REPORT BY OFFICE OF THE BALTIMORE CITY STATE’S ATTORNEY ON THE CITIZEN FATALITY LOCATED AT 2117 MARYLAND AVENUE

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INTRODUCTION

The Baltimore City State’s Attorney’s Office (BCSAO) completed its review of the civilian fatality at the Man Alive Addiction Center located at 2117 Maryland Avenue. The BCSAO review was conducted by the office’s Public Trust and Police Integrity Unit and focused exclusively on determining whether criminal charges relating to the officer’s conduct were warranted. PTPIU’s review did not examine issues such as the officer’s compliance with internal policies and procedures, their training or tactics, or any issues related to civil liability; however, internal policies and procedures and training are factors that were considered in evaluating the officer’s conduct. This report should not be interpreted as expressing any opinions on non-criminal matters.

In brief, on July 15, 2019, the Involved Citizen entered the Man Alive Addiction Treatment Center, pulled out a revolved, shot, and killed an employee of the treatment center. The Involved Citizen with gun in hand confronted and threatened another employee. After gaining access to the secured area of the center, another employee was able to escape and lock herself in a bathroom. While the armed the Involved Citizen was threatening other employees, 911 calls were being made by other employees and patients.

Involved Officers #1 and #2 arrived at the treatment center. Involved Officer #2 armed himself with an AR-15 as the information given to them described an “active shooter” situation. Both officers entered the secured area of the treatment center and confronted the shooter. They continued to give verbal commands to “drop the gun”. The officers continued to follow the Involved Citizen down the hallway and around corners, while continuing to give verbal commands to surrender. The Involved Citizen reached out from behind the hallway and shot at the officers. The officers returned fire and again ordered the Involved Citizen to surrender. The Involved Citizen jumped out from behind a wall and shot Involved Officer #2 in the abdomen. Both officers returned fire, striking the Involved Citizen multiple times. The Involved Citizen was transported to Shock Trauma where he was pronounced deceased.

As detailed below, when all available evidence is considered, the Involved Officers’ actions did not rise to the level of being criminal. The Baltimore City State’s Attorney, therefore, declines to pursue criminal charges in this matter.
OVERVIEW OF THE INCIDENT

(Fatality)

On July 15, 2019, the Involved Citizen entered the Man Alive Addiction Treatment Center located at 2117 Maryland Avenue, shot and killed a man, and was later shot and killed by two police officers.

The incident began around 7:00 a.m. The Involved Citizen entered the Man Alive Center, walked past the front desk, security, and several patients, traveling to the back of the facility where an employee was working the urinalysis/laboratory desk (affiliated with LabCorp). The Involved Citizen pulled out a revolver, shot the employee in the chest, and as the employee fell to the ground, the Involved Citizen shot him once in the back. The employee was deceased by the time first responders got to him.

After the Involved Citizen killed an employee, one of the managers of the facility, came out to investigate the noise. She was confronted by the Involved Citizen, gun in hand. The Involved Citizen demanded that she use her security card to let him into the secured pharmaceutical area. She negotiated that she’d let him in if he would let three (3) of her staff members leave. The Involved Citizen agreed to her terms. The employee allowed him into the secured area, and after a brief delay, the Involved Citizen allowed three staff members to leave.

At the time that the Involved Citizen entered the pharmaceutical area, another employee, took shelter in a locked bathroom in the secured portion of the business.

The Involved Citizen approached and confronted another employee of Man Alive. He ordered her to give him a bottle of Methadone. She gave him an open bottle and he attempted to take the medicine, while insisting that she help him to obtain more. It was at about this time that, a private security guard, entered the secured area and confronted the Involved Citizen. She had a rapport with him, and was able to convince the Involved Citizen to put the gun down on a chair; however the gun was always within his reach. She had some conversation with the Involved Citizen, including the Involved Citizen asking her to contact “Greg” (another security guard nearby). Soon after, Baltimore City Police officers arrived, the Involved Citizen armed himself.

While these events were taking place, 911 calls were being made by both employees and patients, prompting dispatchers to communicate the “shots fired” call. Several officers responded. Involved Officer #1 was one of the first officers to arrive at the scene, and he started gathering intel from people who had left the clinic and were now outside. Involved Officer #2 arrived and obtained his AR-15 semi-automatic rifle. He approached Involved Officer #1 and the two shared what information they had gathered at that point. Officer #3 and Officer #4 were also on scene at that time.

Involved Officer #2 and Involved Officer #1 agreed that they needed to enter, and to treat their entry as an “active shooter” situation. They entered the facility, Involved Officer #2 in the lead and Involved Officer #1 walking behind him. They got into a position where they could see the armed the Involved Citizen through a series of security windows and doors. They started
giving orders to “drop the gun” as they started to approach. The Involved Citizen moved to the end of a hallway, where he was trapped (by secured doors) and unable to move in any direction without being in plain sight (or a straight line) of the officers. The location where the Involved Citizen was trapped was in front of the bathroom where an employee was barricaded.

Involved Officer #2 and Involved Officer #1 slowly moved down the hallway towards the Involved Citizen, while giving clear verbal commands for him to surrender and drop his weapon. The officers passed the security guard, who was kneeled down and in a tactical position, firearm drawn and aimed in the general direction of the Involved Citizen. She never fired her weapon.

18 seconds after the officers started approaching him in the secured area, the Involved Citizen reached out from behind the wall and fired one shot at the two officers—the shot missed them both. Involved Officer #2 took a step forward and started firing shots at the Involved Citizen through the wall(s). The Involved Citizen could be heard saying “ouch, fuck” after presumably being shot. Involved Officer #2 stopped firing and gave more verbal commands. 19 seconds after he first shot at the officers, and just 4 seconds after Involved Officer #2 stopped his initial shots at him, the Involved Citizen jumped out from behind the wall, with his arms extended, gun in hand, and he shot Involved Officer #2 in the abdomen. As he did this, Involved Officer #2 unloaded his entire magazine and Involved Officer #1 fired one shot at the Involved Citizen.

The Involved Citizen was struck 15 times. He dropped to the ground without being able to fire off another shot. Involved Officer #1 immediately turned his attention to Involved Officer #2, and pulled him out of the facility where medics started attending to him. Involved Officer #2, along with other officers and medics, went back into the facility and attended to the medical needs of the Involved Citizen. Involved Officer #1 then found an employee barricaded in the bathroom. She was distraught, unable to speak coherently, and had suffered shrapnel wounds to her chest and face.

One employee was found where he was shot. He was pronounced dead at the scene. Involved Officer #2 was taken to Shock Trauma, where he was treated for his gunshot wound. He was hospitalized for several days before being released for rehabilitation. Another employee was treated and released. The Involved Citizen was transported to Shock Trauma where he was pronounced deceased.

Found on the Involved Citizen was a “manifesto” that read, in part, “…I am independent now…” “…I’ve been poisoned…” “…Miseducation, Mass Incarceration, gentrification, access to wealth, police state genocide…” and, “…has to change, I expect the demons to show, no slave left behind, repair us and America will thrive…”

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**SUMMARY OF THE EVIDENCE**

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1 The “manifesto” had several spelling errors. For purposes of this memo, the typos are being corrected.
TIMELINE OF THE INCIDENT

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>6:59:30</td>
<td>The Involved Citizen enters the Man Alive facility</td>
</tr>
<tr>
<td>6:59:40</td>
<td>The Involved Citizen passes the sign-in area</td>
</tr>
<tr>
<td>7:00:04</td>
<td>The Involved Citizen armed himself</td>
</tr>
<tr>
<td>(time stamp off, estimated 7:00:10)</td>
<td>The Involved Citizen shoots an employee</td>
</tr>
<tr>
<td>07:00:10</td>
<td>The Involved Citizen takes an employee hostage at gunpoint, orders her to get him into the secured pharmaceutical area</td>
</tr>
<tr>
<td>(time stamp off, estimated 7:05:00)</td>
<td>3 of 4 employees in the secured area are released (the 4th is hiding, locked in a bathroom)</td>
</tr>
<tr>
<td>7:05:45</td>
<td>The armed security guard enters the secured area where Involved Citizen is located</td>
</tr>
<tr>
<td>7:13:56</td>
<td>Involved Officer #2 enters the pharmaceutical area, followed by Involved Officer #1 and Officer #3</td>
</tr>
<tr>
<td>7:15:28</td>
<td>The Involved Citizen fires at Involved Officer #2 and Involved Officer #1</td>
</tr>
<tr>
<td>7:15:30</td>
<td>Involved Officer #2 returns fire</td>
</tr>
<tr>
<td>7:15:37</td>
<td>The Involved Citizen comes out from behind the wall with his gun pointed at the officers, and fires one shot, striking Involved Officer #2 in the abdomen. Involved Officer #2 returns fire with his rifle, as Involved Officer #1 fires one shot at Involved Citizen.</td>
</tr>
<tr>
<td>7:15:42</td>
<td>The shooting stops, and Involved Officer #2 falls to the ground.</td>
</tr>
<tr>
<td>7:39:32</td>
<td>Officers first hear that there’s a body in the back</td>
</tr>
<tr>
<td>7:40:16</td>
<td>Officers find an employee’s body</td>
</tr>
</tbody>
</table>

FIREARMS ANALYSIS

The Firearms Analysis was conducted by Firearms Range Instructor / Armorer Kevin Clements (F231) in the presence of IA and Homicide detectives. Officer Clements inspected the following, with the conclusions noted:

A. Involved Officer #1’s .40 caliber handgun, Glock Model 22 semi-automatic, was verified to be in working condition, with one round of ammunition having been discharged. All other department issued ammunition were counted and accounted for.

B. Involved Officer #2’s Colt Model 6920, gas operated Carbine (rifle), was verified to be in working condition, was not altered or modified (had not been made to operate as an “automatic weapon”), and had discharged all 25 rounds issued to it.

C. Involved Citizen’s .357 Magnum, Ruger branded revolver, with a cylinder capacity, was verified to be in working condition with 4 spent shell casing and 2 live ammunition rounds in the cylinder.

BODY WORN CAMERA (“BWC”) VIDEO

1. Involved Officer #2
Involved Officer #2’s BWC has been obtained and reviewed, and reveals the following: Involved Officer #2 received information that there was an active shooter inside of the Man Alive methadone clinic; Involved Officer #2, armed with a rifle, and Involved Officer #1 agree to enter the clinic and treat it as an active shooter situation; the two got intel from employees inside, and move towards where the active shooter was located; they located Involved Citizen, and could see him through security glass—they could also see a security guard in the same area; the two officers then entered the secure area while giving verbal commands; the two officers approached Involved Citizen, who fired a single shot at them; Involved Officer #2 returned fire, shooting twice, then seven more times—apparently striking his target, Involved Citizen, who could be heard yelling “ouch, fuck”; the Involved Citizen yelled “mother fcker” at the officers as he pointed his gun at them, shooting at (and striking) Involved Officer #2; Involved Officer #2 returned fire, as did Involved Officer #1; Involved Officer #2 dropped, realized that he was shot, and Involved Officer #1 immediately started to tend to Involved Officer #2.

2. Involved Officer #1

Involved Officer #1’s BWC has been obtained and reviewed, and reveals the following: Involved Officer #2 and Involved Officer #1 received information that there was an active shooter inside of the Man Alive methadone clinic; Involved Officer #2, armed with a rifle, and Involved Officer #1 agreed to enter the clinic and treat it as an active shooter situation; the two got intel from employees inside, and move towards where the active shooter was located; they located Involved Citizen, and could see him through security glass—they could also see a security guard in the same area; the two officers then entered the secure area while giving verbal commands; the two officers approached Involved Citizen, who fired a single shot at them; Involved Officer #2 returned fire, shooting twice, then seven more times—apparently striking his target, Involved Citizen, who could be heard yelling “ouch, fuck”; the Involved Citizen yelled “mother fcker” at the officers as he pointed his gun at them, shooting at (and striking) Involved Officer #2; Involved Officer #2 returned fire, as did Involved Officer #1; Involved Officer #2 dropped, realized that he was shot, and Involved Officer #1 immediately started to tend to him; Involved Officer #1 then tended to Involved Citizen’s medical needs; Involved Officer #1 then found an employee and tended to her medical needs.

3. Officer #3

Officer #3’s BWC has been obtained and reviewed, and reveals the following: Involved Officer #2 and Involved Officer #1 received information that there was an active shooter inside of the Man Alive methadone clinic; Involved Officer #2, armed with a rifle, and Involved Officer #1 agreed to enter the clinic and treat it as an active shooter situation—Officer #3 followed them; the two got intel from employees inside, and moved towards where the active shooter was located, as Officer #3 followed; Involved Officer #2, Involved Officer #1 and Officer #3 all located Involved Citizen, and could see him through security glass—they could also see a security guard in the same area; all 3 officers gave verbal orders; Involved Officer #2 and Involved Officer #1 then entered the secure area while giving verbal commands; Officer #3 stood guard at the secured door, covering the hallway with his firearm; Officer #3 heard several
shots being fired—he ran towards it, but then sought cover; Officer #3 found Involved Officer #1 tending to Involved Officer #2 who was on the ground, suffering from a gunshot wound.

VIDEO EVIDENCE (non BWC)

1. Man Alive

The Man Alive methadone clinic where this incident occurred had 7 working cameras which were immediately obtained and reviewed by law enforcement officers and the SAO.

The video evidence unambiguously shows the Involved Citizen entering the clinic, bypassing the normal sign-in process, pulling out a firearm, approaching the LabCorp laboratory area, shooting twice into the lab workers’ space, walking to an employee’s office, and holding her at gunpoint while she allowed him into the secured pharmaceutical area. These videos also show the arrival and departure of several patients, employees, a security officer, and the 3 police officers who entered the area.

There is no camera footage of the incident as it unfolded in the secured portion of the pharmaceutical area.

AUTOPSY OF THE INVOLVED CITIZEN

“____________ died of Multiple (15) gunshot wounds. He had gunshot wounds to the torso (9), upper extremities (3), and lower extremities (3). Gunshot wounds of the mid-back injured the heart, aorta and left pulmonary vessels, left lung, liver, stomach, colon, left kidney, left adrenal gland, ribs and sternum, and were associated with internal bleeding; fragmented bullets (3) were recovered.  ... There was no visible evidence of close-range discharge of a firearm on the skin surrounding any of the gunshot wounds. The manner of death is HOMICIDE.” (Involved Citizen’s name has been omitted for purposes of this posting)

CADS/KGA

The KGA radio transmissions were reviewed for this legal review and the KGA appears consistent with the CAD report, as well as the BWC and private videos. The following are relevant CADS entries:

<table>
<thead>
<tr>
<th>Time</th>
<th>CADS/KGA Entry</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:06:33</td>
<td>Shots fired at Man Alive</td>
</tr>
<tr>
<td>7:07:06</td>
<td>Male armed with a gun, mixed race male</td>
</tr>
<tr>
<td>7:08:01</td>
<td>He ran down the hallway</td>
</tr>
<tr>
<td>7:08:13</td>
<td>Patient is in his office</td>
</tr>
<tr>
<td>7:10:18</td>
<td>Possible hostages—armed person</td>
</tr>
<tr>
<td>7:11:21</td>
<td>He just let the nurses leave</td>
</tr>
<tr>
<td>7:11:28</td>
<td>There was a shooting at Man Alive, caller has left</td>
</tr>
<tr>
<td>7:13:54</td>
<td>Suspect in Back in Medication area</td>
</tr>
</tbody>
</table>

2 BWC time stamps appear to be off by almost exactly one minute from CAD/KGA
WITNESSES STATEMENT SUMMARIES

LAW ENFORCEMENT WITNESSES

1. Involved Officer #2, written statement

Involved Officer #2 gave a written statement. His written statement was limited to: “Sir, I respectfully report that on July 15, 2019 at approximately 0705 hrs. I was involved in a use of force.”

2. Involved Officer #1, written statement

On July 15, 2019, the date of the incident, Involved Officer #1 gave the following written statement: “I was leaving roll call, a call came out for an armed person and shooting. I responded and entered the building. I came in contact with an armed suspect. The suspect discharged a handgun at me. In fear of my life and others, I discharged my service weapon.”

3. Police Officer #3, interview with SIRT

On July 15, 2019, the date of the incident, Officer #3 gave a verbal statement, indicating the following:

- that he responded to 2117 Maryland Avenue for a report of an armed person, and that call changed to a “shooting”
- that upon his arrival on scene, he saw multiple people on the side of the road who were all indicating that there was someone in the clinic armed with a gun
- that once inside the clinic, civilians directed them towards the man with a gun
- that he personally observed the man with the gun, and saw him retreat towards the back hallway
- that Involved Officer #1, Involved Officer #2 and another officer all gave clear verbal commands for the man to drop the gun
- that he heard a non-rifle round fired first, followed by several shots that sounded like they came from a rifle.
- that he secured the Involved Citizen’s revolver until the scene was secured, and then placed it back where he originally found it

CIVILIAN WITNESSES

At least 16 civilians gave written or verbal statements. Of particular importance, a supervisor at the clinic; a LabCorp employee who worked directly with an employee and was standing nearby him when he was shot; an employee of the clinic who worked in the dispensary area; the

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3 The date of this statement is in question. The written statement has both “8/15/19” and “7/30/19” noted.
clinical coordinator of the clinic; and the security guard at the clinic (the one working that day). In addition, several patrons of the clinic gave written and/or verbal statements.\footnote{As patients of the clinic, their names are being protected.}

The witnesses all gave the same account of what happened, to the extent of what they saw or heard. There are no contradictions in what any witness said happened.

Of particular note, the following witnesses gave information that only he or she could:

1. A supervisor of the clinic, indicated that she was the one who, at gun point, gave the Involved Citizen access to the secured methadone area, but did so with the negotiated promise that he would let 3 of the nurses go if she let him in. (After opening the door for him, he allowed her to flee, and shortly later held to his promise and allowed the 3 nurses to flee as well.)

2. A LabCorp employee stationed at the clinic, was mere feet from where the Involved Citizen murdered the employee. He heard the Involved Citizen open the lab window and say “you mother fucker” before he heard a gunshot. He then witnessed the Involved Citizen shoot the employee a 2\textsuperscript{nd} time, before warning him “don’t run nigga.” The employee then took cover, and survived the incident.

3. An employee in the dispensary area, saw the Involved Citizen when he entered the secured area, and quoted him as saying “I’m not gonna hurt ya, I just want the Methadone—I’m gonna drink the bottle, gonna kill myself.” She remembers the Involved Citizen also talking about “racial stuff” like “reparations.”

4. A clinical coordinator, stayed in the facility longer than any others, only leaving upon order of the police as they entered. He heard the Involved Citizen indicate that he, the Involved Citizen, wanted to kill himself.

5. A security guard for the clinic, indicated that she was advised by a client that there was a man with a gun inside the clinic (she was outside when she learned of this), she went into the clinic with her gun drawn, found the Involved Citizen and convinced him to put the gun down on a chair near him. She held him at gun point,\footnote{The security guard did not necessarily “hold him at gunpoint” in the sense that she pointed the gun at him and he stood still—rather, she held him at bay, where he, the Involved Citizen, couldn’t escape and couldn’t get by her based on her tactical position and locked doors at the end of the hallway where the Involved Citizen was trapped.} until the police arrived. She heard the Involved Citizen’s revolver shoot at the police while the police were giving instructions to drop the gun; she then heard the back-and-forth gun fire.

**LEGAL ANALYSIS**

At issue is whether the Involved Officers’ discharge of their respective firearms against the Involved Citizen was a lawful use of force. If not legally justified, the Involved Officers’ use of lethal force against the Involved Citizen could potentially constitute a number of criminal offenses under Maryland law, including Murder, Manslaughter, and/or Misconduct in Office.

**Law: Murder/ Manslaughter** – Second degree murder is the killing of another person with either the intent to kill or the intent to inflict such serious bodily harm that death would be the
likely result. Second degree murder does not require premeditation or deliberation. See MPJI-Cr 4:17.2

**Legal Defense: Self Defense** – In this case, there is evidence that the Involved Citizen fired his firearm at the Involved Officer. Consequently, there is evidence that the Involved Officer acted in self-defense. Self-defense is a complete defense in a criminal trial if the following four factors are present:

1. the defendant was not the aggressor or, although the defendant was the initial aggressor, he did not raise the fight to the deadly force level;
2. the defendant actually believed that he was in immediate and imminent danger of bodily harm;
3. the defendant’s belief was reasonable; and
4. the defendant used no more force than was reasonably necessary to defend himself in light of the threatened or actual harm.

Deadly force is that amount of force reasonably calculated to cause death or serious bodily harm. If a defendant used deadly-force the decision to use deadly-force must have been reasonable. Deadly force is reasonable if the defendant actually had a reasonable belief that the aggressor’s force posed an immediate and imminent threat of death or serious bodily harm. See MPJI-Cr 5:07

In addition, before using deadly-force, the defendant is required to make a reasonable effort to retreat; however, the defendant does not have to retreat if the defendant was lawfully arresting the victim. *Id.*

**Legal Defense: Partial Self Defense** – In order to be found guilty of murder, the evidence has to show that a defendant did not act in either complete self-defense or partial self-defense. If a defendant acted in complete self-defense, the defendant would not be guilty. However, if a defendant only acted in partial self-defense, the defendant would be guilty of voluntary manslaughter and not guilty of murder. See MPJI-Cr 4:17.2.

A defendant may have acted in partial self-defense if, for example, the defendant actually believed that he or she was in immediate and imminent danger of death or serious bodily harm, but a reasonable person would not have so believed. A defendant may also have acted in partial self-defense if the defendant used greater force than a reasonable person would have used, but the defendant actually believed that the force used was necessary. *See id.*

**Law: Misconduct in Office** – “In Maryland, misconduct in office is a common law misdemeanor. It is corrupt behavior by a public officer in the exercise of the duties of his office or while acting under color of his office.” *Duncan v. State*, 282 Md. 385 (1978) (footnote omitted).

Maryland courts have further defined the elements of this offense as follows:
The corrupt behavior may be: (1) the doing of an act which is wrongful in itself, or “malfeasance”; (2) the doing of an act otherwise lawful in a wrongful manner, or “misfeasance;” or (3) the omitting to do an act which is required by the duties of the office, or “nonfeasance.”

*Riley v. State, 227 Md. App. 249, 263 (2016) (citations omitted) (holding that a police officer’s use of unjustified force can constitute an assault, which in turn can, “constitute[] an ‘oppressive and willful abuse of authority’” that is “not simply a mere error in judgment;” as such, it can be sufficient evidence to convict the officer of misconduct in office.) (quoting *Leopold v. State*, 216 Md. App. 586 (2014) (other citations omitted)).

**Law: Use of Force** – Consequently, at issue is whether the Involved Officer’s use of deadly force against the Involved Citizen was a lawful use of force. More specifically, the question is whether the force here was used intentionally or accidentally: and if used accidentally, whether such use was grossly (criminally) negligent. The U.S. Supreme Court has held that “all claims that law enforcement officers have used excessive force – lethal or not – in the course of an arrest, investigatory stop, or other ‘seizure’ of a free citizen should be analyzed under the *Fourth Amendment* and its ‘reasonableness’ standard.” *Graham v. Connor*, 490 U.S. 386, 395 (1989) (emphasis in the original).

The Court has further pointed out that it’s “*Fourth Amendment* jurisprudence law has long recognized that the right to make an arrest or investigatory stop necessarily carries with it the right to use some degree of physical coercion or threat thereof to effect it.” *Id.* at 396 (citing *Terry v. Ohio*, 392 U.S. 1, 22-17 (1968)).

The reasonableness of a particular use of force by a police officer is judged from the perspective of a reasonable officer on the scene. The “reasonableness” inquiry in a use of force case is an objective one. The question is whether the police officer’s actions are “objectively reasonable” in light of the facts and circumstances confronting the police officer, without regard to the officer’s underlying intent or motivation. *Id.* at 397.

In *Graham v. Conner*, the U.S. Supreme Court explained that the proper application of a reasonableness test under the *Fourth Amendment*, “requires careful attention to the facts and circumstances of each particular case, including the severity of the crime at issue, whether the suspect poses an immediate threat to the safety of the officers or others, and whether he is actively resisting arrest or attempting to evade arrest by flight.” *Id.* at 396 (citing *Tennessee v. Garner*, 471 U.S. 1, 8-9 (1985) (the question is “whether the totality of the circumstances justify[s] a particular sort of . . . seizure”)).

**Discussion** –

– In this case, there is no dispute as to the facts. The Involved Citizen walked into the Man Alive facility while armed with a revolver, he bypassed the staff and customary procedures, located an employee, shot and killed him. He then took another employee hostage, and forced her to let him into the secured pharmaceutical area, where he obtained methadone and started to consume
it. He was then held at bay by an armed security officer who convinced him, for a few moments, to disarm himself; however, once police officers arrived, he re-armed himself, and refused the lawful police orders to put his gun down. Officers closed in on the Involved Citizen, and the Involved Citizen shot his gun at the two police officers—not striking them. Involved Officer #2 then shot the Involved Citizen through the wall. After a brief calm, the Involved Citizen appeared from behind the wall, with his gun pointed at the two officers, yelled “mother fucker” and shot Involved Officer #2 in the stomach. Involved Officer #2 and Involved Officer #1 both fired their weapons at the Involved Citizen, striking him several times, leading to his death.

The Involved Officers had sufficient evidence to believe that there was an active shooter inside the Man Alive business. They had the right to enter the facility and to confront the potential shooter. Once inside, the two officers independently verified that there was an armed man, the Involved Citizen, and he was refusing to comply with their orders. Once the Involved Citizen fired a shot at them, officers were justified in firing back. Once the Involved Citizen fired at them again, they were justified in firing at him yet again.

In light of Terry, Graham, and Gardner, and the “Reasonable Officer” standard that must be applied, the evaluation of the evidence in this case has yielded no evidence of unlawful or unjustified use of force. Objectively reasonable officers would have responded the same way as Involved Officer #2 and Involved Officer #1 did.

CONCLUSION

Given that the BWC video and inside video shows: (1) the Involved Citizen was armed with a gun (2) the Involved Citizen while in the treatment center killed an employee, (3) the Involved Citizen continue to threaten employees with the gun, and (4) the Involved Citizen fired a shot at the two officers and refused to surrender, it would be objectively reasonable for the officers to conclude that their safety and the safety of the employees and patients at the treatment center was at risk, leading them to protect themselves and the people in the treatment center by utilizing force. The decision to use force was justified under the Maryland law of self-defense and the standard put forth by the Supreme Court in Graham v. Connor.

The officers’ actions in this case did not rise to a level of criminal culpability. Therefore, the State declines to prosecute the officers.
Above, the Involved Citizen is passing 10 patients in a waiting area.

Below, the Involved Citizen has turned the corner towards the LabCorp urinalysis area, and has now armed himself.
Above, the Involved Citizen is reaching through the window and firing one shot at an employee. Below, the Involved Citizen pulls his firearm back and cocks the hammer before reaching in and firing a 2nd shot at an employee.
Above, the Involved Citizen is reaching through the window and reaching to his left to get an angle on firing a 2nd shot at an employee, who has fallen to the ground from the first gun shot. Below, an employee has walked around the corner and to the facility director's office while still armed. The area to the right is the secured pharmaceutical area.
Above, the Involved Citizen has taken an employee hostage at gun point, and is walking her towards the secured access door to the pharmaceutical area. After the employee opens the door, the Involved Citizen releases her and she leaves out the back doors. Below, the first two (of three) employees from the secured pharmaceutical area have been released. The third follows soon after.
Above, the security guard is rushing into the secured area. Below, Involved Officer #2 is seen first moving into the pharmaceutical area.
Above, Involved Officer #2 is looking at the Involved Citizen through the security glass, as is Involved Officer #1 (behind him). Involved Officer #2 is giving verbal orders to the Involved Citizen to drop the gun.

Below, Involved Officer #2 enters the secured area. Involved Officer #1 follows.
Above, Involved Officer #2 is giving orders to the Involved Citizen to drop the gun. Involved Officer #2's rifle is pointed at the Involved Citizen. To the side the security guard can be seen — this is where she positioned herself to hold the Involved Citizen at bay until law enforcement arrive. Below, the Involved Citizen raises the gun and points it at the officers.
Above, smoke from the gunshot by Involved Citizen. No officers have fired any weapons at this point.

Below, Involved Officer #2 begins to fire at the Involved Citizen (through the wall—objects on the wall are getting shot off the wall). The Involved Citizen can be heard yelling, "ouch, shit" after the first two gunshots—implying the Involved Citizen was struck by a bullet. It is important to note that an employee is barricaded behind this bathroom door.
Above, the Involved Citizen yelled “mother fucker” as he came out from behind the wall, raised his gun at the officers, and fired a shot at them—striking the Involved Officer #2 in the abdomen. Below, the Involved Citizen has been shot several times, and is seen here as he is collapsing to the ground.
Above, the Involved Officer #2 falling backwards, having just been shot in the abdomen; The Involved Citizen has fallen to the ground, and is in a sideways fetal position.

Below, Involved Officer #1 is dragging Involved Officer #2 to safety, and towards medics.
Above, the Involved Citizen's gun has been recovered and is being secured. Involved Citizen is being attended to by medics, and soon after officers will assist the medics.
Below, the Involved Officer #1 has located an employee hiding in the bathroom. She has suffered shrapnel wounds to her face and chest. Involved Officer #1 walks her out to medics.