

Return of Organization Exempt From Income Tax

2012

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2012 calendar year, or tax year beginning 07/01, 2012, and ending 06/30, 2013

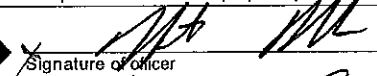
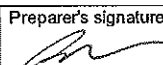
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization WIDE ANGLE YOUTH MEDIA, INC.		D Employer identification number 52-2276602
	Doing Business As		E Telephone number (443) 759-6700
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	2601 NORTH HOWARD ST City, town or post office, state, and ZIP code BALTIMORE, MD 21218		G Gross receipts \$ 325,636.
F Name and address of principal officer: HEATHER ROSENBLOOM 1116 WILLIAM STREET BALTIMORE, MD 21230			H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.WIDEANGLEMEDIA.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 2001 M State of legal domicile: MD

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO PROVIDE BALTIMORE YOUTH WITH MEDIA EDUCATION TO TELL THEIR OWN STORIES AND BECOME ENGAGED WITH THEIR COMMUNITIES.	
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3 Number of voting members of the governing body (Part VI, line 1a)	11.
	4 Number of independent voting members of the governing body (Part VI, line 1b)	11.
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	15.
	6 Total number of volunteers (estimate if necessary)	58.
	7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year: 247,170. Current Year: 260,308.
	9 Program service revenue (Part VIII, line 2g)	49,192. 59,098.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	14. 5.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,592. 6,225.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	297,968. 325,636.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0 0
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0 0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	178,249. 230,673.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0 0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,272.	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	100,923. 118,920.	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	279,172. 349,593.	
19 Revenue less expenses. Subtract line 18 from line 12	18,796. -23,957.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year: 91,818. End of Year: 101,219.
	21 Total liabilities (Part X, line 26)	21,781. 55,139.
	22 Net assets or fund balances. Subtract line 21 from line 20	70,037. 46,080.

Part II Signature Block

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

Sign Here	 Signature of officer		Date 3/19/14	
	HEATHER ROSENBLOOM Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name PHILIP H. CORNBLATT, CPA	Preparer's signature 	Date 3/12/14	Check <input type="checkbox"/> if self-employed PTIN P00252478
	Firm's name ▶ COHNREZNICK LLP		Firm's EIN ▶ 22-1478099	
	Firm's address ▶ 500 EAST PRATT STREET, SUITE 200 BALTIMORE, MD 21202-3100		Phone no. 410-783-4900	

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2012)

Cumulative e-File History 2012	
FED - EXT	
Locator:	1054CS
Taxpayer Name:	WIDE ANGLE YOUTH MEDIA, INC.
Return Type:	990, 990 & 990T (Corp)
Submitted Date:	11/06/2013 09:39:41
Acknowledgement Date:	11/06/2013 09:56:11
Status:	Accepted
Submission ID:	27100420133105000001

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box. X
- Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. WIDE ANGLE YOUTH MEDIA, INC.	Enter filer's identifying number, see instructions Employer identification number (EIN) or 52-2276602
	Number, street, and room or suite no. If a P.O. box, see instructions. 2601 NORTH HOWARD ST	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. BALTIMORE, MD 21218	

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

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of SUSAN MALONE
 Telephone No. 443 759-6700 FAX No.
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until 05/15, 2014 .

5 For calendar year _____, or other tax year beginning 07/01, 2012, and ending 06/30, 2013 .

6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

7 State in detail why you need the extension INFORMATION FROM A THIRD PARTY HAS NOT BEEN RECEIVED. THIS INFORMATION IS NECESSARY IN ORDER TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Title CEO Date 2/12/14

Form 990 (2012)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:

ATTACHMENT 1

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 298,402. including grants of \$) (Revenue \$ 59,098.)

ATTACHMENT 2

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

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

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

4e Total program service expenses ► 298,402.

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Yes, No. Contains 20 main questions and sub-questions (a-f) regarding organizational requirements and financial reporting.

Form 990 (2012)

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Question text, Yes, No. Rows include questions 21 through 38 regarding grants, tax-exempt bonds, escrow accounts, and controlled entities.

Form 990 (2012)

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V.

Table with columns for question number, description, and Yes/No checkboxes. Includes questions 1a through 14b regarding Form 1096, Form W-2G, Form W-3, and various tax compliance issues.

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 in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI. X

Section 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.		
	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 in Schedule O.		
b	Enter the number of voting members included in line 1a, above, who are independent		
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . . .		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		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?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	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 in Schedule O		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . .	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► MD,
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► SUSAN MALONE 2601 N HOWARD ST. SUITE 160 BALTIMORE, MD 21218 443-759-6700

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

Check if Schedule O contains a response to any question in this Part VII

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) GENEVIEVE ROANHOUSE BOARD MEMBER	1.00	X					0	0	0	
(2) VALERIE KNIGHT YOUNG BOARD MEMBER	1.00	X					0	0	0	
(3) HEATHER ROSENBLOOM BOARD PRESIDENT	3.00	X		X			0	0	0	
(4) IRVIN DEANDREI DRUMMOND BOARD MEMBER	1.50	X					0	0	0	
(5) RACHEL ELLIOTT BOARD MEMBER	1.00	X					0	0	0	
(6) SHARON FLYNN BOARD MEMBER	1.00	X					0	0	0	
(7) MARK PHELPS BOARD TREASURER	2.00	X		X			0	0	0	
(8) KATE BLADOW BOARD SECRETARY	3.00	X		X			0	0	0	
(9) GINA DAVIS BOARD VICE PRESIDENT	3.00	X		X			0	0	0	
(10) PABLO JUSEM BOARD MEMBER	1.50	X					0	0	0	
(11) SEDICA SAWEZ BOARD MEMBER	1.50	X					0	0	0	
(12) SUSAN MALONE EXECUTIVE DIRECTOR	40.00			X			46,412.	0	8,749.	
(13)										
(14)										

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes sub-totals and totals at the bottom.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

Table with 3 columns: Question, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a total line at the bottom.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization 0

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question 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, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	16,211.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	244,097.				
	g	Noncash contributions included in lines 1a-1f: \$		18,200.				
h	Total. Add lines 1a-1f		260,308.					
Program Service Revenue	2a	PROGRAM REVENUE	Business Code	711190	52,168.	52,168.		
	b	PROGRAM EXPENSE REIMBURSEMENTS	Business Code	711190	6,930.	6,930.		
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			59,098.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts). ATTACHMENT 3			5.		5.	
	4	Income from investment of tax-exempt bond proceeds			0			
	5	Royalties			0			
	6a	Gross rents	(i) Real	(ii) Personal				
	b	Less: rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)			0			
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b	Less: cost or other basis and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (loss)			0			
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a		6,225.			
	b	Less: direct expenses	b					
c	Net income or (loss) from fundraising events		ATCH. 4	6,225.		6,225.		
9a	Gross income from gaming activities. See Part IV, line 19	a						
b	Less: direct expenses	b						
c	Net income or (loss) from gaming activities			0				
10a	Gross sales of inventory, less returns and allowances	a						
b	Less: cost of goods sold	b						
c	Net income or (loss) from sales of inventory			0				
Miscellaneous Revenue				Business Code				
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d			0				
12	Total revenue. See instructions			325,636.	59,098.		6,230.	

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	0			
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	46,412.	40,668.	5,224.	520.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	144,690.	126,785.	16,286.	1,619.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9 Other employee benefits	20,391.	16,995.	3,396.	
10 Payroll taxes	19,180.	16,206.	2,753.	221.
11 Fees for services (non-employees):				
a Management	0			
b Legal	0			
c Accounting	12,800.	4,290.	8,510.	
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	0			
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	24,475.	21,725.	2,570.	180.
12 Advertising and promotion	0			
13 Office expenses	6,620.	6,095.	506.	19.
14 Information technology	0			
15 Royalties	0			
16 Occupancy	0			
17 Travel	0			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	3,453.	3,258.	195.	
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	19,142.	17,804.	1,079.	259.
23 Insurance	2,129.	1,348.	781.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PAYROLL SERVICES	1,857.	1,031.	826.	
b STIPENDS	8,926.	8,926.		
c TELEPHONE	3,512.	3,330.	182.	
d RENT EXPENSE	27,441.	24,168.	3,271.	2.
e All other expenses	8,565.	5,773.	1,340.	1,452.
25 Total functional expenses. Add lines 1 through 24e	349,593.	298,402.	46,919.	4,272.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0			

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	25,457.	1	23,728.
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	27,586.	3	22,748.
	4	Accounts receivable, net	2,384.	4	9,413.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
	7	Notes and loans receivable, net	0	7	0
	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	632.	9	2,915.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 87,603.		
	b	Less: accumulated depreciation	10b 47,287.	10c	40,316.
	11	Investments - publicly traded securities	0	11	0
	12	Investments - other securities. See Part IV, line 11	0	12	0
	13	Investments - program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	2,099.	15	2,099.
16	Total assets. Add lines 1 through 15 (must equal line 34)	91,818.	16	101,219.	
Liabilities	17	Accounts payable and accrued expenses	10,926.	17	28,378.
	18	Grants payable	0	18	0
	19	Deferred revenue	10,855.	19	26,761.
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	21,781.	26	55,139.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	54,951.	27	18,466.
	28	Temporarily restricted net assets	15,086.	28	27,614.
	29	Permanently restricted net assets	0	29	0
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	70,037.	33	46,080.
34	Total liabilities and net assets/fund balances.	91,818.	34	101,219.	

Form 990 (2012)

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	325,636.
2	Total expenses (must equal Part IX, column (A), line 25)	349,593.
3	Revenue less expenses. Subtract line 2 from line 1	-23,957.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	70,037.
5	Net unrealized gains (losses) on investments	0
6	Donated services and use of facilities	0
7	Investment expenses	0
8	Prior period adjustments	0
9	Other changes in net assets or fund balances (explain in Schedule O)	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	46,080.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
 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?
 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- 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 in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2012)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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. ▶ See separate instructions.

Name of the organization

Employer identification number

WIDE ANGLE YOUTH MEDIA, INC.

52-2276602

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

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III-Functionally integrated d Type III-Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box _____
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? _____
 - (ii) A family member of a person described in (i) above? _____
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above? _____
- h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2012

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	209,811.	162,149.	188,650.	290,529.	260,305.	1,111,444.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3.	209,811.	162,149.	188,650.	290,529.	260,305.	1,111,444.
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).						0
6 Public support. Subtract line 5 from line 4.						1,111,444.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	209,811.	162,149.	188,650.	290,529.	260,305.	1,111,444.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				14.	5.	19.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	10,155.	1,243.				11,398.
11 Total support. Add lines 7 through 10						1,122,861.
12 Gross receipts from related activities, etc. (see instructions)					12	343,250.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	98.98%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	98.59%
16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

Schedule A (Form 990 or 990-EZ) 2012

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with 7 columns: (a) 2008, (b) 2009, (c) 2010, (d) 2011, (e) 2012, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 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; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support (Subtract line 7c from line 6).

Section B. Total Support

Table with 7 columns: (a) 2008, (b) 2009, (c) 2010, (d) 2011, (e) 2012, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.); 13 Total support. (Add lines 9, 10c, 11, and 12.); 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)). Row 16: Public support percentage from 2011 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)). Row 18: Investment income percentage from 2011 Schedule A, Part III, line 17.

19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

2012

Name of the organization WIDE ANGLE YOUTH MEDIA, INC.	Employer identification number 52-2276602
--	--

Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ 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

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

- For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ -----

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization **WIDE ANGLE YOUTH MEDIA, INC.**

Employer identification number
52-2276602

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	M & T CHARITABLE FOUNDATION 24 SOUTH CHARLES STREET, 22ND FLOOR BALTIMORE, MD 21201	\$ 13,290.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	ANNIE E. CASEY FOUNDATION 701 ST. PAUL ST BALTIMORE, MD 21202	\$ 14,486.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	BALTIMORE COMMUNITY FOUNDATION 2 EAST READ ST BALTIMORE, MD 21202	\$ 29,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	OPEN SOCIETY INSTITUTE 201 N. CHARLES STREET BALTIMORE, MD 21201	\$ 65,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	HARRY & JEANETTE WEINBERG FOUNDATION INC 7 PARK CENTER COURT OWINGS MILLS, MD 21117	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	HOFFBERGER FOUNDATION INC 101 WEST MOUNT ROYAL AVENUE BALTIMORE, MD 21201	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization **WIDE ANGLE YOUTH MEDIA, INC.**

Employer identification number
52-2276602

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
7	CATHOLIC CAMPAIGN FOR HUMAN DEVELOPMENT 3211 FOURTH STREET NE WASHINGTON, DC 20017	\$ 13,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	THE MIAMI FOUNDATION 200 S BISCAYNE BLVD #505 MIAMI, FL 33131	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9	NATIONAL ENDOWMENT FOR THE ARTS 1100 PENNSYLVANIA AVENUE, NW WASHINGTON, DC 20506	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10	STEVENSON UNIVERSITY 1525 GREENSPRING VALLEY RD STEVENSON, MD 21153	\$ 18,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization WIDE ANGLE YOUTH MEDIA, INC.

Employer identification number

52-2276602

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
10	COMPUTERS AND EQUIPMENT	\$ 18,200.	6/5/2013
---	-----	\$ -----	-----
---	-----	\$ -----	-----
---	-----	\$ -----	-----
---	-----	\$ -----	-----
---	-----	\$ -----	-----
---	-----	\$ -----	-----
---	-----	\$ -----	-----
---	-----	\$ -----	-----
---	-----	\$ -----	-----
---	-----	\$ -----	-----

Name of organization WIDE ANGLE YOUTH MEDIA, INC.

Employer identification number

52-2276602

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry.

For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) \$

Use duplicate copies of Part III if additional space is needed.

Table with 4 columns: (a) No. from Part I, (b) Purpose of gift, (c) Use of gift, (d) Description of how gift is held. Includes dashed lines for input.

(e) Transfer of gift. Sub-table with 2 columns: Transferee's name, address, and ZIP + 4; Relationship of transferor to transferee. Includes dashed lines for input.

Table with 4 columns: (a) No. from Part I, (b) Purpose of gift, (c) Use of gift, (d) Description of how gift is held. Includes dashed lines for input.

(e) Transfer of gift. Sub-table with 2 columns: Transferee's name, address, and ZIP + 4; Relationship of transferor to transferee. Includes dashed lines for input.

Table with 4 columns: (a) No. from Part I, (b) Purpose of gift, (c) Use of gift, (d) Description of how gift is held. Includes dashed lines for input.

(e) Transfer of gift. Sub-table with 2 columns: Transferee's name, address, and ZIP + 4; Relationship of transferor to transferee. Includes dashed lines for input.

Table with 4 columns: (a) No. from Part I, (b) Purpose of gift, (c) Use of gift, (d) Description of how gift is held. Includes dashed lines for input.

(e) Transfer of gift. Sub-table with 2 columns: Transferee's name, address, and ZIP + 4; Relationship of transferor to transferee. Includes dashed lines for input.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization WIDE ANGLE YOUTH MEDIA, INC.

Employer identification number 52-2276602

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), Aggregate value at end of year, and two questions about donor advisement.

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

Form for Part II Conservation Easements. Includes questions about purpose of easements, total number and acreage, and monitoring expenses. Includes a table for 'Held at the End of the Tax Year' with rows 2a, 2b, 2c, 2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting works of art and historical treasures, and amounts related to these items.

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

Schedule D (Form 990) 2012

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
a Public exhibition
b Scholarly research
c Preservation for future generations
d Loan or exchange programs
e Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
b If "Yes," explain the arrangement in Part XIII and complete the following table:
Table with columns: Amount, 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21?
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.

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

Table with 5 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
a Board designated or quasi-endowment %
b Permanent endowment %
c Temporarily restricted endowment %
The percentages in lines 2a, 2b, and 2c should equal 100%.
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
(i) unrelated organizations
(ii) related organizations
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Table with 4 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Schedule D (Form 990) 2012

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

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

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2012

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

1	Total revenue, gains, and other support per audited financial statements		1	339,781.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	14,145.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	14,145.
3	Subtract line 2e from line 1		3	325,636.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	325,636.

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

1	Total expenses and losses per audited financial statements		1	363,738.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	14,145.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	14,145.
3	Subtract line 2e from line 1		3	349,593.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	349,593.

Part XIII Supplemental Information

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

SEE PAGE 5

Part XIII Supplemental Information (continued)

FIN 48

PART X LINE 2

WIDE ANGLE RECEIVED A DETERMINATION LETTER FROM THE INTERNAL REVENUE SERVICE (IRS) TO BE TREATED AS A TAX-EXEMPT ENTITY PURSUANT TO SECTION 501(C) (3) OF THE INTERNAL REVENUE CODE AND DID NOT HAVE ANY UNRELATED BUSINESS INCOME FOR THE YEAR ENDED JUNE 30, 2013. DUE TO ITS TAX-EXEMPT STATUS, WIDE ANGLE IS NOT SUBJECT TO INCOME TAXES. WIDE ANGLE IS REQUIRED TO FILE AND DOES FILE TAX RETURNS WITH THE IRS AND OTHER TAXING AUTHORITIES. MANAGEMENT HAS DETERMINED THAT THE ORGANIZATION DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS FOR ANY OPEN TAX RETURNS. WHILE NO INCOME TAX RETURNS ARE CURRENTLY BEING EXAMINED BY THE IRS, TAX YEARS SINCE 2010 REMAIN OPEN.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2012

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ **Attach to Form 990.**

Name of the organization

Employer identification number

WIDE ANGLE YOUTH MEDIA, INC.

52-2276602

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (<u>ATCH 1</u>)		2.	18,200.	
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

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

	Yes	No
30 a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?		X
32 a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2012)

Schedule M (Form 990) (2012)

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

ATTACHMENT 1

SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

<u>DESCRIPTION</u>	<u>(A) CHECK</u>	<u>(B) NUMBER OF CONTRIBUTIONS</u>	<u>(C) REVENUES REPORTED</u>	<u>(D) METHOD OF DETERMINING</u>
COMPUTERS AND EQUIPMENT	X	2.	18,200.	FMV
TOTALS		<u>2.</u>	<u>18,200.</u>	

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2012

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

WIDE ANGLE YOUTH MEDIA, INC.

52-2276602

REVIEW OF 990

PART VI, SECTION B, LINE 11

THE EXECUTIVE DIRECTOR AND BOOKKEEPER REVIEW THE 990 FIRST. THEN THE FINANCE COMMITTEE WHICH INCLUDES THE PRESIDENT, VICE PRESIDENT, AND TREASURER OF THE BOARD OF DIRECTORS REVIEWS THE 990 FORM, AND THEN PRESENTS IT TO THE BOARD OF DIRECTORS. THE ACCOUNTANT ALSO IS ON HAND FOR QUESTIONS/COMMENTS AND PRESENTATION DURING THE BOARD MEETING. THE PRESIDENT SIGNS THE 990 ONCE APPROVAL HAS BEEN GRANTED FROM THE BOARD.

CONFLICT OF INTEREST

PART VI, SECTION B, LINE 12

THE POLICY IS DISCUSSED WITH NEW STAFF MEMBERS AND BOARD MEMEBRS. IF A SITUATION ARISES IT WOULD BE DISCUSSED BY THE EXECUTIVE COMMITTEE AND IF NECESSARY VOTED ON BY THE GOVERNING BOARD.

THE BOARD MEMBERS COMPLETE PLEDGE FORMS EVERY YEAR, AND THE EXECUTIVE COMMITTEE OF THE BOARD MEET YEARLY WITH THE MEMBERS TO SEE IF THERE ARE CONFLICTS OF INTEREST.

THE BOARD MEMBERS MONITOR CONFLICT OF INTEREST AND SO DOES THE EXECUTIVE DIRECTOR. IF ANY VENDOR WAS BEING USED THAT WAS RELATED TO A BOARD MEMBER OR EMPLOYEE A BIDDING PROCESS WOULD BE REQUIRED.

DETERMINING DIRECTOR COMPENSATION

Name of the organization WIDE ANGLE YOUTH MEDIA, INC.	Employer identification number 52-2276602
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PART VI, SECTION B, 15A

WHEN THE BOARD HIRED SUSAN MALONE, EXECUTIVE DIRECTOR, SHE WAS WITH THE AGENCY FOR OVER 7 YEARS AT THE TIME, AND SUBMITTED HER RESUME FOR CONSIDERATION. AN EXTENSIVE TRANSITION PLAN WITH BOARD INPUT WAS CREATED WHEN THE FOUNDER STEPPED DOWN IN PARTNERSHIP WITH SUSAN. THE BOARD CREATED A JOB DESCRIPTION AND SALARY REQUIREMENTS, THEN CONDUCTED TWO LONG INTERVIEW SESSIONS TO CONFIRM THAT SUSAN WAS THE RIGHT CANDIDATE FOR THE JOB. THE JOB WOULD HAVE BEEN OPEN TO THE PUBLIC IF SUSAN WAS NOT SELECTED AS THE CANDIDATE. THE BOARD CREATED AN AGREEMENT AND SALARY REQUIREMENTS, THAT WERE AGREED UPON BY BOTH PARTIES. VOTING ON SUSAN AS THE EXECUTIVE DIRECTOR WAS RECORDED IN THE BOARD MINUTES.

DETERMINING PROGRAM DIRECTOR COMPENSATION

PART VI, SECTION B, 15B

WHEN WIDE ANGLE STARTED THE JOB SEARCH FOR OUR PROGRAM DIRECTOR, THE EXECUTIVE DIRECTOR DRAFTED A SALARY RANGE AND JOB REQUIREMENTS THAT WERE MODIFIED AND APPROVED BY THE BOARD OF DIRECTORS. THE JOB WAS POSTED ON IDEALIST, CRAIGSLIST, THE AFTERSCHOOL INSTITUTE LISTSERV, NAMAC LISTSERV, AND ON THE GBCA JOB BOARD. OVER 100 RESUMES WERE COLLECTED, AND NARROWED DOWN TO 10 TOP CANDIDATES. THOSE CANDIDATES WERE REQUIRED TO SUBMIT WRITING SAMPLES AND REFERENCES. 50% OF CANDIDATES WERE GIVEN A FIRST ROUND INTERVIEW WITH THE EXECUTIVE DIRECTOR AND AN INTERVIEW WITH ANOTHER STAFF MEMBER. 2 CANDIDATES WENT THROUGH A SECOND INTERVIEW WITH THE EXECUTIVE DIRECTOR, AN INTERVIEW WITH 2-4 YOUTH PRODUCERS (STUDENTS), AND A STAFF INTERVIEW. THESE TWO CANDIDATES WERE REQUIRED TO SUBMIT REFERENCES WHICH WERE ALL FOLLOWED UP WITH. THE EXECUTIVE DIRECTOR MADE

Name of the organization WIDE ANGLE YOUTH MEDIA, INC.	Employer identification number 52-2276602
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THE FINAL DECISION, BUT WAS INFORMED BY ALL THE PARTIES THAT INTERVIEWED THE PROGRAM DIRECTOR.

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

FOUNDED IN 2000, WIDE ANGLE YOUTH MEDIA PROVIDES BALTIMORE YOUTH WITH MEDIA EDUCATION TO TELL THEIR OWN STORIES AND BECOME ENGAGED WITH THEIR COMMUNITIES. WE DELIVER FREE AND ACCESSIBLE AFTERSCHOOL AND OUT-OF-SCHOOL TRAINING IN MEDIA PRODUCTION AND LITERACY TO MORE THAN 350 YOUNG PEOPLE AGES 10-20 EACH YEAR. BECAUSE THESE YOUTH HAVE LIMITED ACCESS TO TECHNOLOGY RESOURCES, WIDE ANGLE'S PROGRAMS BRIDGE THE DIGITAL DIVIDE AND PROMOTE THEIR ACADEMIC AND WORKFORCE-READINESS SKILLS. TO DATE, WIDE ANGLE HAS SERVED NEARLY 3,000 BALTIMORE CITY YOUTH IN INTENSIVE MEDIA LEARNING EXPERIENCES. THESE YOUNG PEOPLE HAVE CREATED MORE THAN 120 VIDEOS ABOUT YOUTH AND COMMUNITY ISSUES, SUCH AS GANG VIOLENCE, YOUTH IDENTITY, COMMUNITY SAFETY, AND THE ENVIRONMENT. THEIR WORK HAS BEEN SHARED WITH TENS OF THOUSANDS OF PEOPLE EVERY YEAR IN COMMUNITY SCREENINGS, ON CABLE TELEVISION, AT FILM FESTIVALS, AND ON THE INTERNET. YOUTH IN OUR PROGRAMS HAVE COMPLETED HIGH SCHOOL, ATTENDED COLLEGE, AND FOUND MEANINGFUL WORK EXPERIENCES IN A VARIETY OF DISCIPLINES -- TO DATE, EVERY YOUTH WHO HAS STAYED IN OUR PROGRAM HAS GRADUATED HIGH SCHOOL.

ATTACHMENT 2

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

WIDE ANGLE SERVES MORE THAN 350 YOUTH EACH YEAR THROUGH FIVE CORE PROGRAMS, ALL OF WHICH ARE FREE FOR PARTICIPANTS, SOME OF WHICH

Name of the organization WIDE ANGLE YOUTH MEDIA, INC.	Employer identification number 52-2276602
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ATTACHMENT 2 (CONT'D)

OFFER SERVICE LEARNING HOURS OR STIPENDS FOR REGULAR ATTENDANCE AND ENGAGEMENT. ALTHOUGH OUR PROGRAMS ARE OPEN TO ALL BALTIMORE CITY YOUTH AGES 10-20, OUR TARGET POPULATION IS YOUTH FROM TRADITIONALLY UNDERSERVED DEMOGRAPHIC GROUPS AND NEIGHBORHOODS. IN FY12, 78% OF YOUTH PARTICIPATING IN OVER 32 HOURS OF WAYM PROGRAMMING WERE ELIGIBLE FOR FREE OR REDUCED LUNCH, 95% WERE AFRICAN AMERICAN OR MULTIRACIAL, AND MOST CAME FROM SINGLE PARENT HOUSEHOLDS AND/OR ATTENDED TITLE 1 SCHOOLS.

WIDE ANGLE CONDUCTS FIVE CORE PROGRAMS EACH YEAR:

IN 2003 WAYM ANGLE BEGAN THE BALTIMORE SPEAKS OUT! PROGRAM (BSOP) WITH THE ENOCH PRATT FREE LIBRARY. BSOP OFFERS 90 MIDDLE-SCHOOL STUDENTS, AGED 10-15, INTRODUCTORY VIDEO PRODUCTION AND ARTS EDUCATION AT THREE LIBRARY BRANCHES/SCHOOLS.

DESIGNED BY YOUNG PEOPLE IN 2002, THE MENTORING VIDEO PROJECT (MVP) OFFERS 12 YOUTH AGED 14-20 THE OPPORTUNITY TO GAIN ADVANCED VIDEO AND AUDIO PRODUCTION TRAINING, AND DEVELOP THEIR CRITICAL THINKING, STORY-TELLING AND CREATIVE SKILLS BY PRODUCING SHORT ORIGINAL FILMS THAT ARE DISTRIBUTED NATIONALLY.

THE SOCIAL MEDIA DESIGN TEAM IS AN AFTER-SCHOOL PROGRAM THAT OFFERS 12 HIGH SCHOOL YOUTH THE OPPORTUNITY TO GAIN ADVANCED GRAPHIC DESIGN AND MEDIA TRAINING WHILE DEVELOPING THEIR PUBLIC SPEAKING, LEADERSHIP, AND MARKETING SKILLS. OUR RECENT CAMPAIGN ENCOURAGED STUDENTS TO TEXT ABOUT THEIR BUS RIDE - HELPING ADDRESS

Name of the organization WIDE ANGLE YOUTH MEDIA, INC.	Employer identification number 52-2276602
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ATTACHMENT 2 (CONT'D)

TRANSPORTATION BARRIERS TO SCHOOL ATTENDANCE

THE TRAVELING PHOTOGRAPHY EXHIBITION IS A PROGRAM THAT PROVIDES 120 YOUTH (AGES 10-20) WITH FREE OR LOW COST PHOTOGRAPHY WORKSHOPS AT CITY SCHOOLS AND LOCAL ORGANIZATIONS TO GENERATE WORK TO BE DISPLAYED AT A RANGE OF VENUES IN BALTIMORE CITY. THE WORK IS DISPLAYED IN SCHOOLS, FARMERS MARKETS AROUND BALTIMORE, GALLERIES, AND IN LARGE-SCALE PUBLIC INSTALLATIONS. IN THE SPRING, A TEAM OF 6 HIGH SCHOOL STUDENTS USE CREATIVE CURATION OF IMAGES FROM THESE WORKSHOPS TO SPARK INTEREST IN LARGE AND DIVERSE AUDIENCES TO LEARN MORE ABOUT POSITIVE ATTRIBUTES OF BALTIMORE YOUTH.

INTENSIVE MEDIA SUMMER CAMP PROVIDES 24 YOUTH IN BALTIMORE CITY WITH VIDEO PRODUCTION OR GRAPHIC DESIGN TRAINING. IN PARTNERSHIP WITH STEVENSON UNIVERSITY STUDENTS ARE TRANSPORTED ON CAMPUS TO PARTICIPATE IN THE MEDIA CAMP FOR TWO WEEKS AND OVER 80 HOURS OF TRAINING. A MIDDLE SCHOOL OPTION IS ALSO IN THE PLANNING STAGE FOR FY15.

IN ADDITION TO OUR FIVE CORE PROGRAMS, WE RECENTLY STARTED A SOCIAL ENTERPRISE TO BUILD ORGANIZATIONAL CAPACITY. WIDE ANGLE PRODUCTIONS PRODUCES VIDEOS FOR CLIENTS YEAR ROUND ON A FEE-FOR-SERVICE BASIS. WIDE ANGLE PRODUCTIONS PAYS 8 HIGH SCHOOL STUDENTS AN HOURLY WAGE OR STIPENDS TO PRODUCE MULTIMEDIA PROJECTS FOR CLIENTS UNDER THE DIRECTION OF OUR ADULT STAFF. STUDENTS WHO PARTICIPATE IN OUR PRODUCTION PROJECTS GET VALUABLE WORK EXPERIENCE WHILE GENERATING INCOME FOR THEMSELVES AND THEIR FAMILIES. CLIENTS INCLUDE ANNIE E. CASEY FOUNDATION, THE OPEN

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ATTACHMENT 2 (CONT'D)

SOCIETY INSTITUTE, WOMEN'S EDUCATION ALLIANCE, GREEN STREET ACADEMY, AND MANY MORE. MARKETING MATERIALS AND BUSINESS PLANS ARE CURRENTLY IN DEVELOPMENT.

ANTICIPATED RESULTS -- ENHANCING CAPACITY AND SUSTAINABILITY
WIDE ANGLE AIMS TO ACCOMPLISH THE FOLLOWING GOALS IN FY14:

" PROVIDE 350 YOUTH AGES 10-20 WITH FREE AFTERSCHOOL MEDIA WORKSHOPS EACH YEAR

" SUSTAINING OUR EXPANSION OF BALTIMORE SPEAKS OUT PROGRAM TO A THIRD SITE - SERVING 30 YOUTH A YEAR, OR 90 TOTAL YOUTH AT 3 SITES, IN 6 WORKSHOPS.

" SOLIDIFY THE SOCIAL DESIGN WORKSHOP AS AN ONGOING PROGRAM - SERVING 12 YOUTH A YEAR, AND CREATING 2 NEW SOCIAL MEDIA CAMPAIGNS WITH AN OUTPUT OF 5 PRODUCTS A YEAR THAT MEET THOSE CAMPAIGN GOALS.

" SUPPORT THE HEALTH AND CAPACITY BUILDING OF OUR STAFF OF MEDIA EDUCATORS - PROVIDING FULL-TIME STAFF WITH HEALTH BENEFITS AND ALL STAFF WITH PROFESSIONAL DEVELOPMENT OPPORTUNITIES.

" INCREASE THE DISTRIBUTION OF OUR YOUTH-MADE MEDIA ONLINE WITH AN ENHANCED WEBSITE PORTFOLIO AND SOCIAL MEDIA ENGAGEMENT - INCREASING OUR ONLINE VIEWERS BY 20% ANNUALLY.

" INCREASE OUR LIVE AUDIENCES BY 20% EACH YEAR.

THESE GOALS AND OBJECTIVES ARE BUILT UPON OUR OVERALL MISSION: TO HELP BALTIMORE YOUTH TELL THEIR STORIES AND BECOME ENGAGED IN

Name of the organization WIDE ANGLE YOUTH MEDIA, INC.	Employer identification number 52-2276602
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ATTACHMENT 2 (CONT'D)

THEIR COMMUNITIES. BY MAINTAINING, STRENGTHENING AND EXPANDING OUR MEDIA WORKSHOPS, PUBLIC EVENTS, AND DISTRIBUTION STRATEGIES, WE HOPE TO SERVE MORE YOUNG PEOPLE, AND INCREASE THE IMPACT OF THEIR STORIES ON THE COMMUNITY. BY SUPPORTING THE STAFF THAT MENTOR AND TRAIN OUR STUDENTS, WE BUILD OUR INTERNAL CAPACITY, AND GROW A HEALTHY ORGANIZATION THAT CAN ACHIEVE OUR MISSION.

MEASURING SUCCESS OVERALL

MANY OF WIDE ANGLE'S ORGANIZATIONAL GOALS ARE QUANTIFIABLE, INCLUDING THE NUMBER OF STUDENT'S SERVED, AUDIENCES REACHED, AND EVENTS LAUNCHED. ATTENDANCE AND COMPLETION MEASUREMENTS HELP US EXPAND OUR REACH, BUT MAINTAINING HIGH QUALITY EXPERIENCES ARE CRITICAL FOR SUSTAINING PARTICIPATION, AND ACHIEVING OUR MISSION. THEREFORE, PROGRAM EVALUATION IS CRITICAL FOR MEASURING OVERALL ORGANIZATIONAL SUCCESS.

WIDE ANGLE STAFF COMPLETE OBSERVATIONAL SURVEYS OF THE YOUTHS' SKILL DEVELOPMENT USING THE VERIFIED RESUME EVALUATION TOOL, WHICH MEASURES A SELECT GROUP OF SKILLS BASED ON THE SKILLS FOR SUCCESS AND THE SCANS SKILLS FOR WORKFORCE DEVELOPMENT. MEASURED ARE FOUR INDICATORS: TEAMWORK; CREATIVITY; TECHNICAL MEDIA SKILLS; AND INTERPRETING INFORMATION - WITH THE GOAL OF SEEING A 20% INCREASE IN ALL SKILLS. FREQUENCY MEASURES INCLUDE OBSERVING GOOD TEAMWORK 80% OF THE TIME, AND A 100% COMPLETION RATE FOR MEDIA PROJECTS.

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ATTACHMENT 2 (CONT'D)

STUDENT PRE/ POST SURVEYS HELP US TO UNDERSTAND STUDENT MOTIVATIONS FOR PARTICIPATION AND ALLOW US TO ENSURE THAT STUDENTS HAVE A SAY IN OUR PROGRAM DESIGN. PARENT SURVEYS GIVE US INSIGHT INTO THE PARENTS' GOALS FOR THEIR CHILDREN. AUDIENCE SURVEYS ARE USED AT LIVE COMMUNITY EVENTS TO ASSESS THE SUCCESS OF EACH PROJECT AND TO PROVIDE VALUABLE FEEDBACK TO THE YOUTH PRODUCERS.

ORGANIZATIONAL TRACK RECORD

WIDE ANGLE YOUTH MEDIA HAS BECOME KNOWN AS A PROFESSIONAL ORGANIZATION THAT PROVIDES HIGH-QUALITY WORKSHOPS AND EVENTS FOR THE COMMUNITY. OUR YOUTH ARE RECOGNIZED AS THOUGHTFUL, TALENTED INDIVIDUALS WHO HAVE BEEN INVITED TO SPEAK AT CONFERENCES AND PUBLIC EVENTS ON YOUTH ISSUES, WHILE THE MEDIA THEY PRODUCE HAS WON AWARDS AND BECOME INCORPORATED INTO BROADER COMMUNITY DIALOGUES. WE INTEND TO MAINTAIN OUR QUALITY OF SERVICE, WHILE THOUGHTFULLY EXPANDING OUR REACH IN THE YEARS TO COME.

SOME OF OUR ACCOMPLISHMENTS:

" 100% OF YOUTH WHO REMAIN IN WIDE ANGLE PROGRAMS THROUGH HIGH SCHOOL GRADUATE.

" WIDE ANGLE'S STUDENTS HAVE TRAVELED TO NINE STATES TO SHOW THEIR VIDEOS AND SHARE WHAT THEY KNOW WITH PEERS FROM ACROSS THE COUNTRY.

" FROM 2011-2013, TWENTY DIFFERENT FILM FESTIVALS ACCEPTED FIFTEEN OF OUR FILMS FROM STATES ALL ACROSS AMERICA, AND AUSTRALIA

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ATTACHMENT 2 (CONT'D)

AND SINGAPORE. ELEVEN OF OUR STUDENTS' FILMS HAVE ALSO RECEIVED AWARDS AT FILM FESTIVALS.

" OVER THE PAST 3 YEARS (FY11-FY13), YOUNG PEOPLE PARTICIPATING IN THE BALTIMORE SPEAKS OUT! PROGRAM HAVE ACCUMULATED A TOTAL OF 2,180 SERVICE LEARNING HOURS

" IN FY11, CONGRESSMAN ELIJAH CUMMINGS STATED AT A WIDE ANGLE EVENT: "THIS IS THE KIND OF TALENT THAT WE MUST APPLAUD AND THAT WE MUST SUPPORT. I THANK YOU WIDE ANGLE, AND I AM GOING TO TELL ALL OF YOUR SPONSORS THAT THEIR MONEY WAS WELL SPENT."

" IN FY15 STARTED A SOCIAL ENTERPRISE TO PROVIDE PRODUCTION SERVICES TO CIVIC MINDED ORGANIZATIONS.

ATTACHMENT 3

FORM 990, PART VIII - INVESTMENT INCOME

<u>DESCRIPTION</u>	(A) <u>TOTAL REVENUE</u>	(B) <u>RELATED OR EXEMPT REVENUE</u>	(C) <u>UNRELATED BUSINESS REV.</u>	(D) <u>EXCLUDED REVENUE</u>
INVESTMENT REVENUE	5.			5.
TOTALS	<u>5.</u>			<u>5.</u>

ATTACHMENT 4

FORM 990, PART VIII - FUNDRAISING EVENTS

<u>DESCRIPTION</u>	<u>GROSS INCOME</u>	<u>NET INCOME</u>
SPECIAL EVENTS	6,225.	6,225.
TOTALS	<u>6,225.</u>	<u>6,225.</u>

Name of the organization WIDE ANGLE YOUTH MEDIA, INC.	Employer identification number 52-2276602
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ATTACHMENT 5

FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>
PREPAID EXPENSES	2,915.
TOTALS	<u>2,915.</u>

ATTACHMENT 6

FORM 990, PART X - DEFERRED REVENUE

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>
DEFERRED REVENUE	26,761.
TOTALS	<u>26,761.</u>