , ,	y organiza	auon.				
	t g		ollowing information about the							
<i>'</i> :			ı		(iv) Ic tho	organization	(a) Amount of manatan.	(vi) Amount of		
(I		e of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1–10		ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see		
				above (see instructions))	docui	ment?	instructions)	instructions)		
					Yes	No				
(A)										
(B)										
(C)										
` '										
(D)										
` '										
(E)										
` -,										
Tota							\sim 11.	4		

Page 2

Pa	Support Schedule for C (Complete only if you che Part III. If the organization	cked the box or	n line 5, 7, or 8	of Part I or if the	he organization	failed to qualif	
Sec	tion A. Public Support	· · · · · · · · · · · · · · · · · · ·		,			
	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
_	shown on line 11, column (f)						
<u>6</u>	Public support. Subtract line 5 from line 4 tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7	American frame line 4	(a) 2020	(b) 2021	(6) 2022	(u) 2023	(e) 2024	(I) Total
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	(see instructions)				12	
13	First 5 years. If the Form 990 is for the or	ganization's first, se	econd, third, fourth,	or fifth tax year as	a section 501(c)(3)		_
	organization, check this box and stop here						
Sec	tion C. Computation of Public S						T
14	Public support percentage for 2024 (line 6,	column (f), divided	by line 11, column	n (f))		14	%
15	Public support percentage from 2023 Sche	dule A, Part II, line	14			15_	%
16a	33 1/3% support test — 2024. If the orga						_
	box and stop here. The organization quali						L
b	33 1/3% support test — 2023. If the orga				5 is 33 1/3% or mo	re, check	
	this box and stop here. The organization of						L
17a	10%-facts-and-circumstances test — 20 10% or more, and if the organization meet Part VI how the organization meets the factorganization	s the facts-and-circonstance	umstances test, ches test. The organ	eck this box and st ization qualifies as	op here. Explain in a publicly supported	n d	Г
b	10%-facts-and-circumstances test — 2 15 is 10% or more, and if the organization in Part VI how the organization meets the	023. If the organization meets the facts-an	tion did not check a d-circumstances te	a box on line 13, 16 st, check this box a	a, 16b, or 17a, and and stop here. Exp	l line Ilain	
18	organization Private foundation. If the organization did						L

Client Copy

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.)

Sec	tion A. Public Support		<u> </u>	5.511, p.54.55		<u>' </u>	
	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and membership fees		` ,	` '	,	,	
	received. (Do not include any "unusual grants.")	2,023,618	1,717,195	1,697,973	1,114,991	1,185,452	7,739,229
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	564,893	1,160,153	1,526,410	1,612,095	1,891,211	6,754,762
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	2,588,511	2,877,348	3,224,383	2,727,086	3,076,663	14,493,991
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	341,206	228,760	280,014	249,729	180,687	1,280,396
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						
С	Add lines 7a and 7b	341,206	228,760	280,014	249,729	180,687	1,280,396
8	Public support. (Subtract line 7c from line 6.)						13,213,595
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9	Amounts from line 6	2,588,511	2,877,348	3,224,383	2,727,086	3,076,663	14,493,991
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	479		14,106	84,575	96,515	195,675
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	479		14,106	84,575	96,515	195,675
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	2,588,990	2,877,348	3,238,489	2,811,661	3,173,178	14,689,666
14	First 5 years. If the Form 990 is for the or						
500	organization, check this box and stop here	Innort Parcente					
	tion C. Computation of Public Su			(0)		45	22.25.0/
15 16	Public support percentage for 2024 (line 8,						89.95 %
16 Sec	Public support percentage from 2023 Scherotion D. Computation of Investme					16	88.12 %
17	Investment income percentage for 2024 (lin			column (f))		17	1%
18	Investment income percentage for 2024 (iii		l line 17			40	1%
19a	33 1/3% support tests — 2024. If the organization						<u> </u>
_	17 is not more than 33 1/3%, check this bo	x and stop here. Th	ne organization qua	alifies as a publicly s	supported organiza	tion	X
b	33 1/3% support tests — 2023. If the organized their and						
20	line 18 is not more than 33 1/3%, check this						
20	Private foundation. If the organization did	not check a box on	ime 14, 19a, or 19	D, CHECK THIS DOX AR	iu see instructions	F	7.T.7

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	2-		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	_		
	9a		
	9b		
	ฮม		
	9с		
	10a		
	10b	A 755 T	990) 2024
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Schedul	e A (Form 990) 2024 AVALON FOUNDATION, INC. 52-185	0874		Page 5
Part	t IV Supporting Organizations (continued)			T
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and	44-		
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c		
Section	on B. Type I Supporting Organizations	110		<u> </u>
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			110
	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 Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove 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.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			T
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI			
_	how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		3		
Section	supported organizations played in this regard. on E. Type III Functionally Integrated Supporting Organizations			<u> </u>
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	ns)		
' a	The organization satisfied the Activities Test. Complete line 2 below.	15).		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	structions).		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to each of its supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
D	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would	2b		
	have engaged in these activities but for the organization's involvement.			
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	3a		
L	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	Ja		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

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

Schedule	Δ	(Form	990)	2024



5

5 Income tax imposed in prior year

(see instructions).

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

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

emergency temporary reduction (see instructions).

Schedu	chedule A (Form 990) 2024 AVALON FOUNDATION, INC. 52-18508							
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)								
Sect	ion D – Distributions				Current Year			
1	1 Amounts paid to supported organizations to accomplish exempt purposes 1							
2	Amounts paid to perform activity that directly furthers exempt purposes of	of supported						
	organizations, in excess of income from activity			2				
3	3 Administrative expenses paid to accomplish exempt purposes of supported organizations 3							
4	4 Amounts paid to acquire exempt-use assets 4							
5	Qualified set-aside amounts (prior IRS approval required—provide details	s in Part VI)		5				
6	Other distributions (describe in Part VI). See instructions.			6				
7	Total annual distributions. Add lines 1 through 6.			7				
8	Distributions to attentive supported organizations to which the organization	on is responsive						
	(provide details in Part VI). See instructions.			8				
9 Distributable amount for 2024 from Section C, line 6 9								
10	Line 8 amount divided by line 9 amount			10				
		(i)	(ii)		(iii)			
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	s	Distributable			
	Pre-2024							

Section E – Distribution Allocations (see instructions)	Excess Distributions	(II) Underdistributions	(iii) Distributable
		Pre-2024	Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024			
(reasonable cause required-explain in Part VI). See			
instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from			
Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, 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 2024. Subtract lines 3h			
and 4b from line 1. For result greater than zero, explain in			
Part VI. See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j			
and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			



Schedule A (Form	n 990) 2024	AVALON	FOUNDATION,	INC.	52-1850874	Page 8
Part VI	Supplemental III, line 12; Part B, lines 1 and 2; 3a, and 3b; Part	Information. Prov IV, Section A, line Part IV, Section V, line 1; Part V,	vide the explanation es 1, 2, 3b, 3c, 4b, C, line 1; Part IV, S Section B, line 1e;	ns require 4c, 5a, 6 Section D Part V,	ed by Part II, line 10; Part II, line 17a or 5, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, 0, lines 2 and 3; Part IV, Section E, lines Section D, lines 5, 6, and 8; and Part V, additional information. (See instructions.)	17b; Part Section 1c, 2a, 2b,
•						
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Schedule B (Form 990) (Rev. December 2024))

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization

AVALON FOUNDATION, INC.

Employer identification number

52-1850874

Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	X = 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note: Only a section 501(c)(7), instructions.	vered by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See	
General Rule		
	g Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 roperty) from any one contributor. Complete Parts I and II. See instructions for determining a libutions.	
Special Rules		
regulations under section 16b, and that received f	ciribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of the ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or in (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
contributor, during the y	ceribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one rear, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, burposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering read of the contributor name and address), II, and III.	
contributor, during the y contributions totaled mo during the year for an e. General Rule applies to	ciribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one year, contributions exclusively for religious, charitable, etc., purposes, but no such one than \$1,000. If this box is checked, enter here the total contributions that were received exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the or this organization because it received nonexclusively religious, charitable, etc., contributions during the year	\$
must answer "No" on Part IV, lir	sn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it ne 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line the filing requirements of Schedule B (Form 990).	

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

Schedule B (Form 990) (Rev. 12-2024)



AVALON FOUNDATION, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1	ABIGAIL ROSENFELD P.O. BOX 13 OXFORD MD 21654	\$ 12,800	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
2	AMY HAINES & RICHARD MARKS 205 GOLDSBOROUGH STREET \$ 5,000 EASTON MD 21601		Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a)	(b)	(c)	(d)				
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution				
3	ANNA AURILIO & MYLES TAYLOR 2134 LEROY PLACE, NW WASHINGTON DC 20008	\$ 5,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a)	(b)	(c)	(d)				
No. 4	Name, address, and ZIP + 4 ANNE MARIE & JOHN BORNEMAN 1315 WRENFIELD WAY VILLA NOVA PA 19085	Total contributions \$ 5,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
5	BILL DAVENPORT & BRUCE WILTSIE 10443 SHERWOOD MANOR ROAD CLAIBORNE MD 21624	TILTSIE \$ 27,000					
(a) No.	(b) Name, address, and ZIP + 4	(C)	(d) Type of contribution				
. 6	BOB & RITA REAVES 4821 MONTGOMERY LANE, APT. 602 BETHESDA MD 20814-6327	\$ 7,425	Person X Payroll Noncash (Complete Part II for noncash contributions.)				

Schedule B (Form 990) (Rev. 12-2024) Name of organization

AVALON FOUNDATION, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4					
7	CONSTANCE & NEAL SULLIVAN 11609 BUNNELL COURT SOUTH POTOMAC MD 20854	.609 BUNNELL COURT \$ 5,000				
(a)	(b)	(c)	(d)			
No. 8	Name, address, and ZIP + 4 CYNTHIA RICKMAN 512 SOUTH ATLANTIC AVENUE VIRGINIA BEACH VA 23451	Total contributions \$ 5,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b)	(c) Total contributions	(d) Type of contribution			
9	Name, address, and ZIP + 4 DEBORAH & THOMAS LAWRENCE P.O. BOX 737 EASTON MD 21601-1152	\$ 7,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
10	DEDE & MARVIN LANG 5301 MOORLAND LANE BETHESDA MD 20814	\$ 11,000	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
11	DONALD & CHRISTINE MARTIN 8054 GLENDALE ROAD CHEVY CHASE MD 20815	\$ 5,800	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
12	DONNA & LEN BUSH 9729 FAIRVIEW POINT LANE EASTON MD 21601	\$ 20,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)			

Employer identification number

AVALON FOUNDATION, INC. 52-1850874 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) Type of contribution Name, address, and ZIP + 4 **Total contributions** No. 13 EASTON UTILITIES COMMISSION Person 201 N. WASHINGTON STREET **Payroll** 25,875 Noncash MD 21601 **EASTON** (Complete Part II for noncash contributions.) (a) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. ELLEN & MICHAEL DI MAYO 14 Person Payroll 25725 LAKEWOOD FARM LANE 6,000 Noncash 21601 **EASTON** (Complete Part II for noncash contributions.) (a) Total contributions Type of contribution No. Name, address, and ZIP + 4 ELLEN & RICHARD BERNSTEIN 15 Person 5820 DEEPWATER DRIVE **Payroll** 5,000 Noncash **OXFORD** MD 21654 (Complete Part II for noncash contributions.) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 16 ELLEN VATNE Person 1416 CHANCELLORS POINT ROAD **Payroll** 20,300 Noncash TRAPPE MD 21673 (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 Type of contribution No. **Total contributions** 17 ELIZABETH HORMEL Person 4427 ROSLYN FARM ROAD **Payroll** 22,300 Noncash TRAPPE MD 21673-1949 (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 No. Total contributions Type of contribution 18 FRANCES PHILLIPS & BARRY WILDSTEIN Person 28643 OLD PASTURE DRIVE **Payroll** 10,000 Noncash MD 21601 EASTON (Complete Part II for noncash contributions.)

AVALON FOUNDATION, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
19	FRED FREDRICK CHRYSLER 8562 OCEAN GATEWAY EASTON MD 21601	\$ 5,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
20	GEORGEANNE & PETER PINKARD 312 QUARTER CREEK DRIVE QUEENSTOWN MD 21658	\$ 10,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a)	(b)	(c)	(d)			
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution			
21	HALI & SCOTT ASPLUNDH 1591 HAMPTON ROAD MEADOWBROOK PA 19046	\$ 20,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a)	(b)	(c)	(d)			
No. 22	Name, address, and ZIP + 4 HAMMONDS FAMILY FOUNDATION 606 OCEAN ROAD VERO BEACH FL 32963	\$ 20,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
23	JAMIE GARNER 110 BAYVIEW AVENUE OXFORD MD 21654	\$ 5,300	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
24	JULIE LANSAW & JOE WARIN 883 ALVEMAR RIDGE DRIVE MCLEAN VA 22102	\$ 10,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)			

AVALON FOUNDATION, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
25	KELLY & BRENT ASPLUNDH 1356 MEADOWBROOK ROAD RYDAL PA 19046	\$ 5,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b)	(c)	(d) Type of contribution				
26	Name, address, and ZIP + 4 KIMBERLY & JOHN THACKER 4821 MONTGOMERY LANE, UNIT 705 \$ 5,000 BETHESDA MD 20814		Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a)	(b)	(c)	(d)				
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution				
27	KULMAN CPA, LLC 888 BESTGATE ROAD, SUITE 316 ANNAPOLIS MD 21401	\$ 5,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a)	(b)	(c)	(d)				
No. 28	Name, address, and ZIP + 4 LISA & STEVEN ASPLUNDH 3377 GULF SHORE BLVD N, UNIT 8B NAPLES FL 34103	Total contributions \$ 5,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
29	LYN & ANDREW MCCORMICK 27321 BAILEYS NECK ROAD EASTON MD 21601	\$ 6,300	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a)	(b)	(c)	(d)				
30	MARILYNN DUKER & DALE MCARDLE 3 HIDDENWOOD COURT PIKESVILLE MD 21208-3406	\$ 10,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)				

AVALON FOUNDATION, INC.

Employer identification number 52-1850874

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) Type of contribution Name, address, and ZIP + 4 **Total contributions** No. 31 MARY & RICHARD EMRICH Person 887 OLD LANCASTER ROAD **Payroll** 5,000 Noncash PA 19010 BRYN MAWR (Complete Part II for noncash contributions.) (a) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. MARYLOU & JOSEPH PETERS 32 Person 8451 AVELEY FARM ROAD **Payroll** 6,500 Noncash MD 21601 **EASTON** (Complete Part II for noncash contributions.) (a) Total contributions Type of contribution No. Name, address, and ZIP + 4 33 MAXINE MILLAR Person 4184 EVERGREEN ROAD **Payroll** 20,000 Noncash **OXFORD** MD 21654 (Complete Part II for noncash contributions.) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. MICHEL MODELL 34 Person X 11814 PARK HEIGHTS AVENUE **Payroll** 10,000 Noncash OWINGS MILLS 21117 (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 Type of contribution No. **Total contributions** 35 RICHARD & BEVERLY TILGHMAN Person 26080 BRUFFS ISLAND ROAD **Payroll** 10,304 Noncash EASTON MD 21601 (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 36 ROBYN & WILLIAM COLLINS Person 6810 GLENBROOK ROAD **Payroll** 5,000 Noncash MD 20814 **BETHESDA** (Complete Part II for noncash contributions.)

Schedule B (Form 990) (Rev. 12-2024) Name of organization

AVALON FOUNDATION, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
37	RODREICK RYAN 4299 WHITICAR WAY STUART FL 34997	\$ 100,012	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
38	SANDRA & DANIEL WEISS 28547 PEACH BLOSSOM LANE \$ 8,000 EASTON MD 21601		Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a)	(b)	(c)	(d)				
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution				
39	SHARON & REX WRIGHT 6536 BOSMAN NEAVITT ROAD NEAVITT MD 21652	\$ 5,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b)	(c)	(d) Type of contribution				
40	Name, address, and ZIP + 4 SHORE UNITED BANK 18 E. DOVER STREET EASTON MD 21601	Total contributions \$ 12,500	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
41	SUSAN & JACK STOLTZ P.O. BOX 731 MONTCHANIN DE 19710	\$ 12,558	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c)	(d) Type of contribution				
42	SUSAN MANDL 6020 SHIPYARD LANE EASTON MD 21601	\$ 7,500	Person X Payroll Noncash (Complete Part II for noncash contributions.)				

Employer identification number

52-1850874 AVALON FOUNDATION, INC. Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) Type of contribution Name, address, and ZIP + 4 **Total contributions** No. 43 TERRY & BILL WITOWSKY Person 8615 NORTHBEND CIRCLE **Payroll** 15,000 Noncash **EASTON** MD 21601 (Complete Part II for noncash contributions.) (a) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. THE OROKAWA FOUNDATION 44 Person 1 W PENNSYLVANIA AVENUE, SUITE 800 **Payroll** 10,000 Noncash MD 21204 TOWSON (Complete Part II for noncash contributions.) (a) (c) Total contributions Type of contribution No. Name, address, and ZIP + 4 TRACY & SCOTT WAGNER 45 Person 928 RIVERVIEW TERRACE **Payroll** 5,000 Noncash ST. MICHAELS MD 21663 (Complete Part II for noncash contributions.) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. TALBOT COUNTY, MD 46 Person 11 SOUTH HARRISON STREET **Payroll** 77,850 Noncash **EASTON** 21601 (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 Type of contribution No. **Total contributions** 47 TALBOT COUNTY ARTS COUNCIL, INC. Person 215 BAY STREET **Payroll** 12,500 Noncash EASTON MD 21601 (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution 48 TOWN OF EASTON Person P.O. BOX 520 **Payroll** 37,000 Noncash EASTON MD 21601 (Complete Part II for noncash contributions.)

AVALON FOUNDATION, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
49	MARYLAND STATE ARTS COUNCIL 175 WEST OSTEND STREET, SUITE E BALTIMORE MD 21230	\$ 190,593	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	\$		Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a)	(b)	(c)	(d)				
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a)	(b)	(c)	(d)				
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c)	(d) Type of contribution				
	Name, audiess, and Zif + 4	Total contributions	Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$Client	Person Payroll Noncash (Complete Part II for noncash contributions.)				

SCHEDULE D (Form 990) (Rev. December 2024)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047

Open to Public Inspection

Name	of the organi	ization			Employer	identification number
A	VALON	FOUNDATION, INC.			52-1	850874
	art I	Organizations Maintaining Donor Advised Fun Complete if the organization answered "Yes" on F			counts	5
		<u> </u>		(a) Donor advised funds		(b) Funds and other accounts
1	Total nun	nber at end of year				<u>'</u>
2	Aggregate	e value of contributions to (during year)				
3	Aggregate	e value of grants from (during year)				
4	Aggregate	e value at end of year				
5		rganization inform all donors and donor advisors in writing that the	ne assets h	eld in donor advised		
		e the organization's property, subject to the organization's exclus				Yes No
6		rganization inform all grantees, donors, and donor advisors in wi				·····
	only for c	haritable purposes and not for the benefit of the donor or donor	advisor, or	for any other purpose		
	conferring	g impermissible private benefit?	<u></u>			Yes No
Pa	art II	Conservation Easements				
		Complete if the organization answered "Yes" on F	orm 990	Part IV, line 7.		
1	Purpose(s) of conservation easements held by the organization (check al	I that apply).		
	Prese	ervation of land for public use (for example, recreation or educat	ion)	Preservation of a historically im	portant I	and area
	Prote	ection of natural habitat		Preservation of a certified histo	ric struc	ture
		ervation of open space				
2		e lines 2a through 2d if the organization held a qualified conserva	ation contrib	ution in the form of a conservation	on	Т
		t on the last day of the tax year.				Held at the End of the Tax Year
а	Total nun	nber of conservation easements			2a	
b	Total acre	eage restricted by conservation easements			2b	
С		of conservation easements on a certified historic structure include			2c	
d		of conservation easements included on line 2c acquired after Jul	y 25, 2006,	and not		
_					2d	
3		of conservation easements modified, transferred, released, extin	guished, oi	terminated by		
	-	ization during the tax year				
4		of states where property subject to conservation easement is loc				
5		organization have a written policy regarding the periodic monitor		•		☐ Yes ☐ No
		, and enforcement of the conservation easements it holds?				Tes NO
6		volunteer hours devoted to monitoring, inspecting, handling of v		_		
7	Amount	tion easements during the year		oforoina		
7						\$
Ω	Does ear	tion easements during the year	requiremen	ts of section 170/h)////R)		\$
0		ection 170(h)(4)(B)(ii)?				☐ Yes ☐ No
9	. ,	III, describe how the organization reports conservation easemen				
,		include, if applicable, the text of the footnote to the organization		·	Dalario	•
		ion's accounting for conservation easements.				
Pa	art III	Organizations Maintaining Collections of Art,	Historica	I Treasures, or Other Si	milar /	Assets
		Complete if the organization answered "Yes" on F	orm 990	Part IV, line 8.		
1a	If the org	anization elected, as permitted under FASB ASC 958, not to rep	ort in its re	venue statement and balance she	et work	3
	of art, his	storical treasures, or other similar assets held for public exhibition	n, education	, or research in furtherance of p	ublic	
	service, p	provide in Part XIII the text of the footnote to its financial statement	ents that de	scribes these items.		
b	If the org	anization elected, as permitted under FASB ASC 958, to report	n its reven	ue statement and balance sheet	works of	
	art, histor	rical treasures, or other similar assets held for public exhibition,	education,	or research in furtherance of pub	ic servic	e,
	provide th	ne following amounts relating to these items.				
	(i) Reve	enue included on Form 990, Part VIII, line 1				\$
		to included in Form 000 Post V				\$
2	If the org	anization received or held works of art, historical treasures, or of	her similar	assets for financial gain, provide	the	
	following	amounts required to be reported under FASB ASC 958 relating	to these ite	ms.		
а	Revenue	included on Form 990, Part VIII, line 1		l lier	1.T((\$ <u></u>
b		cluded in Form 990. Part X				\$ 7

Pa	art III Organizations Maintainin	g Collections of	Art, Historical	reasures, or	Other Simila	r Assets	(continu	ued)	,	
3	Using the organization's acquisition, accessi	on, and other records,	check any of the follo	owing that make sign	gnificant use of	its				
	collection items (check all that apply).	. \Box								
a	Public exhibition		Loan or exchange p	-						
b	H ,	е 🔛	Other							
C	Previde a description of the organization's	alloctions and avaloin h	ow thou further the	raonization's aver	ont nurnogo in D	lort				
4	Provide a description of the organization's of XIII.	ollections and explain i	low they further the t	organization's exem	ipi puipose in P	all				
5	During the year, did the organization solicit	or receive donations of	art, historical treasur	es, or other similar						
·	assets to be sold to raise funds rather than		·	•			Пү	es	\neg	No
Pa	art IV Escrow and Custodial A		<u> </u>							
	Complete if the organization		on Form 990, F	art IV, line 9, o	r reported ar	n amount	on Form	1		
	990, Part X, line 21.									
1a	Is the organization an agent, trustee, custod		•						_	
	included on Form 990, Part X?						U Y	es		No
b	If "Yes," explain the arrangement in Part XIII	and complete the follo	owing table.		ſ					_
						_	Amour	ıt		_
C	Beginning balance					1c				_
	Additions during the year					1d 1e				_
e f	,					1f				_
	Ending balance Did the organization include an amount on F	form 990 Part X line 2	 21 for escrow or cus	odial account liabil			Пу	es	\neg	— No
	If "Yes," explain the arrangement in Part XIII							- +	┪	
	art V Endowment Funds							···		
	Complete if the organization	n answered "Yes"	on Form 990, P	art IV, line 10.						
		(a) Current year	(b) Prior year	(c) Two years b	oack (d) The	ee years back	(e) Fo	ur year	s ba	ck
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains,									
	and losses									
	Grants or scholarships									
е	Other expenditures for facilities and									
	programs Administrative expenses									
	Administrative expenses End of year balance									
2	Provide the estimated percentage of the cur		(line 1g. column (a))	L held as:	I					
	Board designated or quasi-endowment	•	(()							
	Permanent endowment %									
	Term endowment %									
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.								
3a	Are there endowment funds not in the posse	ession of the organization	on that are held and	administered for th	е					
	organization by:							Yes	S	No
	(i) Unrelated organizations?						3a(i)	₩	+	
	(ii) Related organizations?						3a(ii)	\vdash	+	
b	If "Yes" on line 3a(ii), are the related organiz						3b			
Pa	Describe in Part XIII the intended uses of the Land, Buildings, and Equ		ment tunds.							
1 6	Complete if the organization		on Form 990 P	art IV line 11a	See Form 9	990 Part	X line 1	0		
	Description of property	(a) Cost or other b		or other basis	(c) Accumulated		(d) Book			
		(investment)	1 ''	other)	depreciation		(1)			
1a	Land			103,627			1	03	,6	27
b	Buildings			032,934	493	,532	1,5			
С	Leasehold improvements		1,	962,026		,423	1,0	08	, 6	03
	Equipment			902,521		,652		63		
е	Other			225,422		,197		98		
Total	I. Add lines 1a through 1e. (Column (d) must	equal Form 990, Part >	K, line 10c, column (E	3))			3,0	<u>13</u>	, 7	26

Schedule D (F	form 990) (Rev. 12-2024) AVALON FOUNDATION,	INC.	52-1850874	Page 3
Part VII	Investments - Other Securities			
	Complete if the organization answered "Yes" on F	Form 990, Part IV, line	e 11b. See Form 990, Part X, line	12.
	(a) Description of security or category	(b) Book value	(c) Method of valuation:	
	(including name of security)		Cost or end-of-year market value	
(1) Financial	derivatives			
(2) Closely he	eld equity interests			
(2) Other				
		_		
· · · · (P) · · · · · ·				
(C)				
(D)				
(G)				
	n (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII	Investments – Program Related			
	Complete if the organization answered "Yes" on I	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)				
	n (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX	Other Assets	•		
	Complete if the organization answered "Yes" on F	Form 990, Part IV, line	e 11d. See Form 990, Part X, line	15.
	(a) Description			ook value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
<u>(7)</u>				
(8)				
(9)	(h) mount accord Forms 000. Dowl V. line 45, and (D))			
Part X	n (b) must equal Form 990, Part X, line 15, col. (B)) Other Liabilities			
Fail A	Complete if the organization answered "Yes" on I	Form 000 Port IV line	110 or 11f Soc Form 000 Dort	~
	·	roini 990, Pait IV, iine	e Tie Or Til. See Folili 990, Part	^,
	line 25.		47.5	
1. (1) Fadard	(a) Description of liability		(D) D	ook value
	income taxes			72 014
	ATING LEASE LIABILITY			72,016
(3) INTER	REST PAYABLE			2,153
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				DA 164
Total (Column	n (h) must equal Form 000 Part V line 25, col. (R))		71.	74 169

	Reconciliation of Revenue per Audited Financial Statements With Revenue per Ref	um	
4	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		3,276,076
1	Total revenue, gains, and other support per audited financial statements	1	3,270,070
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments 2a		
a b		-	
c		-	
d			
е		2e	
3	Subtract line 2e from line 1	3	3,276,076
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b			
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,276,076
Pa	art XII Reconciliation of Expenses per Audited Financial Statements With Expenses per F	eturn	
_	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		2 201 025
1	Total expenses and losses per audited financial statements	1	3,291,835
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a		-	
b	, , , , , , , , , , , , , , , , , , , ,	-	
c d		-	
e		2e	
3	Subtract line 2e from line 1	3	3,291,835
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а			
b			
С	Add lines 4a and 4b	4c	
5		5	3,291,835
Pa	art XIII Supplemental Information		
	ride 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 art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.		
			(Form 990) (Rev. 12-2024)

Schedule D (Fo	orm 990) (Rev. 12-2	2024) AVALON	FOUNDATION,	INC.	52-1850874	Page 5
Part XIII	Supplementa	I Information	FOUNDATION, (continued)			
			,			
•						
•						
•						
•						
•						
•						
•						
•						

SCHEDULE J

(Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Compensation Information

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

AVALON FOUNDATION, INC.

Employer identification number
52-1850874

Pa	art I Questions Regarding Compensation			
	······································		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
	·			
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
		2		
	1a?	_		
3	Indicate which, if any, of the following the organization used to establish the compensation of the			
•	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
	7 Approval by the board of compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		х
h	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
-	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
·	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.			
	The to any of lines are of list the persons and provide the applicable amounts for each term in that in.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
•	compensation contingent on the revenues of:			
а	The organization?	5a		х
	Any related organization?	5b		х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		х
b	Any related organization?	6b		х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
-	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
		8		х
	in Part III			
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
•	Regulations, section 53 /058-6/c)?	•	7	

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

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

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

	(B) Breakdown of W-2	2 and/or 1099-MISC and/or 1	099-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990
	151,494	0	(0	13,635	165,129	0
1 EXEC. DIRECTOR	ii) 0	0	(0	0	0	0
2	(i) 						
	(i)						
3	(i)						
4	ii) (i)						
5	ii)						
6	(i) :						
7	(i) 						
8	(i) 						
9	(i) 						
10	(i)						
	(i)						
	(i)						
12	(i)						
13	(i)						
14	ii) (i)						
15	ii) (i)						
16	ii)						

Schedule J (Form 990) (Rev. 12-2024)

	m 990) (Rev. 12-2024)	AVALON FOUN	DATION, IN	rc.	52-18508	74		Page 3
Part III	Supplemental	Information						
Provide the for any ac	ne information, exp aditional information	olanation, or descr on.	riptions required	for Part I, lines 1a,	1b, 3, 4a, 4b, 4c, 5a,	, 5b, 6a, 6b, 7, and 8,	and for Part II. Also	complete this part
• • • • • • • • • • • • • • • • • • • •								
• • • • • • • • • • • • • • • • • • • •								
*								
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•								

SCHEDULE O (Form 990)

(Rev. December 2024)

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.

OMB No. 1545-0047

Attach to Form 990 or Form 990-EZ. Open to Public Department of the Treasury Inspection Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization Employer identification number AVALON FOUNDATION, INC. 52-1850874 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS PROVIDES LOCAL TELEVISION PROGRAMMING OPPORTUNITIES INDIVIDUALS AND INSTITUTIONS IN TALBOT COUNTY. FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE FORM 990 IS FIRST REVIEWED AND APPROVED BY THE AVALON FOUNDATION'S EXECUTIVE COMMITTEE, THEN DISTRIBUTED TO THE AVALON BOARD OF TRUSTEES VIA EMAIL. ANY COMMENTS FROM THE BOARD ARE CONSIDERED BEFORE THE FORM IS FILED. FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY AS PART OF THE ANNUAL MEETING CONFLICT STATEMENTS ARE SIGNED AND REVIEWED BY THE EXECUTIVE COMMITTEE. FORM 990, PART VI, LINE 15A COMPENSATION PROCESS FOR TOP OFFICIAL COMPENSATION FOR EXECUTIVES IS DISCUSSED ANNUALLY BY THE FINANCE COMMITTEE. COMPENSATION THEN VOTED BY IS THE BOARD AS PART OF BUDGET. FORM 990, PART VI, LINE 19 GOVERNING DOCUMENTS DISCLOSURE EXPLANATION THE ANY DOCUMENTS RELATED TO FOUNDATION'S GOVERNANCE, FINANCES, STATEMENT MAY BE OBTAINED IF REQUESTED IN WRITING.

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

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

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Identifying number

	AVALON	FOUNDATION	, INC.			52-	185	0874
	ess or activity to which this form relates							
	NDIRECT DEPRECIAT							
Pa	rt I Election To Exper	•	•					
	Note: If you have a		, complete Part V b	petore you d	complete Part	t I.		1 222 222
1	Maximum amount (see instructions						1_	1,220,000
2	Total cost of section 179 property	placed in service (see	instructions)	 :ama\			3	3,050,000
3 4	Threshold cost of section 179 prop	erry before reduction	or loss opter 0	ions)			4	3,030,000
5	Reduction in limitation. Subtract line Dollar limitation for tax year. Subtract line	e 3 HOITI IIIIe 2. II Zelo	loss onter 0. If married fil	ling canarataly so	an instructions		5	
6	(a) Description			Cost (business use		c) Elected cost		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		· · ·	,		•		
7	Listed property. Enter the amount to	from line 29	•		7			
8	Total elected cost of section 179 p	roperty. Add amounts i	in column (c), lines 6 and	d 7			8	
9	Tentative deduction. Enter the small						9	
10	Carryover of disallowed deduction	from line 13 of your 20	023 Form 4562				10	
11	Business income limitation. Enter t	he smaller of business	income (not less than z	ero) or line 5.	See instructions		11	
12	Section 179 expense deduction. Ac						12	
13	Carryover of disallowed deduction				13			
	: Don't use Part II or Part III below f							
	rt II Special Depreciati			•		d property	/. See	e instructions.)
14	Special depreciation allowance for							150 227
45	during the tax year. See instruction						14	150,327
15	Property subject to section 168(f)(1) election					15 16	13,072
16 Pa	other depreciation (including ACR Int III MACRS Depreciat						10	13,072
16	III III WACKO Depreciat	ion (Don't molade	Section A		ліз.)			
17	MACRS deductions for assets place	ed in service in tax ve					17	96,229
18	If you are electing to group any assets placed							5 0 7 = = 5
			rvice During 2024 Tax			reciation S	ystem	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only–see instructions)	(d) Recovery period	(e) Convention	(f) Meti	nod	(g) Depreciation deduction
19a	3-year property							
b	5-year property							
C	7-year property		10,80	5 7.0	MQ	200	DB	2,702
d	10-year property							
	15-year property		18,22	3 15.0	MQ	S/	'L	760
	20-year property			05		0/1		
<u>g</u>	25-year property			25 yrs.	2424	S/L		
n	Residential rental property			27.5 yrs. 27.5 yrs.	MM MM	S/L S/L		
	Nonresidential real	06/26/25	145,97		MM	S/L		156
•	property	VARIOUS	6,06		MM	S/L		57
	• • •		ice During 2024 Tax Y					
20a	Class life				1	S/L		
b	12-year			12 yrs.		S/L		
С	30-year			30 yrs.	MM	S/L		
d	40-year			40 yrs.	MM	S/L		
Pa	rt IV Summary (See ins	structions.)						
21	Listed property. Enter amount from	line 28					21	
22	Total. Add amounts from line 12, li	-					_	262 202
23	here and on the appropriate lines of For assets shown above and place			s—see instructi	ons	4	22	263,303
	portion of the basis attributable to			23				ODV

52-1850874

FYE: 6/30/2025

Federal Asset Report Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	Per (Conv Meth	Prior Cu	urrent
238 239	GDS Property: Demountable Walls for Temp Gallery Plein Air Academy Lights Camera Equipment	6/05/25 6/18/25 7/01/24 –	25,577 3,828 27,015 56,420	X X X	0 0 10,806 10,806	7	MQ200DB MQ200DB MQ200DB	0 0 0 0	25,577 3,828 18,911 48,316
236 240 241	r GDS Property: Lobby Bar Renovation Project Sandpipe HVAC - Dining area Large outdoor air conditioner	11/06/24 10/31/24 6/07/25 6/07/25	40,272 5,285 25,825 35,978 107,360	X X X X	2,114	15 15	MQ S/L MQ S/L MQ S/L MQ S/L	0 0 0 0 0	24,835 3,259 25,825 35,978 89,897
Non-R 235 243 245	Roof Recovery Project Awning Ramp and Loading Platform	6/26/25 5/05/25 12/10/24 _	145,970 2,560 3,500 152,030		145,970 2,560 3,500 152,030	39	MM S/L MM S/L MM S/L	0 0 0 0	156 8 49 213
98 99	MACRS: LHI - Avalon 2rd Floor Avalon 3rd Floor Furniture - 3rd Floor Capitalized interest on \$100K loan Satellite Installation Sold/Scrapped: 6/30/25	11/23/09 6/08/10 6/09/10 6/30/10 9/14/10	153,055 306,288 6,600 15,000 2,700	X X	153,055 306,288 3,300 15,000	39 7 39	MM S/L MM S/L MQ 200DB MM S/L HY 200DB	55,961 110,277 6,600 5,385 2,700	3,826 7,853 0 384 0
119	Network Terminations/Admin Curtains	10/31/10 11/19/10 11/23/10 2/12/11 2/21/11 3/25/11 4/19/12 4/13/13 11/19/12	2,637 1,500 841 515 2,407 2,516 2,387 1,794 2,632	X X X X X X X X	0 0 0 0 0 0 1,193 897 1,316	7 5 7 7 5 5 7	HY 200DB HY 200DB HY 200DB HY 200DB HY 200DB HY 200DB HY 200DB HY 200DB HY 200DB	2,637 1,500 841 515 2,407 2,516 2,387 1,794 2,632	0 0 0 0 0 0 0
141 142	Sold/Scrapped: 6/30/25 HD Switcher for Met Sound Board Sold/Scrapped: 6/30/25	8/29/13 1/09/14	3,203 1,558	X X	1,601 779	7	HY 200DB HY 200DB	3,203 1,558	0
143 144 147 153 154	iPad for Sound Board Sound Board - Stoltz Sold/Scrapped: 6/30/25 Phase I Planning (Legal Fees) Legal Fees for Acq Miles & Stockbridge Legal Fees for Acq Miles & Stockbridge	1/22/14 1/22/14 5/31/19 6/05/15 6/05/15	499 636 41,775 8,674 902	X X		7 39 39	HY 200DB HY 200DB MM S/L MM S/L MM S/L	499 636 5,490 2,011 209	0 0 1,071 222 23
155 156 158 159 160 162 163 164 165 166 167 169 170	Legal Fees for Acq Miles & Stockbridge Legal Fees for Acq Miles & Stockbridge Legal fees for Acq Miles & Stockbridge Carpet - Studio Downstairs Curtains Avalon Condominium - Unit B Projector Brickwork (Side of Building) Legal Fees for Acquist Miles & Stockbrid Credit Card Terminal Plotter Carpet - MCTV Inspection for MCTV Rodeo Front Doors (Bumpers/Exit Devices) Plumbing Improvements	6/05/15 6/05/15 3/12/15 3/10/15 6/05/15 10/05/15 6/13/16 10/14/15 9/21/15 3/25/16 5/10/16 6/06/16 8/10/16 12/02/16	1,792 10,375 1,282 1,752 310,881 9,089 58,207 16,582 897 2,000 1,907 2,500 19,716 10,223	X X X X X X	1,792 10,375 1,282 876 310,881 4,544 58,207 8,291 449 1,000 1,907 2,500 9,858 5,111	39 39 7 39 7 15 15 7 7 7 7	MM S/L MM S/L MM S/L HY 200DB MM S/L HY 200DB HY 150DB HY 200DB HY 200DB HY 200DB HY 200DB HY 200DB HY 200DB HY 200DB HY 200DB	415 2,405 306 1,752 72,074 9,089 35,866 13,399 897 2,000 1,907 2,500 15,350 10,223	46 266 32 0 7,971 0 3,437 490 0 0 0 582 0
172 173 174 175 176	Marquee Improvements Heat Pump System (1st Floor Theatre Rear A Gas Water Heater (Bathroom/Mop Sink/Bar Roof Hatch STARS Plaque/Wall	2/18/17 3/01/17 5/16/17 8/11/17 9/20/16	3,200 10,800 4,400 9,400 9,683	X X X X X		7 7 15	HY 200DB HY 200DB HY 200DB HY S/L HY 200DB	3,200 10,800 4,400 6,737 9,683	0 0 0 313 0

52-1850874

FYE: 6/30/2025

Federal Asset Report Form 990, Page 1

		Date		Bus Se	ЭС	Basis				
Asset	Description	In Service		<u>%</u> 17	79 Bonus	for Depr		Conv Meth	Prior _	Current
177 178	Eartec Comstar - 4 Person Wireless Power Edge T430 Server	11/28/16 4/28/17	4,584 4,775		X X	2,292 2,388		HY 200DB HY 200DB	4,584 4,775	$\begin{array}{c} 0 \\ 0 \end{array}$
179	Electrical Hazard Removal/Floor Patching	6/14/17	6,945		X	3,473		HY 200DB	6,945	0
	IT Support, Firewall, and Server Setup	10/31/17	3,013		X	0		HY 200DB	3,013	0
181 182	Camera Upgrades - Sony HD Cameras ATA Road Case for Yamaha M7CL/48	5/03/18 4/12/18	23,868 3,167		X X	0		HY 200DB HY 200DB	23,868 3,167	0
			3,399		X	0		HY 200DB	3,399	0
184	Accounting Office Space	12/20/17	66,021			66,021	39	MM S/L	11,074	1,693
185 186	Balcony & Bathroom Renovations (#203 & Theatre Floors Refinish	5/31/19 5/31/19	6,545 10,567			6,545 10,567		MM S/L MM S/L	860 1,389	168 271
187	Decorative Paint (Entryway & Theatre) (#20		82,132			82,132		MM S/L	11,495	2,106
188	Plaster Restoration	5/31/19	27,575			27,575	39	MM S/L	3,624	707
	Lobby & Hallway Lighting	5/31/19	13,845			13,845		MM S/L	1,819	355
190 191	Carpeting (#198) 3rd Floor Awning	12/31/18 11/25/17	29,010 15,000		X	29,010		MM S/L HY S/L	4,122 15,000	744 0
	Fly Space Rigging	12/06/17	71,935		X			HY S/L	71,935	ŏ
193	Mixing Board and Installation	11/21/17	21,236			21,236		HY 200DB	20,288	948
194 195	Redevelopment of the Restrooms Redesign Theatre Balcony	5/31/19 5/31/19	12,739 18,744			12,739 18,744		MM S/L MM S/L	1,674 2,463	327 481
	Legal Fees for Acq.: Unit A-1, A-2, and A-3		6,092			6,092		MM S/L	905	156
197	Cameras (MCTV)	8/07/18	6,261		X	0		HY 200DB	6,261	0
198	Carpeting (#190)	12/31/18 1/11/19	48,763 8,863		X	48,763 0		MM S/L HY 200DB	6,929	1,250
199 200	Laser Projector and Lens Theatrical Lighting	3/07/19	149,374		X	0	7	HY 200DB	8,863 149,374	0
201	Decorative Paint (Entryway & Theatre) (#18	1/31/19	208,529			208,529	39	MM S/L	29,185	5,347
	Balcony Chairs	4/30/19	42,370		X	021.225		HY 200DB	42,370	0
203 204	Balcony & Bathroom Renovations (#185 & Pump Motor (Elevator)	5/31/19 6/19/19	931,235 11,042			931,235 11,042		MM S/L MM S/L	122,374 1,427	23,878 284
	Dell 7730 Laptop	6/27/19	2,544		X	0		HY 200DB	2,544	0
206	Equipment Upgrades (MCTV)	8/20/19	18,845		X	0		HY 200DB	18,845	0
207 208	Balcony & Bathroom Renovations (#185 & SLR Remodel - Windows	10/15/19 7/01/22	40,091 25,287			40,091 25,287		MM S/L HY S/L	4,719 1,981	1,002 1,011
208	SLR Remodel - Resurfacing Tables/Bars/Flo		13,326		X			HY 200DB	13,326	0
210	SLR Remodel - New Sound System	7/01/22	19,014		X	0	10	HY 200DB	19,014	0
211 212	Apple Imac 27" MCTV Fader & Monitor	8/20/20 8/26/20	3,399 3,498		X X	0		HY 200DB HY 200DB	3,399 3,498	0
212	Laptop/Keyboard/Mouse - Al Bond	3/01/21	5,604		X	0		HY 200DB	5,604	0
214	Digital Signage Player	3/11/21	4,010		X	0	5	HY 200DB	4,010	0
	MCTV Equipment - Kabam's Studio	3/22/21	47,521		X	0		HY 200DB	47,521	0
216 217	MCTV Tricaster TC410 Plus and Accessorie Theatre HVAC - Testing & Balancing Surve	12/31/21	10,231 6,876		X	0 6,876		HY 200DB MM S/L	10,231 448	0 176
218	Performance Based Analysis and Report	1/20/22	10,500		X	10,500		HY 200DB	0	0
210	Out Of Service: 11/30/21	0/00/22	2 727		37	0.707	10	HW 200DD	0	0
219	A&E Services - Building Permit for Pavilion Out Of Service: 11/30/21	8/08/22	3,737		X	3,737	10	HY 200DB	0	0
220	Avalon Corner (Building)	9/16/22	814,346			814,346	39	MM S/L	37,411	20,881
221	Avalon Corner (Kitchen Assets)	9/16/22	175,000		X	0		HY S/L	175,000	0
222 225	LED Panels & Hangers Stoltz Pavilion	11/21/22 11/06/20	41,867 206,343		X X	0		HY 200DB HY 200DB	41,867 206,343	0
	Out Of Service: 11/30/21	11/00/20	200,543		Λ	U	10	111 200DD	200,343	U
226	Ice Machine	2/13/24	6,294			6,294		HY 200DB	899	1,542
227	(3) Camera Equipment	7/03/23	26,077		-	26,077	7	HY 200DB	3,725	6,386
			4,364,844			3,406,597			1,578,328	96,229
<u>Other</u>	Depreciation:									
41	FURMAN POWER CONDITIONERS (2)	2/01/01	300			300		MO S/L	300	0
48 60	PIANO 2ND FLOOR - OFFICE SPACE	3/18/03 11/20/03	32,850 236,706			32,850 236,706		MO S/L MO S/L	32,850 128,044	0 6,069
61	2ND FLOOR FLOORING- LHI	9/06/05	3,830			3,830		MO S/L MO S/L	3,830	0,009
62	2ND FLOOR FLOORING- LHI	12/30/05	461			461	7	MO S/L	461	0
65 69	STERLING CHAIRS 1/2 OF BOX OFFICE IMPROVEMENT	10/21/05 7/30/04	34,743 851			34,743 851		MO S/L MO S/L	34,743 851	$\begin{array}{c} 0 \\ 0 \end{array}$
70	1/2 OF BOX OFFICE IMPROVEMENT	7/30/04	952			952		MO S/L MO S/L	952	0
77	PHONE SYSTEM	7/19/06	507			507	7	MO S/L	507	0
82 84	STAGE FLOOR OUTLET IMPROVEMEN THEATRE - POWER SEQUENCE EQUIP		562 1,326			562 1,326	7 5	MO S/L MO S/L	562 1,326	0
89	BETA MIC, STAND & BOOMS	3/25/08	728			728	7		728	0
90	LINE - INT	5/20/08	525			525	_5	MO S/L	525_	_ 0
93	Architectural Services - Avalon II	6/30/09	3,400			3,400	-7	MO S/L	3,400	0
										,

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		Date		Bus Sec	Basis			
Asset	Description	In Service	Cost	<u>%</u> 179 Bonus	for Depr	Per Conv Meth	Prior	Current
95	Yamaha Digital Centralogic mixing cons/dis	8/19/08	20,224		20,224	7 MO S/L	20,224	0
97	New sound system	10/31/08	22,701		22,701	7 MO S/L	22,701	0
105	Avalon 2rd Floor - (LHI) FF	11/23/09	53,565		53,565	7 MO S/L	53,565	0
132	HVAC Stolz Listening Room	1/29/13	9,450		9,450	7 MO S/L	9,450	0
133	Electrical Improvements	10/19/12	1,004		1,004	7 MO S/L	1,004	0
134	HVAC Avalon 3rd Floor	1/29/13	6,000		6,000	7 MO S/L	6,000	0
146	Software Development - Plein Air	9/02/13	2,250	X	1,125	5 MOAmort	2,250	0
148	Camera Equipment - B&H Photo	2/25/15	13,520		13,520	5 MO S/L	13,520	0
	Sold/Scrapped: 6/30/25							
149	Camera Equipment - B&H Photo	2/25/15	25,513		25,513	5 MO S/L	25,513	0
	Sold/Scrapped: 6/30/25							_
150	Soundboard	8/29/14	4,318		4,318	7 MO S/L	4,318	0
151	Soundboard	9/08/14	1,861		1,861	7 MO S/L	1,861	0
152	Digital Camera & Lenses	7/28/14	7,606		7,606	5 MO S/L	7,606	0
157	Network Infrastructure Devices	7/03/14	2,592		2,592	5 MO S/L	2,592	0
161	Avalon Condominium Unit B - LAND	6/05/15	103,627		103,627	0 Land	0	0
224	Website Rebuild (Drupal)	11/01/23	25,280	***	25,280	5 MOAmort	3,371	5,056
228	Plein Air Website Development (WIP)	2/26/25	38,940	X	23,364	5 MOAmort	0	17,523
233	Theatrical Equipment Project (CIP)	6/30/25	5,850		5,850	0 Memo	0	0
234	Third Floor Renovation Project (CIP)	6/30/25	53,444		53,444	0 Memo	0	0
237	Restaurant Renovation Project (CIP)	6/30/25	4,500		4,500	0 Memo		0
	Total Other Depreciation		719,986		703,285		383,054	28,648
	Total ACRS and Other Depred	ciation	719,986		703,285		383,054	28,648
	•			•				
	Grand Totals		5,400,640		4,290,941		1,961,382	263,303
	Less: Dispositions and Transfe	ers	46,559		41,446		46,559	0
	Less: Start-up/Org Expense		0		0		0	0
	Net Grand Totals		5,354,081	•	4,249,495		1,914,823	263,303
	- 177 - 77777		- ,,	:	,= ., ,,,			,

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		Date		Basis	MD	MD	Federal	Difference
Asset	Description	In Service	Cost	for Depr	Prior .	Current	Current	Fed - MD
<u>7-year</u> 238	CGDS Property: Demountable Walls for Temp Gallery	6/05/25	25,577	25,577	0	913	25,577	24,664
239	Plein Air Academy Lights	6/18/25	3,828	3,828	0	137	3,828	3,691
244	Camera Equipment	7/01/24	27,015	27,015	0	6,754	18,911	12,157
		=	56,420	56,420	0	7,804	48,316	40,512
Non-I	Residential Real Property:							
235 236	Roof Recovery Project Lobby Bar Renovation Project	6/26/25 11/06/24	145,970 40,272	145,970 40,272	$0 \\ 0$	156 645	156 24,835	0 24,190
240	Sandpipe	10/31/24	5,285	5,285	0	96	3,259	3,163
241	HVAC - Dining area	6/07/25	25,825	25,825	0	28	25,825	25,797
242 243	Large outdoor air conditioner Awning	6/07/25 5/05/25	35,978 2,560	35,978 2,560	$0 \\ 0$	38 8	35,978 8	35,940 0
245	Ramp and Loading Platform	12/10/24	3,500	3,500	0	49	49	0
		=	259,390	259,390	0	1,020	90,110	89,090
	MACRS:							_
98 99	LHI - Avalon 2rd Floor Avalon 3rd Floor	11/23/09 6/08/10	153,055 306,288	153,055 306,288	55,961 110,277	3,826 7,853	3,826 7,853	$0 \\ 0$
102	Furniture - 3rd Floor	6/09/10	6,600	6,600	6,600	0	0	0
106	Capitalized interest on \$100K loan	6/30/10	15,000	15,000	5,385	384	384	
109	Satellite Installation Sold/Scrapped: 6/30/25	9/14/10	2,700	2,700	2,700	0	0	U
111	Network Terminations/Admin	10/31/10	2,637	2,637	2,637	0	0	
115 116	Curtains Output Replacement for Sound Board	11/19/10 11/23/10	1,500 841	1,500 841	1,500 841	$0 \\ 0$	0	
119	Bag End Replacement/Balcony Woofer	2/12/11	515	515	515	ő	ő	
120	Curtain Project	2/21/11	2,407	2,407	2,407	0	0	
121 129	Canon 7D Camera Led TV Light Panel	3/25/11 4/19/12	2,516 2,387	2,516 2,387	2,516 2,387	$0 \\ 0$	0	
135	Sound Equipment	4/13/13	1,794	1,794	1,794	0	0	0
139	Projector Sold/Scrapped: 6/30/25	11/19/12	2,632	2,632	2,632	0	0	0
141	HD Switcher for Met	8/29/13	3,203	3,203	3,203	0	0	
142	Sound Board Sold/Scrapped: 6/30/25	1/09/14	1,558	1,558	1,558	0	0	0
143	iPad for Sound Board	1/22/14	499	499	499	0	0	
144	Sound Board - Stoltz Sold/Scrapped: 6/30/25	1/22/14	636	636	636	0	0	0
147	Phase I Planning (Legal Fees)	5/31/19	41,775	41,775	5,490	1,071	1,071	0
153	Legal Fees for Acq Miles & Stockbridge	6/05/15	8,674	8,674	2,011	222	222	0
154 155	Legal Fees for Acq Miles & Stockbridge Legal Fees for Acq Miles & Stockbridge	6/05/15 6/05/15	902 1,792	902 1,792	209 415	23 46	23 46	$0 \\ 0$
156	Legal fees for Acq Miles & Stockbridge	6/05/15	10,375	10,375	2,405	266	266	ő
158	Carpet - Studio Downstairs	3/12/15	1,282	1,282	306	32 0	32 0	0
159 160	Curtains Avalon Condominium - Unit B	3/10/15 6/05/15	1,752 310,881	1,752 310,881	1,752 72,074	7,971	7,971	0
162	Projector	10/05/15	9,089	9,089	9,089	0	0	
163 164	Brickwork (Side of Building) Legal Fees for Acquist Miles & Stockbrid	6/13/16 10/14/15	58,207 16,582	58,207 16,582	35,866 10,217	3,437 979	3,437 490	0 -489
165	Credit Card Terminal	9/21/15	897	897	897	0	0	
166	Plotter Cornet MCTV	3/25/16	2,000	2,000	2,000	0	0	
167 169	Carpet - MCTV Inspection for MCTV Rodeo	5/10/16 6/06/16	1,907 2,500	1,907 2,500	1,907 2,500	$0 \\ 0$	$0 \\ 0$	
170	Front Doors (Bumpers/Exit Devices)	8/10/16	19,716	19,716	10,984	1,164	582	-582
171 172	Plumbing Improvements Marquee Improvements	12/02/16 2/18/17	10,223 3,200	10,223 3,200	10,223 3,200	$0 \\ 0$	$0 \\ 0$	
173	Heat Pump System (1st Floor Theatre Rear A	3/01/17	10,800	10,800	10,800	0	0	0
174 175	Gas Water Heater (Bathroom/Mop Sink/Bar Roof Hatch	5/16/17 8/11/17	4,400 9,400	4,400 9,400	4,400 4,682	0 555	0 313	0 -242
175	STARS Plaque/Wall	8/11/17 9/20/16	9,400	9,400 9,683	4,682 9,683	333 0	0	
177	Eartec Comstar - 4 Person Wireless	11/28/16	4,584	4,584	4,584	0	0	0
178 179	Power Edge T430 Server Electrical Hazard Removal/Floor Patching	4/28/17 6/14/17	4,775 6,945	4,775 6,945	4,775 6,945	0	0	
180	IT Support, Firewall, and Server Setup	10/31/17	3,013	3,013	3,013	0	_ 0	-
181	Camera Upgrades - Sony HD Cameras	5/03/18	23,868	23,868	23,868			
								1 /

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		Date		Basis	MD	MD	Federal	Difference
<u>Asset</u>	Description	In Service	Cost	for Depr	Prior	Current	Current	Fed - MD
182 183	ATA Road Case for Yamaha M7CL/48 Display Rack for PAE (Railings and Lights)	4/12/18	3,167 3,399	3,167 3,399	3,167 2,536	$0 \\ 223$	0	0 -223
184	Accounting Office Space	12/20/17	66,021	66,021	11,074	1,693	1,693	0
185	Balcony & Bathroom Renovations (#203 &		6,545	6,545	860	168	168	0
186 187	Theatre Floors Refinish Decorative Paint (Entryway & Theatre) (#20	5/31/19 1/31/19	10,567 82,132	10,567 82,132	1,389 11,495	271 2,106	271 2,106	$0 \\ 0$
188	Plaster Restoration (#20	5/31/19	27,575	27,575	3,624	707	707	ő
189	Lobby & Hallway Lighting	5/31/19	13,845	13,845	1,819	355	355	0
190 191	Carpeting (#198) 3rd Floor Awning	12/31/18 11/25/17	29,010 15,000	29,010 15,000	4,122 2,548	744 385	744 0	0 -385
192	Fly Space Rigging	12/06/17	71,935	71,935	12,066	1,845	ő	-1,845
193	Mixing Board and Installation	11/21/17	21,236	21,236	20,529	707	948	241
194 195	Redevelopment of the Restrooms Redesign Theatre Balcony	5/31/19 5/31/19	12,739 18,744	12,739 18,744	1,674 2,463	327 481	327 481	$0 \\ 0$
196	Legal Fees for Acq.: Unit A-1, A-2, and A-3	9/26/18	6,092	6,092	905	156	156	0
197	Cameras (MCTV)	8/07/18	6,261	6,261	6,261	1 250	1 250	$0 \\ 0$
198 199	Carpeting (#190) Laser Projector and Lens	12/31/18 1/11/19	48,763 8,863	48,763 8,863	6,929 7,676	1,250 791	1,250 0	-791
200	Theatrical Lighting	3/07/19	149,374	149,374	129,377	13,331	0	-13,331
201 202	Decorative Paint (Entryway & Theatre) (#18 Balcony Chairs	1/31/19 4/30/19	208,529 42,370	208,529 42,370	29,185 36,698	5,347 3,781	5,347 0	0 -3,781
202	Balcony & Bathroom Renovations (#185 &		931,235	931,235	122,374	23,878	23,878	-5,781
204	Pump Motor (Elevator)	6/19/19	11,042	11,042	1,427	284	284	0
205 206	Dell 7730 Laptop Equipment Upgrades (MCTV)	6/27/19 8/20/19	2,544 18,845	2,544 18.845	2,544 17,759	0 1,086	0	0 -1,086
207	Balcony & Bathroom Renovations (#185 &		40,091	40,091	4,840	1,028	1,002	-26
208	SLR Remodel - Windows	7/01/22	25,287	25,287	1,981	1,011	1,011	0
209 210	SLR Remodel - Resurfacing Tables/Bars/Flo SLR Remodel - New Sound System	7/01/22 7/01/22	13,326 19,014	13,326 19,014	3,731 5,324	1,919 2,738	0	-1,919 -2,738
211	Apple Imac 27"	8/20/20	3,399	3,399	2,812	391	0	-391
212	MCTV Fader & Monitor	8/26/20	3,498	3,498	2,894	403	0	-403
213 214	Laptop/Keyboard/Mouse - Al Bond Digital Signage Player	3/01/21 3/11/21	5,604 4,010	5,604 4,010	4,636 3,317	646 462	0	-646 -462
215	MCTV Equipment - Kabam's Studio	3/22/21	47,521	47,521	39,309	5,475	ő	-5,475
216	MCTV Tricaster TC410 Plus and Accessori		10,231	10,231	7,284	1,179	176	-1,179
217 218	Theatre HVAC - Testing & Balancing Surve Performance Based Analysis and Report	1/20/22	6,876 10,500	6,876 10,500	448 0	176 0	176 0	$0 \\ 0$
	Out Of Service: 11/30/21		,	,				
219	A&E Services - Building Permit for Pavilion Out Of Service: 11/30/21	8/08/22	3,737	3,737	0	0	0	0
220	Avalon Corner (Building)	9/16/22	814,346	814,346	37,411	20,881	20,881	0
221 222	Avalon Corner (Kitchen Assets) LED Panels & Hangers	9/16/22 11/21/22	175,000 41,867	175,000 41,867	136,111 21,771	25,926 8,038	0	-25,926 -8,038
225	Stoltz Pavilion	11/06/20	206,343	206,343	39,205	0,038	0	0
22.5	Out Of Service: 11/30/21	2/12/24	. 20.1	. 20.1	,	1.540	1.7.10	0
226 227	Ice Machine (3) Camera Equipment	2/13/24 7/03/23	6,294 26,077	6,294 26,077	899 3,725	1,542 6,386	1,542 6,386	$0 \\ 0$
221	(5) Camera Equipment	1103123	4,364,844	4,364,844	1,204,542	165,946	96,229	-69,717
			4,304,044	4,304,644	1,204,342	105,740	70,227	-07,717
04	Dominosistiano							
	Depreciation: FURMAN POWER CONDITIONERS (2)	2/01/01	300	300	300	0	0	0
48	PIANO	3/18/03	32,850	32,850	32,850	0	0	0
60 61	2ND FLOOR - OFFICE SPACE 2ND FLOOR FLOORING- LHI	11/20/03 9/06/05	236,706	236,706 3,830	128,044	6,069 0	6,069 0	$0 \\ 0$
62	2ND FLOOR FLOORING- LHI 2ND FLOOR FLOORING- LHI	12/30/05	3,830 461	3,830 461	3,830 461	0	0	0
65	STERLING CHAIRS	10/21/05	34,743	34,743	34,743	0	0	0
	1/2 OF BOX OFFICE IMPROVEMENT 1/2 OF BOX OFFICE IMPROVEMENT	7/30/04 7/30/04	851 952	851 952	851 952	$0 \\ 0$	0	$0 \\ 0$
77	PHONE SYSTEM	7/19/06	507	507	507	0	0	0
82	STAGE FLOOR OUTLET IMPROVEMEN	5/12/04	562	562	562	0	0	0
84 89	THEATRE - POWER SEQUENCE EQUIP. BETA MIC, STAND & BOOMS	6/22/07 3/25/08	1,326 728	1,326 728	1,326 728	$0 \\ 0$	0	$0 \\ 0$
	LINE - INT	5/20/08	525	525	525	0	0	0
93	Architectural Services - Avalon II	6/30/09	3,400	3,400	3,400	0	0	0
95 97	Yamaha Digital Centralogic mixing cons/dis New sound system	8/19/08 10/31/08	20,224 22,701	20,224 22,701	20,224 22,701	$0 \\ 0$	0	$0 \\ 0$
105	Avalon 2rd Floor - (LHI) FF	11/23/09	53,565	53,565	53,565	0	0	0
132	HVAC Stolz Listening Room	1/29/13	9,450	9,450	9,450	1010	+ 0	0
133	Electrical Improvements	10/19/12	1,004	1,004	1,004			UDY
								1 2

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Asset	Description	Date In Service	Cost	Basis for Depr	MD Prior	MD Current	Federal Current	Difference Fed - MD
134	HVAC Avalon 3rd Floor	1/29/13	6,000	6,000	6,000	0	0	
146	Software Development - Plein Air	9/02/13	2,250	2,250	2,250	ő	ő	ő
148	Camera Equipment - B&H Photo	2/25/15	13,520	13,520	13,520	0	0	0
	Sold/Scrapped: 6/30/25		,	,	Ź			
149	Camera Equipment - B&H Photo	2/25/15	25,513	25,513	25,513	0	0	0
	Sold/Scrapped: 6/30/25							
150	Soundboard	8/29/14	4,318	4,318	4,318	0	0	0
151	Soundboard	9/08/14	1,861	1,861	1,861	0	0	0
152	Digital Camera & Lenses	7/28/14	7,606	7,606	7,606	0	0	0
157	Network Infrastructure Devices	7/03/14	2,592	2,592	2,592	0	0	0
161	Avalon Condominium Unit B - LAND	6/05/15	103,627	103,627	0	0	0	0
224	Website Rebuild (Drupal)	11/01/23	25,280	25,280	3,371	5,056	5,056	0
228	Plein Air Website Development (WIP)	2/26/25	38,940	38,940	0	3,245	17,523	14,278
233	Theatrical Equipment Project (CIP)	6/30/25	5,850	5,850	0	0	0	0
234	Third Floor Renovation Project (CIP)	6/30/25	53,444	53,444	0	0	0	0
237	Restaurant Renovation Project (CIP)	6/30/25	4,500	4,500	0	0	0	0
	Total Other Depreciation	_	719,986	719,986	383,054	14,370	28,648	14,278
	Total ACRS and Other Depre	ciation _	719,986	719,986	383,054	14,370	28,648	14,278
		_						
	Grand Totals		5,400,640	5,400,640	1,587,596	189,140	263,303	74,163
	Less: Dispositions		46,559	46,559	46,559	0	0	0
	Less: Start-up/Org Expense	_	0	0	0	0	0	0
	Net Grand Totals	_	5,354,081	5,354,081	1,541,037	189,140	263,303	74,163

50810 Avalon Foundation, Inc.

50810 Avalon Foundation, Inc.

50810 Avalon Foundation, Inc.

50810 Avalon Foundation, Inc.

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Asset	Property Description	Date In Service	Tax Cost	Bus Pct		Surrent Bonus	Prior Bonus	Tax - Basis for Depr
102	Furniture - 3rd Floor	6/09/10	6,600		0	0	3,300	3,300
109	Satellite Installation	9/14/10	2,700		0	0	2,700	0
	Network Terminations/Admin Curtains	10/31/10 11/19/10	2,637 1,500		0	$0 \\ 0$	2,637 1,500	0
	Output Replacement for Sound Board	11/19/10	1,300		0	0	841	0
119	Bag End Replacement/Balcony Woofer	2/12/11	515		0	0	515	0
	Curtain Project	2/21/11	2,407		0	0	2,407	0
	Canon 7D Camera Led TV Light Panel	3/25/11 4/19/12	2,516 2,387		0	$0 \\ 0$	2,516 1,194	0 1,193
	Sound Equipment	4/13/13	1,794		0	0	897	897
139	Projector	11/19/12	2,632		0	0	1,316	1,316
	HD Switcher for Met	8/29/13	3,203		0	0	1,602	1,601
	Sound Board iPad for Sound Board	1/09/14 1/22/14	1,558 499		0	$0 \\ 0$	779 250	779 249
	Sound Board - Stoltz	1/22/14	636		Ö	ŏ	318	318
	Software Development - Plein Air	9/02/13	2,250		0	0	1,125	1,125
	Phase I Planning (Legal Fees)	5/31/19	41,775		0	$0 \\ 0$	0 976	41,775
	Curtains Projector	3/10/15 10/05/15	1,752 9,089		0	0	876 4,545	876 4 , 544
	Legal Fees for Acquist Miles & Stockbridge		16,582		Ö	ŏ	8,291	8,291
165	Credit Card Terminal	9/21/15	897		0	0	448	449
	Plotter	3/25/16	2,000		0	0	1,000	1,000
	Front Doors (Bumpers/Exit Devices) Plumbing Improvements	8/10/16 12/02/16	19,716 10,223		0	$0 \\ 0$	9,858 5,112	9,858 5,111
	Marquee Improvements	2/18/17	3,200		ő	ő	1,600	1,600
173	Heat Pump System (1st Floor Theatre Rear A	3/01/17	10,800		0	0	5,400	5,400
	Gas Water Heater (Bathroom/Mop Sink/Bar A		4,400		0	0	2,200	2,200
	Roof Hatch STARS Plaque/Wall	8/11/17 9/20/16	9,400 9,683		0	$0 \\ 0$	4,700 4,842	4,700 4,841
177	Eartec Comstar - 4 Person Wireless	11/28/16	4,584		0	0	2,292	2,292
178	Power Edge T430 Server	4/28/17	4,775		0	0	2,387	2,388
	Electrical Hazard Removal/Floor Patching	6/14/17	6,945		0	0	3,472	3,473
	IT Support, Firewall, and Server Setup	10/31/17 5/03/18	3,013 23,868		0	$0 \\ 0$	3,013 23,868	0
	Camera Upgrades - Sony HD Cameras ATA Road Case for Yamaha M7CL/48	4/12/18	23,808 3,167		0	0	3,167	0
183	Display Rack for PAE (Railings and Lights)	5/31/18	3,399		Ö	ŏ	3,399	Ö
185	Balcony & Bathroom Renovations (#203 & #		6,545		0	0	0	6,545
	Theatre Floors Refinish Decorative Paint (Entryway & Theatre) (#200	5/31/19	10,567 82,132		0	$0 \\ 0$	$0 \\ 0$	10,567 82,132
	Plaster Restoration (#200	5/31/19	27,575		0	0	0	27,575
	Lobby & Hallway Lighting	5/31/19	13,845		0	0	0	13,845
	Carpeting (#198)	12/31/18	29,010		0	0	0	29,010
	3rd Floor Awning Fly Space Rigging	11/25/17 12/06/17	15,000 71,935		0	$0 \\ 0$	15,000 71,935	0
	Redevelopment of the Restrooms	5/31/19	12,739		0	0	71,933	12,739
195	Redesign Theatre Balcony	5/31/19	18,744		Ö	ŏ	0	18,744
	Legal Fees for Acq.: Unit A-1, A-2, and A-3		6,092		0	0	0	6,092
	Cameras (MCTV) Carpeting (#190)	8/07/18 12/31/18	6,261 48,763		0	$0 \\ 0$	6,261 0	0 48,763
	Laser Projector and Lens	1/11/19	8,863		0	0	8,863	0
200	Theatrical Lighting	3/07/19	149,374		0	0	149,374	0
	Decorative Paint (Entryway & Theatre) (#187		208,529		0	0	42.270	208,529
	Balcony Chairs Balcony & Bathroom Renovations (#185 & #	4/30/19 5/31/19	42,370 931,235		0	$0 \\ 0$	42,370 0	931,235
	Pump Motor (Elevator)	6/19/19	11,042		ő	0	ő	11,042
205	Dell 7730 Laptop	6/27/19	2,544		0	0	2,544	0
206	Equipment Upgrades (MCTV)	8/20/19	18,845		0	0	18,845	0
	Balcony & Bathroom Renovations (#185 & # SLR Remodel - Resurfacing Tables/Bars/Floc	7/01/22	40,091 13,326		0	$0 \\ 0$	0 13,326	40,091 0
	SLR Remodel - New Sound System	7/01/22	19,014		0	0	19,014	0
211	Apple Imac 27"	8/20/20	3,399		0	0	3,399	0
	MCTV Fader & Monitor	8/26/20	3,498		0	0	3,498	0
213 214	Laptop/Keyboard/Mouse - Al Bond Digital Signage Player	3/01/21 3/11/21	5,604 4,010		0	$0 \\ 0$	5,604 4,010	0
	MCTV Equipment - Kabam's Studio	3/22/21	47,521		0	0	47,521	0
216	MCTV Tricaster TC410 Plus and Accessories	7/07/21	10,231		0	0	10,231	0
	Theatre HVAC - Testing & Balancing Survey		6,876		0	0	0	6,876
	Performance Based Analysis and Report A&E Services - Building Permit for Pavilion	1/20/22 8/08/22	10,500 3,737		0	$0 \\ 0$	$0 \\ 0$	10,500 3,737
	Avalon Corner (Kitchen Assets)	9/16/22	175,000		0	10	175,000	3,737
	LED Panels & Hangers	11/21/22	41,867		dit		41,867	0

52-1850874 FYE: 6/30/2025 Bonus Depreciation Report Form 990, Page 1

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
225	Stoltz Pavilion	11/06/20	206,343		0	0	206,343	0
228	Plein Air Website Development (WIP)	2/26/25	38,940		0	15,576	0	23,364
236	Lobby Bar Renovation Project	11/06/24	40,272		0	24,163	0	16,109
238	Demountable Walls for Temp Gallery	6/05/25	25,577		0	25,577	0	0
	Plein Air Academy Lights	6/18/25	3,828		0	3,828	0	0
240	Sandpipe	10/31/24	5,285		0	3,171	0	2,114
241	HVAC - Dining area	6/07/25	25,825		0	25,825	0	0
242	Large outdoor air conditioner	6/07/25	35,978		0	35,978	0	0
244	Camera Equipment	7/01/24	27,015		0	16,209	0	10,806
	2,739,690	-	0	150,327	959,372	1,629,991		
	7,526		0	0	5,113	2,413		
	2,732,164		0	150,327	954,259	1,627,578		

50810 Avalon Foundation, Inc. **Depreciation Adjustment Report** 52-1850874 **All Business Activities** FYE: 6/30/2025 AMT Adjustments/ Form Unit Asset Description Tax AMT Preferences There are no assets that meet the criteria of this report

Client Copy

50810 Avalon Foundation, Inc. 52-1850874 Future Depreciation Report FYE: 6/30/26

Form 990, Page 1 FYE: 6/30/2025

Asset	Description	Date In Service	Cost	Tax	AMT
7 10001	Bossipilon	0011100			7
Prior M	ACRS:				
98	LHI - Avalon 2rd Floor	11/23/09	153,055	3,827	0
99	Avalon 3rd Floor	6/08/10	306,288	7,854	0
102	Furniture - 3rd Floor	6/09/10	6,600	0	0
106 111	Capitalized interest on \$100K loan Network Terminations/Admin	6/30/10 10/31/10	15,000 2,637	385	0
111	Curtains	11/19/10	1,500	$0 \\ 0$	0
116	Output Replacement for Sound Board	11/23/10	841	ő	ŏ
119	Bag End Replacement/Balcony Woofer	2/12/11	515	0	0
120	Curtain Project	2/21/11	2,407	0	0
121 129	Canon 7D Camera Led TV Light Panel	3/25/11 4/19/12	2,516 2,387	$0 \\ 0$	0
135	Sound Equipment	4/13/13	1,794	0	0
141	HD Switcher for Met	8/29/13	3,203	0	0
143	iPad for Sound Board	1/22/14	499	0	0
147	Phase I Planning (Legal Fees)	5/31/19	41,775	1,071	$0 \\ 0$
153 154	Legal Fees for Acq Miles & Stockbridge Legal Fees for Acq Miles & Stockbridge	6/05/15 6/05/15	8,674 902	223 23	0
155	Legal Fees for Acq Miles & Stockbridge	6/05/15	1,792	46	ő
156	Legal fees for Acq Miles & Stockbridge	6/05/15	10,375	266	0
158	Carpet - Studio Downstairs	3/12/15	1,282	33	0
159 160	Curtains Avalon Condominium - Unit B	3/10/15 6/05/15	1,752 310,881	0 7,971	0
162	Projector	10/05/15	9,089	0	0
163	Brickwork (Side of Building)	6/13/16	58,207	3,437	0
164	Legal Fees for Acquist Miles & Stockbridge	10/14/15	16,582	489	0
165 166	Credit Card Terminal Plotter	9/21/15 3/25/16	897 2,000	$0 \\ 0$	0
167	Carpet - MCTV	5/10/16	2,000 1,907	0	0
169	Inspection for MCTV Rodeo	6/06/16	2,500	ő	ő
170	Front Doors (Bumpers/Exit Devices)	8/10/16	19,716	582	0
171	Plumbing Improvements	12/02/16	10,223	0	0
172 173	Marquee Improvements Heat Pump System (1st Floor Theatre Rear Area	2/18/17 3/01/17	3,200 10,800	$0 \\ 0$	$0 \\ 0$
174	Gas Water Heater (Bathroom/Mop Sink/Bar Area	5/16/17	4,400	ő	0
175	Roof Hatch	8/11/17	9,400	313	0
176	STARS Plaque/Wall	9/20/16	9,683	0	0
177 178	Eartec Comstar - 4 Person Wireless Power Edge T430 Server	11/28/16 4/28/17	4,584 4,775	$0 \\ 0$	0
179	Electrical Hazard Removal/Floor Patching	6/14/17	6,945	0	0
180	IT Support, Firewall, and Server Setup	10/31/17	3,013	Ö	Ö
181	Camera Upgrades - Sony HD Cameras	5/03/18	23,868	0	0
182 183	ATA Road Case for Yamaha M7CL/48 Display Rack for PAE (Railings and Lights)	4/12/18 5/31/18	3,167 3,399	$0 \\ 0$	$0 \\ 0$
184	Accounting Office Space	12/20/17	66,021	1,693	0
185	Balcony & Bathroom Renovations (#203 & #207	5/31/19	6,545	168	ő
186	Theatre Floors Refinish	5/31/19	10,567	270	0
187	Decorative Paint (Entryway & Theatre) (#200)	1/31/19	82,132 27,575	2,106	0
188 189	Plaster Restoration Lobby & Hallway Lighting	5/31/19 5/31/19	27,575 13,845	707 355	0
190	Carpeting (#198)	12/31/18	29,010	744	0
191	3rd Floor Awning	11/25/17	15,000	0	0
192	Fly Space Rigging	12/06/17	71,935	0	0
193 194	Mixing Board and Installation Redevelopment of the Restrooms	11/21/17 5/31/19	21,236 12,739	0 326	0
195	Redesign Theatre Balcony	5/31/19	18,744	480	0
196	Legal Fees for Acq.: Unit A-1, A-2, and A-3	9/26/18	6,092	156	0
197	Cameras (MCTV)	8/07/18	6,261	0	0
198	Carpeting (#190)	12/31/18	48,763	1,251	0
199 200	Laser Projector and Lens Theatrical Lighting	1/11/19 3/07/19	8,863 149,374	0	0
201	Decorative Paint (Entryway & Theatre) (#187)	1/31/19	208,529	5,347	Ö
202	Balcony Chairs	4/30/19	42,370	0	0
203	Balcony & Bathroom Renovations (#185 & #207		931,235	23,877	0
204 205	Pump Motor (Elevator) Dell 7730 Laptop	6/19/19 6/27/19	11,042 2,544	283 0	0
206	Equipment Upgrades (MCTV)	8/20/19	18,845	0	0
207	Balcony & Bathroom Renovations (#185 & #203		40,091	1,003	1en t

50810 Avalon Foundation, Inc.
52-1850874 Future Depreciation Report FYE: 6/30/26

Form 990, Page 1 FYE: 6/30/2025

Appet	Description	Date In	Coat	Toy	ANT
Asset	Description	Service	Cost	Tax	AMT
208 209	SLR Remodel - Windows	7/01/22	25,287	1,012	0
210	SLR Remodel - Resurfacing Tables/Bars/Floord SLR Remodel - New Sound System	7/01/22 7/01/22	13,326 19,014	$0 \\ 0$	$0 \\ 0$
211	Apple Imac 27"	8/20/20	3,399	0	0
212	MCTV Fader & Monitor	8/26/20	3,498	Ő	ő
213	Laptop/Keyboard/Mouse - Al Bond	3/01/21	5,604	0	0
214	Digital Signage Player	3/11/21	4,010	0	0
215	MCTV Equipment - Kabam's Studio	3/22/21	47,521	0	0
216 217	MCTV Tricaster TC410 Plus and Accessories Theatre HVAC - Testing & Balancing Survey	7/07/21 12/31/21	10,231 6,876	0 177	$0 \\ 0$
218	Performance Based Analysis and Report	1/20/22	10,500	0	0
219	A&E Services - Building Permit for Pavilion	8/08/22	3,737	Ő	ő
220	Avalon Corner (Building)	9/16/22	814,346	20,881	0
221	Avalon Corner (Kitchen Assets)	9/16/22	175,000	0	0
222	LED Panels & Hangers	11/21/22	41,867	0	0
225 226	Stoltz Pavilion Ice Machine	11/06/20 2/13/24	206,343 6,294	0 1,101	$0 \\ 0$
227	(3) Camera Equipment	7/03/23	26,077	4,562	0
235	Roof Recovery Project	6/26/25	145,970	3,743	ŏ
236	Lobby Bar Renovation Project	11/06/24	40,272	1,074	0
238	Demountable Walls for Temp Gallery	6/05/25	25,577	0	0
239	Plein Air Academy Lights	6/18/25	3,828	0	0
240 241	Sandpipe HVAC Dining area	10/31/24	5,285 25,825	141	$0 \\ 0$
241	HVAC - Dining area Large outdoor air conditioner	6/07/25 6/07/25	25,825 35,978	$0 \\ 0$	0
243	Awning	5/05/25	2,560	66	ő
244	Camera Equipment	7/01/24	27,015	2,315	0
245	Ramp and Loading Platform	12/10/24	3,500	89	0
			4,673,128	100,447	0
Other I	Depreciation:				
41	ELIDMAN DOWED CONDITIONEDS (2)	2/01/01	200	0	0
41 48	FURMAN POWER CONDITIONERS (2) PIANO	2/01/01 3/18/03	300 32,850	$0 \\ 0$	$0 \\ 0$
60	2ND FLOOR - OFFICE SPACE	11/20/03	236,706	6,070	0
61	2ND FLOOR FLOORING- LHI	9/06/05	3,830	0	Õ
62	2ND FLOOR FLOORING- LHI	12/30/05	461	0	0
65	STERLING CHAIRS	10/21/05	34,743	0	0
69 70	1/2 OF BOX OFFICE IMPROVEMENT 1/2 OF BOX OFFICE IMPROVEMENT	7/30/04 7/30/04	851 952	$0 \\ 0$	$0 \\ 0$
70	PHONE SYSTEM	7/19/06	507	0	0
82	STAGE FLOOR OUTLET IMPROVEMENT - I		562	ő	ő
84	THEATRE - POWER SEQUENCE EQUIPMEN		1,326	0	0
89	BETA MIC, STAND & BOOMS	3/25/08	728	0	0
90	LINE - INT	5/20/08	525	0	0
93	Architectural Services - Avalon II	6/30/09	3,400	0	0
95 97	Yamaha Digital Centralogic mixing cons/disp New sound system	8/19/08 10/31/08	20,224 22,701	0	$0 \\ 0$
105	Avalon 2rd Floor - (LHI) FF	11/23/09	53,565	ő	0
132	HVAC Stolz Listening Room	1/29/13	9,450	0	Õ
133	Electrical Improvements	10/19/12	1,004	0	0
134	HVAC Avalon 3rd Floor	1/29/13	6,000	0	0
146	Software Development - Plein Air	9/02/13	2,250	0	0
150 151	Soundboard Soundboard	8/29/14 9/08/14	4,318 1,861	0	$0 \\ 0$
152	Digital Camera & Lenses	7/28/14	7,606	0	0
157	Network Infrastructure Devices	7/03/14	2,592	0	0
161	Avalon Condominium Unit B - LAND	6/05/15	103,627	0	0
224	Website Rebuild (Drupal)	11/01/23	25,280	5,056	0
228	Plein Air Website Development (WIP) Theorical Equipment Project (CIP)	2/26/25	38,940 5,850	4,673	0
233 234	Theatrical Equipment Project (CIP) Third Floor Renovation Project (CIP)	6/30/25 6/30/25	5,850 53,444	0	$0 \\ 0$
237	Restaurant Renovation Project (CIP)	6/30/25	4,500	ő	ő
	Total Other Depreciation		680,953	15,799	0
I	Total Other Depreciation		000,755	13,177	



50810 Avalon Foundation, Inc.
52-1850874 Future Depreciation Report FYE: 6/30/26

Form 990, Page 1 FYE: 6/30/2025

Asset	Description	Date In Service	Cost	Tax	AMT	
	Total ACRS and Other Depreciation		680,953	15,799	0	
	Grand Totals		5,354,081	116,246	0	

50810 Avalon Foundation, Inc. 52-1850874 MD Future Depreciation Report Form 990, Page 1

FYE: 6/30/26

Drior M	<u> </u>	Service	Cost	MD	
1 1 101 IVL	ACRS:				
98	LHI - Avalon 2rd Floor	11/23/09	153,055	3,827	
99	Avalon 3rd Floor	6/08/10	306,288	7,854	
102	Furniture - 3rd Floor	6/09/10	6,600	0	
106	Capitalized interest on \$100K loan	6/30/10	15,000	385	
111 115		10/31/10 11/19/10	2,637 1,500	$0 \\ 0$	
115	Output Replacement for Sound Board	11/19/10	1,300 841	0	
119	Bag End Replacement/Balcony Woofer	2/12/11	515	0	
120	Curtain Project	2/21/11	2,407	ő	
121	Canon 7D Čamera	3/25/11	2,516	0	
129	Led TV Light Panel	4/19/12	2,387	0	
135	Sound Equipment	4/13/13	1,794	0	
141	HD Switcher for Met	8/29/13	3,203	0	
143 147	iPad for Sound Board Phase I Planning (Legal Fees)	1/22/14 5/31/19	499 41,775	0 1,071	
153	Legal Fees for Acq Miles & Stockbridge	6/05/15	8,674	223	
154	Legal Fees for Acq Miles & Stockbridge	6/05/15	902	23	
155	Legal Fees for Acq Miles & Stockbridge	6/05/15	1,792	46	
156	Legal fees for Acq Miles & Stockbridge	6/05/15	10,375	266	
158	Carpet - Studio Downstairs	3/12/15	1,282	33	
159	Curtains	3/10/15	1,752	0	
160	Avalon Condominium - Unit B	6/05/15	310,881	7,971	
162 163	Projector Brickwork (Side of Building)	10/05/15 6/13/16	9,089 58,207	0 3,437	
164	Legal Fees for Acquist Miles & Stockbridge	10/14/15	16,582	979	
165	Credit Card Terminal	9/21/15	897	0	
166	Plotter	3/25/16	2,000	0	
167	Carpet - MCTV	5/10/16	1,907	0	
169	Inspection for MCTV Rodeo	6/06/16	2,500	0	
170 171	Front Doors (Bumpers/Exit Devices)	8/10/16 12/02/16	19,716 10,223	1,165	
171	Plumbing Improvements Marquee Improvements	2/18/17	3,200	$0 \\ 0$	
173	Heat Pump System (1st Floor Theatre Rear Area	3/01/17	10,800	0	
174	Gas Water Heater (Bathroom/Mop Sink/Bar Area	5/16/17	4,400	ő	
175	Roof Hatch	8/11/17	9,400	555	
176	STARS Plaque/Wall	9/20/16	9,683	0	
177	Eartec Comstar - 4 Person Wireless	11/28/16	4,584	0	
178 179	Power Edge T430 Server	4/28/17	4,775 6,945	$0 \\ 0$	
180	Electrical Hazard Removal/Floor Patching IT Support, Firewall, and Server Setup	6/14/17 10/31/17	6,945 3,013	0	
181	Camera Upgrades - Sony HD Cameras	5/03/18	23,868	0	
182	ATA Road Case for Yamaha M7CL/48	4/12/18	3,167	Ö	
183	Display Rack for PAE (Railings and Lights)	5/31/18	3,399	222	
184	Accounting Office Space	12/20/17	66,021	1,693	
185	Balcony & Bathroom Renovations (#203 & #207	5/31/19	6,545	168	
186	Theatre Floors Refinish Decerative Point (Entrywey & Theatre) (#200)	5/31/19	10,567	270	
187 188	Decorative Paint (Entryway & Theatre) (#200) Plaster Restoration	1/31/19 5/31/19	82,132 27,575	2,106 707	
189	Lobby & Hallway Lighting	5/31/19	13,845	355	
190	Carpeting (#198)	12/31/18	29,010	744	
191	3rd Floor Awning	11/25/17	15,000	384	
192	Fly Space Rigging	12/06/17	71,935	1,844	
193	Mixing Board and Installation	11/21/17	21,236	0	
194	Redevelopment of the Restrooms	5/31/19	12,739 18 744	326 480	
195 196	Redesign Theatre Balcony Legal Fees for Acq.: Unit A-1, A-2, and A-3	5/31/19 9/26/18	18,744 6,092	480 156	
190	Cameras (MCTV)	8/07/18	6,261	0	
198	Carpeting (#190)	12/31/18	48,763	1,251	
199	Laser Projector and Lens	1/11/19	8,863	396	
200	Theatrical Lighting	3/07/19	149,374	6,666	
201	Decorative Paint (Entryway & Theatre) (#187)	1/31/19	208,529	5,347	
202	Balcony Chairs	4/30/19	42,370	1,891	
203	Balcony & Bathroom Renovations (#185 & #207	5/31/19	931,235	23,877	
204 205	Pump Motor (Elevator) Dell 7730 Laptop	6/19/19 6/27/19	11,042 2,544	283 0	
205	Equipment Upgrades (MCTV)	8/20/19	18,845		
207	Balcony & Bathroom Renovations (#185 & #203		40,091	[1,028] 1 \triangle 1	it Co
			,		

52-1850874

FYE: 6/30/2025

MD Future Depreciation Report

Form 990, Page 1

FYE: 6/30/26

		Date In		
<u>Asset</u>	Description	Service	Cost	MD
208	SLR Remodel - Windows	7/01/22	25,287	1,012
209 210	SLR Remodel - Resurfacing Tables/Bars/Floord SLR Remodel - New Sound System	7/01/22 7/01/22	13,326 19,014	1,535 2,190
211	Apple Imac 27"	8/20/20	3,399	196
212	MCTV Fader & Monitor	8/26/20	3,498	201
213	Laptop/Keyboard/Mouse - Al Bond	3/01/21	5,604	322
214 215	Digital Signage Player MCTV Equipment - Kabam's Studio	3/11/21 3/22/21	4,010 47,521	231 2,737
216	MCTV Tricaster TC410 Plus and Accessories	7/07/21	10,231	1,179
217	Theatre HVAC - Testing & Balancing Survey	12/31/21	6,876	177
218	Performance Based Analysis and Report	1/20/22	10,500	0
219 220	A&E Services - Building Permit for Pavilion Avalon Corner (Building)	8/08/22 9/16/22	3,737 814,346	0 20,881
221	Avalon Corner (Kitchen Assets)	9/16/22	175,000	12,963
222	LED Panels & Hangers	11/21/22	41,867	4,823
225	Stoltz Pavilion	11/06/20	206,343	0
226 227	Ice Machine (3) Camera Equipment	2/13/24 7/03/23	6,294 26,077	1,101 4,562
235	Roof Recovery Project	6/26/25	145,970	3,743
236	Lobby Bar Renovation Project	11/06/24	40,272	1,033
238	Demountable Walls for Temp Gallery	6/05/25	25,577	7,047
239 240	Plein Air Academy Lights Sandpipe	6/18/25 10/31/24	3,828 5,285	1,054 136
240	HVAC - Dining area	6/07/25	25,825	662
242	Large outdoor air conditioner	6/07/25	35,978	923
243	Awning	5/05/25	2,560	66 5.700
244 245	Camera Equipment Ramp and Loading Platform	7/01/24 12/10/24	27,015 3,500	5,789 89
2-13	ramp and Estaing Fratism	12/10/24	4,673,128	152,681
			4,073,128	132,001
Othor I	Danuaciation.			
Outer 1	Depreciation:			
41	FURMAN POWER CONDITIONERS (2)	2/01/01	300	0
48 60	PIANO 2ND FLOOR - OFFICE SPACE	3/18/03 11/20/03	32,850 236,706	6,070
61	2ND FLOOR - OFFICE SPACE 2ND FLOOR FLOORING- LHI	9/06/05	3,830	0,070
62	2ND FLOOR FLOORING- LHI	12/30/05	461	0
65	STERLING CHAIRS	10/21/05	34,743	0
69 70	1/2 OF BOX OFFICE IMPROVEMENT	7/30/04 7/30/04	851 952	$0 \\ 0$
77	1/2 OF BOX OFFICE IMPROVEMENT PHONE SYSTEM	7/19/06	507	0
82	STAGE FLOOR OUTLET IMPROVEMENT - I	5/12/04	562	0
84	THEATRE - POWER SEQUENCE EQUIPMEN	6/22/07	1,326	0
89 90	BETA MIC, STAND & BOOMS	3/25/08	728 525	$0 \\ 0$
93	LINE - INT Architectural Services - Avalon II	5/20/08 6/30/09	3,400	0
95	Yamaha Digital Centralogic mixing cons/disp	8/19/08	20,224	0
97	New sound system	10/31/08	22,701	0
105 132	Avalon 2rd Floor - (LHI) FF HVAC Stolz Listening Room	11/23/09 1/29/13	53,565 9,450	$0 \\ 0$
133	Electrical Improvements	10/19/12	1,004	ő
134	HVAC Avalon 3rd Floor	1/29/13	6,000	0
146	Software Development - Plein Air	9/02/13	2,250	0
150 151	Soundboard Soundboard	8/29/14 9/08/14	4,318 1,861	$0 \\ 0$
152	Digital Camera & Lenses	7/28/14	7,606	0
157	Network Infrastructure Devices	7/03/14	2,592	0
161	Avalon Condominium Unit B - LAND	6/05/15	103,627	0 5.056
224 228	Website Rebuild (Drupal) Plein Air Website Development (WIP)	11/01/23 2/26/25	25,280 38,940	5,056 7,788
233	Theatrical Equipment Project (CIP)	6/30/25	5,850	0
234	Third Floor Renovation Project (CIP)	6/30/25	53,444	0
237	Restaurant Renovation Project (CIP)	6/30/25	4,500	0
	Total Other Depreciation		680,953	18,914



52-1850874 MD Future Depreciation Report FYE: 6/30/26

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Asset	Description	Date In Service	Cost	MD
	Total ACRS and Other Depreciation		680,953	18,914
	Grand Totals		5,354,081	171,595

Form 990 Two Year Comparison Report 2023 & 2024

For calendar year 2024, or tax year beginning 07/01/24 , ending 06/30/25

Name Taxpayer Identification Number

7	ΔV	ALON FOUNDATION, INC.				52-1850874			
				2023	2024		Differences		
	1.	Contributions, gifts, grants	1.	789,139	867	,509	78,370		
	2.	Membership dues and assessments	2.						
	3.	Government contributions and grants	3.	325,852	317	,943	-7,909		
ne	4.	Program service revenue	4.	1,595,185	1,891	,211	296,026		
2	5.	Investment income	5.	155,517	197	,183	41,666		
>	6.	Proceeds from tax exempt bonds	6.						
R e		Net gain or (loss) from sale of assets other than inventory	7.						
	8.	Net income or (loss) from fundraising events	8.						
		Net income or (loss) from gaming	9.						
		Net gain or (loss) on sales of inventory	10.						
	11.	Other revenue	11.	271,009		2,230	-268,779		
	12.	Total revenue. Add lines 1 through 11	12.	3,136,702	3,276	,076	139,374		
	13.	Grants and similar amounts paid	13.						
	14.	Benefits paid to or for members	14.						
S	15.	Compensation of officers, directors, trustees, etc.	15.	150,000	155	,094	5,094		
S	16.	Salaries, other compensation, and employee benefits	16.	850 , 507	994	108	143,601		
e	17.	Professional fundraising fees	17.						
α	18.	Other professional fees	18.	152,679		340	-56,339		
Ш	19.	Occupancy, rent, utilities, and maintenance	19.	73,498		2,320	8,822		
	20.	Depreciation and Depletion	20.	323,074		,915	6,841		
		Other expenses	21.	1,412,780	1,634	,058	221,278		
	22.	Total expenses. Add lines 13 through 21	22.	2,962,538	3,291	,835	329,297		
	23.	Excess or (Deficit). Subtract line 22 from line 12	23.	174,164	-15	759	-189,923		
	24.	Total exempt revenue	24.	3,136,702	3,276	,076	139,374		
	25.	Total unrelated revenue	25.						
io	26.	Total excludable revenue	26.	2,021,711	2,090		68,913		
nat	27.	Total assets	27.	6,732,573	6,936		203,493		
forr	28.	Total liabilities	28.	941,352	1,160		219,252		
드	29.	Retained earnings	29.	5,791,221	5 , 775	,462	-15,759		
the	30.	Number of voting members of governing body	30.	9	8				
ŏ	31.	Number of independent voting members of governing body \dots	31.	9	8				
	32.	Number of employees	32.	14	15				
	33.	Number of volunteers	33.	400	261				

Form 990 Tax Return History 2024

Name Employer Identification Number

AVALON FOUNDATION, INC.

Employer Identification Number 52-1850874

_	2020	2021	2022	2023	2024	2025
Contributions, gifts, grants		1,717,195	1,697,973	1,114,991	1,185,452	
Membership dues						
Program service revenue		1,160,153	1,526,410	1,595,185	1,891,211	
Capital gain or loss						
Investment income			42,143	155,517	197,183	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue				271,009	2,230	
Total revenue		2,877,348	3,266,526	3,136,702	3,276,076	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.		162,512	150,577	150,000	155,094	
Other compensation		695,659	781,450	850,507	994,108	
Professional fees		105,119	111,685	152,679	96,340	
Occupancy costs		44,186	43,800	73,498	82,320	
Depreciation and depletion		244,158	300,468	323,074	329,915	
Other expenses		1,095,221	1,491,807	1,412,780	1,634,058	
Total expenses		2,346,855	2,879,787	2,962,538	3,291,835	
Excess or (Deficit)		530,493	386,739	174,164	-15,759	
_						
Total exempt revenue		2,877,348	3,266,526	3,136,702	3,276,076	
Total unrelated revenue						
Total excludable revenue		1,160,153	1,568,553	2,021,711	2,090,624	
Total Assets	2,788,931	5,588,979	6,430,920	6,732,573	6,936,066	
Total Liabilities		383,383	838,585	941,352	1,160,604	
Net Fund Balances	3,540,559	5,205,596	5,592,335	5,791,221	5,775,462	

52-1850874

FYE: 6/30/2025

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	E	Total xpenses	 Program Service	nagement & General	Fund Raising	
OTHER EXPENSE	\$	213	\$ 213	\$	\$	
PAYROLL EXPENSES		5,465		5,465		
PROFESSIONAL FEES		2,200	2,200			
SOUND RENTAL		7,476	3,595	3,739		142
TECH CONTRACTED		30,571	 14,701	 15,291		579
TOTAL	\$	45,925	\$ 20,709	\$ 24,495	\$	721

52-1850874

FYE: 6/30/2025

Federal Statements

Schedule A, Part III, Line 7a - Support from Disqualified Persons

Donor Name	2020		2021		2022		2023		2024	
	\$ 341,206	\$	228,760	\$	280,014	\$	249,729	\$	180,687	
TOTAL	\$ 341,206	\$	228,760	\$	280,014	\$	249,729	\$	180,687	