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### \*\* PUBLIC DISCLOSURE COPY \*\*

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047

Form **990** (2021)

	partment of the Treasury ernal Revenue Service
Α	For the 2021 cale

AF	or the	2021 calendar year, or tax year beginning and endin	g	
B	Check if applicable:	C Name of organization	D Employer identifi	cation number
	Address	THE ARC OF THE UNITED STATES		
	Name change	Doing business as	13-56420	32
	Final return/	1825 K STREET, NW 120	0 (202)534	
_		City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	11,401,941.
	tion pending			
			Year of formation: 2000	State of legal domicile: MD
			S AND PROTECTS	THE HIMAN
ЭС		RIGHTS OF PEOPLE WITH INTELLECTUAL AND DEVE	LOPMENTAL DISA	BILITIES
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8 8				64
/iti				62
(cti)				0.
~				0.
			Prior Year	Current Year
e	<b>8</b> C	Contributions and grants (Part VIII, line 1h)		7,372,863.
ent				3,737,806.
Sev				
_			10 041 000	
			-	
ses				0,555,423.
)en	16a ⊦	rotessional fundraising fees (Part IX, column (A), line 11e)	0.	0.
Ă			3 049 980.	3 240 489.
				975,570.
or				
lanc	<b>20</b> T	otal assets (Part X, line 16)	16 167 007	18,905,974.
dBa	<b>21</b> T	· · · · · · · · · · · · · · · · · · ·	1,749,096.	1,639,356.
Image: Control of the contrel of the control of the control of the control of t		17,266,618.		
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				y knowledge and belief, it is
true	, correct,			
				2022
Sig	n	·	Dale	
Her	e			
			Date Lower	I PTIN
Dair				
	-		<u>Moj 11/11/2022</u> self-employ	
	· –			JZ IJJZ000
030	Silly		Phone no ( 3	01) 951-9090
May	/ the IR	-		

132001 12-09-21 LHA For Paperwork Reduction Act Notice, see the separate instructions. SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

		13-5642032	Page
Part III Statement of Program Service Accomplishments			
	Check if Schedule O contains a response or note to any line in this Part III		Σ
1			
	· · ·		MAN
	RIGHTS OF PEOPLE WITH INTELLECTUAL AND DEVELOPMENTAL	DISABILITIES	
	(IDD) AND ACTIVELY SUPPORTS THEIR FULL INCLUSION AND	PARTICIPATION	IN
	THE COMMUNITY THROUGHOUT THEIR LIFETIMES.		
2	Did the organization undertake any significant program services during the year which were not listed on the	ne	
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			ATED
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	EXTENSIVE EDUCATIONAL RESOURCES TO SUPPORT IMPROVEMEN	T. THE ARC	
	PROVIDED GUIDANCE IN THE AREAS OF GOVERNANCE, PROGRAM	I PLANNING AND	
	EVALUATION, FINANCIAL MANAGEMENT, HUMAN RESOURCES MAN	IAGEMENT ,	
	TRANSPARENCY AND ACCOUNTABILITY, FUNDRAISING AND MORE	•	
łc	(Code: ) (Expenses \$ 2,274,076. including grants of \$ 446,250.) (	Revenue \$ 77,	437.
	PROGRAM INNOVATION: THE ARC OF THE UNITED STATES (THE		
	CONSTANTLY STRIVING TO IMPROVE THE QUALITY OF LIFE FC	R PEOPLE WITH	IDD
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	THE ARCAWORK PROGRAM SUPPORTED PEOPLE WITH TOD WHO AR	E UNEMPLOYED T	0
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			<b></b>
		ND CORRECTIONS	
1d			
		)	
4e	Total program service expenses ► 8,453,075.		
			<b>90</b> (202
2002		N(S)	
_	2		
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Form	990	(2021)

 Form 990 (2021)
 THE ARC OF THE UNITED STATES

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
_	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		х	
F	during the tax year? If "Yes," complete Schedule C, Part II	4	- 11	<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," <i>complete Schedule C, Part III</i>	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
•	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			x
	Schedule D, Parts XI and XII	12a		
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	104	х	
40	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13	л	x
13 14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
14a b	Did the organization maintain an onice, employees, or agents outside of the United States?	140		<u> </u>
D.	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			<u> </u>
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
132003	3 12-09-21	Form	990	(2021)

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Form 990 (					-	-	THE	
Part IV	Che	ecklist	of Requi	е	d Sch	edul	es (cont	inued)

22       Did the organization report more than \$5.000 of grants or other assistance to or for domestic individuals on Part K, Convert and Market Auel, Caraci I and Auel Auel, Auel Auel, Caraci I and Auel Auel, Auel Au				Yes	N
23       Did the organization answer "Ve" to Part VII, Section A, Iine 3, 4, or 5, abolt compensation of the organization surrent and forms of tifters, directors, trustees, key employees, and highest compensated employees? If "Ves," complete Schedule J.       23       X         24a       Did the organization haves tax-exempts bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that vais sates dat fare December 31, 2002? If "Ves," "answer lines 24 bitrough 24 dan complete Schedule K. If No, "go to line 25a       24a         Did the organization maintain an escrow account other than a refunding escrow at any time during the year to delease any tax-exempt bonds?       24a         24b       Did the organization maintain an escrow account other than a refunding escrow at any time during the year?       24a         24c       Did the organization maintain an escrow account other than a refunding escrow at any time during the year?       24a         25a       Section 50(16(3), 50(16(4), 400(4), 400 organizations. Did the organization append is an excess benefit transaction with a disqualified person than prior year, and that the transaction has not been reported an any correct transaction with a disqualified person in a prior year, and that the organization report any amount on Part X, line 5 or 22, for receivables from or payables to ary current or former officer, director, trustee, key employee, creator or founder, substantial contributor or any othere assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, disks, complete Schedule L, Part II.       25a         27       Did the organization neproved a gr	22		22		X
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete     23     X       24a     Did the organization have a tax exempt bond issue with an outstanding principal amount of none than \$100,000 as of the last day of the year, that was issue data flat December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.     24a       24b     Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?     24b       24c     Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?     24c       25a     Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization are excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year.     25a       25a     Did the organization area tax any on these persons? If "Ne," complete Schedule L, Part I     25a       25a     Did the organization memory of the organization's prior Forms 990 or 990 E2? If "Yes," complete Schedule L, Part I     25b       25b     Did the organization prior y any of these persons? If "Ne," complete Schedule L, Part I     25b       25b     Did the organization prior y any of these persons? If "Ne," complete Schedule L, Part I     25c       25b     Did the organization prior y a grant or other assistance to any corrent or former officer, director, trustee, key employee, creator or founder, outstanding contributor? If "Yes," complete Schedule L, Part IV, instructors tapplicable filting threshody, complete Schedule L	23				_
241       Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the schedule K. If 'No,' on to ine 25a.       24a         24b       Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization ragage in an excess benefit transaction with a disqualified person uning the year?       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization ragage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization is prior Forms 590 or 990 E2? If 'Yes,' complete Schedule L, Part I       25a         25b       Ub the organization norport any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustes, key employee, creator or founder, substantial contributor, or 35% controlled entity of campit member of any of these persons? If 'Yes,' complete Schedule L, Part I       26         27       Did the organization provide a grant or other assistante to any current or former officer, director, trustes, key employee, creator or founder, substantial contributor or 35% controlled entity for theore, functor, trustes, key employee, creator or founder, substantial contributor? If 'Yes,' complete Schedule L, Part IV.       26         28       A current or former officer, director, trustes, key employee, creator or founder, substantial contributor? If 'Yes,' complete Schedule L, Part IV.       27 <td></td> <td>and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete</td> <td>23</td> <td>x</td> <td></td>		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23	x	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?         24b           c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?         24c           d Did the organization act as an 'on behaft of' issuer for bonds outstanding at any time during the year?         24d           25a         Section 501(63), 501(c4)(A), 405 (c1)(c2) organizations. Dut the organization engage in an excess benefit transaction with a disqualified person during the year? // 'Yes,' complete Schedule L, Part I         25a           25 Did the organization or any tatic tengaged in an excess benefit transaction with a disqualified person in a prory year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If 'Yes,' complete Schedule L, Part I         25b           26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 33% controlled entity or ramity member of any of these persons? If 'Yes,' complete Schedule L, Part II         26           27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV         27           28 Aurent or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV         28a           29 A Sobio controlled entity of one or more individual a	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete</i>			2
c       Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds?       Zet         d       Did the organization acts as an 'on behaff of' lissuer for bonds outstanding at any time during the year?       Zet         Zet       Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?       Zet         Zet       the organization acts as an 'on behaff of' lissuer for bonds outstanding at any time during the year?       Zet         Zet       the organization acts as an 'on behaff of' lissuer for bonds outstanding at any time during the year?       Zet         Zet       the organization acts as an 'on behaff of' lissuer for bonds outstanding at any time during the year?       Zet         Zet       the organization provide person during the year?       Complete Schedule L, Part I       Zet         Zet       the organization provide any of these persons? If 'Yes,' complete Schedule L, Part II       Zet       Zet         Zet       Was the organization party to a business transaction with no of the following parties (see the Schedule L, Part II)       Zet       Zet         Zet       Was the organization party to a business transaction with no or the following parties (see the Schedule L, Part II)       Zet       Zet         Zet       Complete Schedule L, Part II       Zet       Zet       Zet	<b>b</b>				2
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?       244         25a Section 501(c8), 501(c1)(a), and 501(c2)0 organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction have that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction have to been reported on any of the organization 'form 590 or 990:C27 if 'Yes,' complete Schedule L, Part I       25b         26 Did the organization perport any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity in chuding an employee thereof) or frame or gurant of therme officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35%, controlled entity in chuding an employee thereof) or framy or these persons // 'Yes,' complete Schedule L, Part II       27         28 Was the organization provide there of a grant or there vegator or founder, or substantial contributor? // 'Yes,' complete Schedule L, Part IV.       28         29 X       a current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // 'Yes,' complete Schedule L, Part IV.       28         29 X       Did the organization receive contributions? // Yes,' complete Schedule L, Part IV.       28         20 Did the organization receive contributions? // Yes,' complete Schedule L, Part IV.       28         20 Did the organization neceive more individua		Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I       25a         25b       Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 900 or 990-E27 If "Yes," complete Schedule L, Part I       25b         26b       Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%       26b         27b       Did the organization a party to a business transaction with one of the following parties Schedule L, Part II       26         27b       Unders, ubstantial contributor or employee thereod, or grant seatorial contributor member, or to a 35% controlled entity (including an employee thereod) or family member of any of these persons? If "Yes," complete Schedule L, Part IV.       27         28b       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a         27       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV.       28a         28       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part I       28a         29       Did the organization negle	d				
transaction with a disqualified person during the year/ If 'Yes,' complete Schedule L, Part I       25a         b       Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 90-E27 If 'Yes,' complete Schedule L, Part I       26b         2       Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II       26         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor? If 'Yes,' complete Schedule L, Part II       27         28       Was the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV       28a         29       X aurent or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV       28a         29       X aurent or former officer, director, trustee, key employee, creator or founder, substantial contributor? If 'Yes,' complete Schedule L, Part IV       28a         20       Did the organization receive contributions? If Yes,' complete Schedule L, Part IV       28a       29					
b       Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If 'Yes,' complete Schedule L, Part I       25b         28       Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II       26         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,'' complete Schedule L, Part III.       27         28       Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV. Instructions for appliceable filing thresholds, conditions, and exceptions):       28         a       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV.       28         b       A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV.       28         c       A 35% controlled entity of one or more individuals and/or organizations? If 'Yes,' complete Schedule M       29       X         Oid the organization neceleve conthitbutions of an historical treasures, or ofu			25a		X
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%       26         controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       26         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV       27         28       Was the organization provide substantial contributors or more individuals and/or organization parties (see the Schedule L, Part IV       28a         2       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV       28a         2       A stamily member of any individual described in line 28a / 1f "Yes," complete Schedule M       29         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29         20       Did the organization illed conservation contributions? If "Yes," complete Schedule N, Part I       30         30       Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 317(701? 4T "Yes," complete Schedule R, Part I       31         31       Did the organization receive and thore transites schedule R, Part I, III, or IV, and Part V, line 1	b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If</i> "Yes," <i>complete</i>	25b		X
27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee, member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV.       27         28       Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV. instructions for applicable flight presholds, conditions, and exceptions):       28         29       Did the organization contributions of any intersex, even or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       20         30       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I       30         31       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I       31         32       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II       31         33       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II       31         34       Was the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II       31         35 <t< td=""><td>26</td><td>Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current</td><td></td><td></td><td></td></t<>	26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II.       27         28       Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part IV. instructions for applicable filling thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a         b       A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28b         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29         29       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       30         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       31         31       Did the organization neated to any tax exempt or taxable entity? If "Yes," complete Schedule N, Part I       32         32       Did the organization receive any payment treas as exparte from the organization under Regulations sections 510.7701:3? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, Iine 1       34         33		LX    column (A), line 2? If "Yes," complete Schedule I, Parts I and III      the organization answer "Yes' to Part IVII, Section A, line 3, 4, or 5, about compensated employees? If "Yes," complete defile J      the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete defile J      the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?    2      the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?    2      the organization invest as an 'on behaft of' issuer for bonds outstanding at any time during the year?    2      the organization aver that engage in an excess benefit transaction with a disqualified person turing the year? If Yes," complete Schedule I, Part I    2      e organization aver that engage in an excess benefit transaction with a disqualified person any of the organization's prior Forms 990 or 990-E27 If Yes," complete defue I, Part I    2      the organization portide any of these persons? If Yes," complete Schedule I, Part I    2      the organization provide a grant or ther assistance to any current of tome officer, director, trustee, key employee, cardor or founder, substantial contributor, or 35%    2      to or topoles, substantial contributor or amployee thereol, a grant assistance to any ot these persons? If Yes," complete Schedule I, Part I I    2      the organization provide a grant or there assistance to any current of tome file, director, trustee, key employee, cardor organization contributors and the discust			Х
28       Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): <ul> <li>A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If</li> <li>Yes, "complete Schedule L, Part IV</li> <li>C A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/If</li> <li>Yes," complete Schedule L, Part IV</li> <li>Patient or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If</li> <li>Yes," complete Schedule L, Part IV</li> <li>Patient or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If</li> <li>Yes," complete Schedule L, Part IV</li> <li>Patient or former officer, director, trustee, key employee, creator or founder, or substantial contributor?</li> <li>Yes," complete Schedule L, Part IV</li> <li>Patient or contributions of ant, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I</li> <li>Did the organization receive contributions of ant, historical treasures, or other similar assets, or qualified conservation</li> <li>Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I</li> <li>Did the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</li> <li>Did the organization neated to any tax-exempt or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?</li> <li>Bit "Yes," complete Sche</li></ul>	27	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,	27		X
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28b         c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/If "Yes," complete Schedule L, Part IV.       28c         29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29 X         30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       30         31 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       31         32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/If "Yes," complete Schedule N, Part II.       32         33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33         34 Was the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       X         35 Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36         37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, line 1       36         38 Did the organization complete S	а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	282		x
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f       28c         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       31         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I       33         34       Was the organization nelated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(C)(3) organizations. Did the organization make any transfers to an exempt on-charitable related organization?       35b       X         37       Did the organization complete Schedule Q. Part V, line 2       36       37       36         38       section 501(C)(3) organizations. Did the organization make any transfers to an exempt on-charitable related organization?       37       37	h				X
29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       30       30         31       Did the organization sel, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       32         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization neceive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes," complete Schedule R, Part V, line 2       36       36         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization?       36       35a       X         36       Section 501(c)(3) organization so is define organization make any transfers to an exempt non-charitable related organization?       37       36         37       Did the organization complete Schedule Q and provide explanations o		A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?If			x
30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/If "Yes," complete Schedule N, Part I       32         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I       33         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       34         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36         37       Did the organization complete Schedule O and provide explanations on Schedule O for Part V, line 2       37         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part V, lines 11b and 19?       37         39       Did the organization complete Schedule O and provide explanations on Schedule O for Part V, lines 11b and 19?       38         30       Did the organization complete	29			Х	
31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?If "Yes," complete Schedule N, Part I       32         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Did the organizations. Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35b       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V I       37         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       36         39       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38         30       Did the organization complete Schedule O and provid	30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		x
Schedule N, Part II       32         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes," to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35b       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V.       36         37       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38         39       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38         38       X       Statements Regarding Other IRS Filings and Tax Compliance       Yes         1a       Enter the number reported in bo	31		31		Х
sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i> 34 Was the organization related to any tax-exempt or taxable entity? <i>If</i> "Yes," <i>complete Schedule R, Part II, III, or IV, and Part V, line 1</i> 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i> 35a Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i> 35a Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> 35a Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 35a Note: All Form 990 filers are required to complete Schedule O 35b Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 35a Enter the number reported in box 3 of Form 1096. Enter -0 if not applicable 35b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 35a Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 35a Complete Schedule organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 35a Complete Schedule organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 35a Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 35a Did the organization comply with backup withholding	32		32		х
Part V, line 1       34       X         35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38         Note: All Form 990 filers are required to complete Schedule O       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       38       X         Check if Schedule O contains a response or note to any line in this Part V       1a       60       60       60       60       60       1b       0       60       1a       X       X </td <td>33</td> <td>sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I</td> <td>33</td> <td></td> <td>x</td>	33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2       36       36         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37         39       Did the organization complete Schedule O complete Schedule O       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       38       X         1a       60       1b       0       0       1         b       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       60       1       1       0       1       0       1       0       1       1       X       Yes       1       X       Yes       1       1       0       1       0       1       0       1       0       1       0		Part V, line 1			
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       36         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization       36       37         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       37         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       Yes         Check if Schedule O contains a response or note to any line in this Part V       Yes         1a       60       1b       0         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1a       60         b       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X		the organization answer "Yes" to Part VII, Section A, Ine 3, 4, or 5, about compensated employees? If 'Yes,' complete herbolis J         Intervention of the organization have a tax exempt born issue with an outstanding principal amount of more than \$100,000 as of the tay of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete herbolis J. If 'Nes,' answer lines 24b through 24d and complete herbolis J. If 'Nes,' answer lines 24b through 24d and complete herbolis J. If 'Nes,' answer lines 24b through 24d and complete herbolis J. If 'Nes,' answer lines 24b through 24d and complete herbolis J. If 'Nes,' answer lines 24b through 24d and complete herbolis J. If 'Nes,' and' Thes,' and the organization markina an escow account other than a refunding escow at any time during the year 'O'''''''''''''''''''''''''''''''''''		~	
If "Yes," complete Schedule R, Part V, line 2       36         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       38       X         Check if Schedule O contains a response or note to any line in this Part V       Yes         1a       60       1b       0         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1a       60       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X		within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	x	
and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> 37 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X		If "Yes," complete Schedule R, Part V, line 2	36		Х
Note: All Form 990 filers are required to complete Schedule O       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       Yes         Check if Schedule O contains a response or note to any line in this Part V       Yes         1a       60       1a       60         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
Check if Schedule O contains a response or note to any line in this Part V         Yes         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       60       1b       0         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X		Note: All Form 990 filers are required to complete Schedule O	38	х	
1a       60         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X					
b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X				Yes	N
(gambling) winnings to prize winners?	b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
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Form 990	(2021)
Part V	Sta

2a         Enter the number of employees reported on Form W-3, Transmittel of Wage and Tax Statements.         2a         64           bit at least one is reported on line 2a, did the organization file all required federal employment tax returns?         2b         X           bit the test on of lines 1 and 2 is greater than 250, you may be required to e-file. See instructions.         3a         3b         3b         3b         3b         3b         3b         3b         3c				Yes	No
b         If a test one is reported on line 2a, dd the organization file al required federal employment fax returns?         2b         X           3a         Dd the organization have unrelated basiness gross income of \$1,000 more dump the year?         3a         3a           3b         Dd the organization have unrelated basiness gross income of \$1,000 more dump the year?         3a           3b         The 'tes', 'nas if field a form 600 Tor this year, if the organization have an interest n, or a signature or other authorty over, a financial accounts (FEAP).         5a           3b         If 'tes', 'nas if field a foreign country 's unrelated basiness gross income any time dump to tax year?         5a           3b         If 'tes', 'nas if field a foreign country 's unrelated basiness grows income any time dump to tax year?         5a           3c         If 'tes', 'nas if field a organization field resign country 's unrelated basiness grows and the organization solution any time dump to a prohibite tax shear?         5a           3c         If 'tes', 'id the organization field resign country 's unreliable as christable contributions?         5a           3c         If 'tes', 'id the organization nave year yea valicitation an express statement that such contributions or grits wive not tax idductible?         5a           3c         If 'tes', 'idd the organization include with every solicitation an express statement that such contractions or grits wive not tax idductible?         7a           3c         Organization such argue y					
Note:         It has sum of lines 1a and 2a is greater than 250, you may be required to -//a. See instructions.         3a           3b         Did the organization have unrelated business gross income of \$1,000 or more during the year?         3b           4         At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a time of a account, see outhin 5 account, or other financial accounts (FBAF).         4a           bit if 'Yes', inster the name of the foreign county.         5a         5a           See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF).         5a           5a Was the organization at gross receipts that are normally greater than \$100,000, and did the organization solution are on tax deductible as chartable contributions?         5a           5a Does the organization at gross receipts that are normally greater than \$100,000, and did the organization solut are normally greater than \$100,000, and did the organization solut ary contributions relate a spread the action 170(c).         5a           5b If 'Yes', did the organization nick and enty as a collution and party for gools and services provided?         7a           7 Organizations that wen or form 3828 for and party as a collution and party for gools and services provided?         7a           7 Did the organization and excharge displays as collution and party for gools and services provided?         7a           7 Did the organization and excharge displays as corithand and party as conthand and the acton than any			-	v	
ab Did the organization have unrelated business gross income of \$1.000 or more during the year?       3a         bit I''yea', has life a Form 300.17 for his year I' No" to line 3b, provide an explanation on Schedule 0			20		
b II "Yes," has it life a Form 980.17 for this year? If "No" to line 30, provide an exploration on Schedule O a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bark account, securities account, or other financial account)? b II "Yes," enter the name of the foreign country (such as a bark account, securities account, or other financial account)? b II "Yes," enter the name of the foreign country (such as a bark account, securities account, or other financial accounts (FBAR), see instructions for filing requirements for FiniCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), b ID dary stable party notify the organization that twas or is a party to a prohibited tax shelter transaction? c II "Yes" to ine Sa or 5b, did the organization that twas or is a party to a prohibited tax shelter transaction? c II "Yes", fid the organization nau gross receipts that are normally greater than \$100,000, and did the organization solid any contributions that may receive adouttible contributions and express statement that such contributions or gifts were not tax deductible? 7 organization that may receive adouttible contributions under section 170(c). 8 Uht e organization neckeve any funds, directly or indirectly, to pay prenums on a personal benefit contract? 7 the organization neckeve any funds, directly or indirectly, to pay prenums on a personal benefit contract? 7 the organization neckever any funds, directly or indirectly, on a personal benefit contract? 7 the organization neckeve any funds, directly or indirectly, on a personal benefit contract? 7 the organization neckeve any funds, directly or indirectly, on a personal benefit contract? 7 the organization neckeve any contributions of qualified intelectual property, did the organization file a form 0880? 8 processing organization neckeve and contrabution of qualified intelectual property, did the organization file form 0880? 9 the organi			20		x
a A ram time during the calendar year, did the organization have an interest in, or a signature or other suthority over, a financial account? is for the subs account, securities account, or other suthority over, a financial account? I a foreign country M and the subscript of proright as a subscript of proright as a subscript. The subscript of provided to the payof? The organization include with every solicitation and party for goods and services provided to the payof? The organization necker a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payof? The organization necker a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payof? The organization necker a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payof? The organization necker a payment in excess of \$75 made party as a contribution or subscript. The subscript as a subscript of which it was required to the regurdent on the server as payor and the subscript. The subscript as a subscript of which it was required to the regurdent on charact? The subscript as a subscript of payor which it was required? The transaction receive a contribution of called the server as a server the server the server the server the server of the server as a server the server the server the server the server as a server the server the server the s					
financial account in a foreign country (such as a bank account, securities account, or other financial account)?       4a         b If 'Yes, 'enter the name of the foreign country ▶       5a         See instructions for fing regularments for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF).       5a         B Ub dary taskbel park) notify the organization that twas or is a party to a prohibited tas shelter transaction?       5a         D Carl y taskbel park) notify the organization that twas or is a party to a prohibited tas shelter transaction?       5a         D D ary taskbel park) notify the organization that was or is a party to a prohibited tas shelter transaction?       5a         D D ary taskbel park) notify the organization that was or is a party to a prohibited tas shelter transaction?       5a         D If 'Yes,' did the organization in all was or is a party task shelter transaction?       5a         D If the organization shell arge contributions under section 170(c).       0b       0b         D If the organization shell, exchange, or otherwise dispose of tangble personal property for which it was required to file Form 8282?       7c         D If the organization necelve a accontribution of qualities intelevity or indirectly, to pay premiums on a personal benefit contract?       7r         D If the organization necelve a accontribution of qualitie intelectual property, oit the organization file a Form 1080-C?       7h         M Sponsoring organization make any taskbed funds. Did adonar divised fund maintained by the sponsoring or			30		
b If 'Yes', end the the name of the foreign county ► See instructions for filing requirements for finCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), See instructions for filing requirements for finCEN form 1886-177. D Dd my taxable party notify the organization in the was or is a party to a prohibited tax shefter transaction? So If 'Yes' to line Bar ofs, did the organization in the more 1888-177. So Determines that were not tax deductibles on Anitable contributions? D (Yes', 'did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles on Anitable contributions? D (Yes', 'did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles on the value of the goods or services provided to the payo? To 2 D (D the organization network a payment in excess of 3/5 made party is a contribution and party for goods and services provided to the payo? To 10 the organization network as payment in excess of 3/5 made party is a contribution and party for goods and services provided to the payo? To 2 D (D the organization network and the value of the goods or services provided? To 10 the organization network and the value of the goods or services provided? To 2 D (D the organization network and contribution or qualified intelectual property for which it was required? To 2 D (D the organization network and contribution or qualified intelectual property, did the organization file a Form 1088-07. To 2 D (D the organization network and contribution or qualified intelectual property, did the organization file a Form 1088-07. To 3 Spectors 50((c)(2) organizations make any taxabiling at any time during the year? M / A D (D the sponsoring organization make any taxabiling at any time during the year? So chard 50 (c)(2) organizations make any taxabiling at any time during the year? M / A D (D the sponsoring organization make any taxabiling at any time dur			42		x
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       5a         a Was the organization aparty to a prohibited tax shelter transaction at tax year?       5a         b Did any taxabile party nofity the organization that it was or is a party to a prohibited tax shelter transaction?       5c         c If "Yes" to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?       5c         c If "Yes", did the organization nual gross receipts that are normally greater than \$100,000, and did the organization soliet any contributions that may roceive deductible contributions?       6b         b If "Yes", did the organization notify the donor of the value of the goods or services provided to the payo?       7a         b If the organization selle, exchange, or otherwise dispose of tangible personal property for which it was required       7b         c Did the organization neceive apy and party as a contribution and party to ergonization file or ortholut of any apy permiums, directly or indirectly, on a personal benefit contract?       7c         d If "Yes," lid the organization neceive a contribution of durified intelectual property, diff the organization file a Form 1098-02?       7h         g Did the organization mathering door advised funds.       Did along advised funds.       7c         d If Yes, "indicate the number of Forms 8282 filed during the year?       Zd       Zd       7d       7f         g If the organization neceived a contribution of qanization indiffe			Ha		
a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?					
b Did ny taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       50         c If "Yes" to line So r Sb, did the organization file Form 886817?       50         Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solit and contributions?       6a         D If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts       6b         Organization receive apyment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?       7a         D If the organization notify the donor of the value of the goods or services provided?       7b         D If the organization notify the donor of the value of the goods or services provided?       7c         O Id the organization notify the donor of the value of the goods or services provided?       7c         If "Yes," did the organization notify the donor of the value of the goods and party for goods and services provided?       7c         If the organization necevies a pay premiums, directly or indirectly, on a personal benefit contract?       7c         If the organization necevies a contribution of qualitied intellectual property, did the organization file Form 8898 as required?       7f.         If the organization neceves access business budings at any time during the year?       N/A       8         Sponsoring organization neave exerses budings at any titime during the year?       N/A       8			52		x
c II "Yes" to line 5a or 5b, did the organization file Form 8888 T?					x
a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?       6a         b If "Yes," did the organization include with every solicitation an express statement that such contributions or gitts       6b         Organizations that may receive deductible contributions under section 170(c).       7a         a Did the organization neitly the donor of the value of the goods or services provided?       7b         b If "Yes," did the organization neitly the donor of the value of the goods or services provided?       7c         c Did the organization neitly the donor of the value of the goods or services provided?       7c         d If "res," findicate the number of Forms 8282 field during the year       [7d]         e Did the organization neoleve a contribution of qualified intellectual property, (di the organization file Form 8282)       7c         f If the organization materian statianing donor advised fund the organization file Form 809 as required?       7h         k Sponsoring organizations maintaining donor advised funds.       10a         a Did the sponsoring organizations. Enter:       N/A       9a         b Did the sponsoring organizations. Enter:       N/A       10a         a Initiation feese and capital contributions include on Part VIII, line 12, for public use of club facilities       10b         b Gross income from members or shareholders       N/A       <					
any contributions that were not tax deductible as charitable contributions?  6  6  6  6  7  7  7  7  7  7  7  7  7		for the calendar year ending with or within the year covered by this return       2a       64         east one is reported on line 2a, did the organization file al required federal employment tax returns?       22         if the sum of lines 1a and 2a is greater than 250, you may be required to <i>e</i> -file. See instructions.       3a         exp of the stand 2a is greater than 250, you may be required to <i>e</i> -file. See instructions.       3a         exp of the stand 2a is greater than 250, you may be required to <i>e</i> -file. See instructions or Schedule O       3a         exp of the calendar year, did the organization have an interest in, or a signature or other authority over, a       3a         cial account in a foreign country but as a bank account, securities account, or other financial accounts (FBAR).       4a         is, "entor the name of the foreign country but my taxable patry hority the organization file form 8886-17       5c         is," to line 5a or 5b, did the organization file Form 8886-17       5c         is," to line 5a or 5b, did the organization file Form 8886-17       5c         is," did the organization include with every solicitation an express statement that such contributions or gifts not tax deductible a contributions and partly for gods and services provided to the parefit acta actavation active aparment in excess of 355 made partly as a contribution and partly for gods and services provided to the parefit actavater active apartation receive a contribution so that or dual of the gods or services provided 7       7c         inatinatin may receive deductible contributions unde			
b       If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts       6b         Organizations that may receive deductible contributions under section 170(c).       7a         Did the organization notify the donor of the value of the goods or services provided to the payor?       7a         Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required       7b         C       Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7c         T       Did the organization receive a contribution of qualified intellectual property, did the organization file a Form 1098 C?       7ft         T       Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       N/A         So Did the sponsoring organization make any taxable distributions under section 4966?       N/A       9a         Did the sponsoring organization make any taxable distributions under section 4966?       N/A       9a         Did the sponsoring organization make any taxable distributions under sources against amounts due or received from them.       11a       10a         B cross income from other sources. (Do not net amounts due or padi to other sources against amounts due or received from them.)       12a       12a         B the sorganization incense to issue qualified health plans i			62		x
were not tax deductible?     6b       Organizations that may receive deductible contributions under section 170(c).     6b       D the organization receive a payment in excess of 5/5 made partly as a contribution and partly for goods and services provided 7     7a       D the organization neetive a payment in excess of 5/5 made partly as a contribution and partly for goods and services provided 7     7a       C bid the organization neetive any contentwise dispose of tangible personal property for which it was required to the form 8282?     7c       d If 'Yes,' indicate the number of Forms 8282 filed during the year     7d     7c       f 'Det,' indicate the number of Forms 8282 filed during the year     7d     7c       f 'Det organization received a contribution of qualified intellectual property, did the organization file Form 1038-C?     7h       X sponsoring organizations maintaining door advised funds. Did a donor advised fund maintained by the sponsoring organization maintaining door advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?     N/A       8 Did the sponsoring organizations maintaining door advised funds.     10a     10a       9 Did the sponsoring organizations make any taxable distributions under section 4966?     N/A     9a       9 Did the sponsoring organizations. Enter:     a (A)     10a     10a       9 Gross income from members or seneholders     M/A     11a     10b       12 Section 501c(?(2) organizations. Enter:     a (A			Ud		- 13
Organizations that may receive deductible contributions under section 170(c).       In the organization receive a payment in excess of \$75 made parth as a contribution and parth for goods and services provided to the payor?       7a         Did the organization notify the donor of the value of the goods or services provided?       7b         Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282?       7c         Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e         Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098 cr 27g       7h         M If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1099 cr 27g       7n         N X       Sponsoring organization make and traable distributions under section 4966?       N/A         B Did the sponsoring organization make and traable distributions under section 4966?       N/A         B Did the sponsoring organization make and traable distributions under section 4966?       N/A         B Oid the sponsoring organization. Ender       10a         B Ords sincom from methores or shareholders       N/A         B Ords sincom from methores or shareholders       N/A         B Ords sincom from methores or shareholders       N/A         B Section 501(c)(12) organizations. Enter:       10a	D		6b		
b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required       7c         d       If "Yes," indicate the number of Forms 8282 filed during the year       [7d]         e       Did the organization receive any premiums, directly or indirectly, on a personal benefit contract?       7e         f       Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g         g       If the organization servived a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g         Sponsoring organizations maintaining door advised funds. Did a donor advised fund maintained by the sponsoring organization make a my taxable distributions under section 4966?       N/A       8         Sponsoring organization make a distribution to a donor, donor advised funds.       10a       10a       9a         b       Did the sponsoring organizations. Enter:       10b       10a       10a       10b         a forse income from members or shareholders       N/A       11a       12a       12a         b       Gross income from members or shareholders       N/A       12a       12a       12a         b       Gross income from members or shareholders <td></td> <td></td> <td></td> <td></td> <td></td>					
c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c         d       If 'Yes, ''Indicate the number of Forms 8282 filed during the year       Id         e       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e         f       Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?       7f         f       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7n       X         Sponsoring organization make any taxable distributions under section 4966?       N/A       9a       9a         Did the sponsoring organization make any taxable distributions under section 4966?       N/A       9a       9b         Did the sponsoring organization make any taxable distributions under section 4966?       N/A       9a       9b         Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       N/A       9a       9b         Did the sponsoring organization make any taxable distributions under section 4966?       N/A       9a       9b       9b       9b       9c       9c <td>а</td> <td>Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?</td> <td>7a</td> <td></td> <td>X</td>	а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c         d       If 'Yes, ''Indicate the number of Forms 8282 filed during the year       Id         e       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e         f       Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?       7f         f       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7n       X         Sponsoring organization make any taxable distributions under section 4966?       N/A       9a       9a         Did the sponsoring organization make any taxable distributions under section 4966?       N/A       9a       9b         Did the sponsoring organization make any taxable distributions under section 4966?       N/A       9a       9b         Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       N/A       9a       9b         Did the sponsoring organization make any taxable distributions under section 4966?       N/A       9a       9b       9b       9b       9c       9c <td>7b</td> <td></td> <td></td>	7b				
d If "Yes," indicate the number of Forms 8282 filed during the year       Id       Td       7e         D Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f         g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g         g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7       7h       X         Sponsoring organization maintaining door advised funds.       a door advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       N/A       9a         b Did the sponsoring organization. Enter:       a linitiation fees and capital contributions included on Part VIII, line 12, for public use of club facilities       10a       10b         Section 501(c)(7) organizations. Enter:       a Gross income from members or shareholders       N/A       11a       10b         Section 501(c)(2) organizations. Enter:       a Gross income from thers sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)       11a       10b       12a         b Gross income from other sources of hard during the year       N/A       12a       12a       12a         b Gross income from other sources or administing form 990 in lieu of Form 1041?       12a       12a       12a         b Gross in					
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e         f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f         f If the organization received a contribution of qualified intellectual progenization file Form 8899 as required?       7g         f If the organization received a contribution of qualified intellectual progenization file Form 8899 as required?       7g         f If the organization smaintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.       N/A         a Did the sponsoring organization make any taxable distributions under section 4966?       N/A       9a         b Did the sponsoring organizations. Enter:       a nitiation fees and capital contributions included on Part VIII, line 12       N/A       10a       10b         a Section 501(c)(12) organizations. Enter:       a forse income from members or shareholders       N/A       11a       12a         a Section 501(c)(12) organization interest received or accrued during the year       N/A       12b       12a         b fi Yres," enter the amount of tax-exempt interest received or accrued during the year       N/A       12b       12a         b fi Yres," enter the amount of reserves the organization filing Form 990 in lieu of Form 1041?       12a       12a         b fi Yres," enter the amount of reserves the arganizati		to file Form 8282?	7c		X
f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       77         g       If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?       76         g       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h       X         Sponsoring organizations maintaining donor advised funds.       Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       N/A       9a         D Did the sponsoring organizations. Enter:       N/A       9b       9a       9b         Section 501(c)(7) organizations. Enter:       0b       10b       10b       9c         G cross income from members or shareholders       N/A       10a       10b       9c         Section 501(c)(7) organizations. Enter:       N/A       11a       10b       12a         G cross income from members or shareholders       N/A       11a       10b       12a         Section 501(c)(72) organizations. Enter:       N/A       11a       12a       12a         Section 501(c)(20) augnified nonprofit health plans in more than one state?       N/A       12a       12a         If "Yes," enter the amount of tax-exempt interest received or accrued during the year?	d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g         h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h       X         Sponsoring organizations maintaining door advised funds. Did a door advised fund maintained by the sponsoring organization make asystem to a door advised funds.       8       8         a Did the sponsoring organization make a distributions under section 4966?       N/A       9a       9b         b B dres sponsoring organization make a distribution to a donor, donor advised funds.       9d       9d       9d         a Initiation fees and capital contributions included on Part VIII, line 12       N/A       10a       9d       9d         b Gross income from members or shareholders       N/A       11a       10b       12a         b Gross income from members or shareholders       N/A       11a       12a       12a         b fryes," enter the amount of tax-exempt interest received or accrued during the year       N/A       12a       13a         b If Yes," enter the amount of reserves the organization in sequired to maintain by the states in which the organization receive any payments for indoor tanning services during the tax year?       14a       14a         b If Yes," shat filled a Form 720 to report these payments? If N/N, Nor worde an explanation on Schedule O       14b			7e		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g         h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h       X         Sponsoring organization have excess business holdings at any time during the year?       N/A       8         Sponsoring organizations maintaining donor advised funds.       N/A       8         a Did the sponsoring organization make any taxable distributions under section 4966?       N/A       9a         b Did the sponsoring organizations. Enter:       a Initiation fees and capital contributions included on Part VIII, line 12       N/A       10a         b Gross income from members or shareholders       N/A       10a       10b       10b         Section 501(c)(12) organizations. Enter:       N/A       11a       10b       12a         a Gross income from members or shareholders       N/A       11a       12a       12a         b Gross income from other sources. (Do not net amounts due or pait to other sources against amounts due or received from them.)       11b       12a         a Section 501(c)(29) qualified nonprofit health insurance issuers.       13a       13a         b If "Yes," enter the amount of tax-exempt interest received or accrued during the year?       N/A       14a         b If thes," health finath pla	f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?       N/A         Sponsoring organization make excess business holdings at any time during the year?       N/A         Sponsoring organization make any taxable distributions under section 4966?       N/A         B Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       N/A         B Initiation fees and capital contributions included on Part VIII, line 12       N/A         Initiation fees and capital contributions included on Part VIII, line 12       N/A         B Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10a         B Gross income from members or shareholders       N/A         B Gross income from members or shareholders       N/A         B Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         I Section 501(c)(29 qualified nonprofit health insurance issuers.       12a         I f "Yes," enter the amount of tax-exempt interest received or accrued during the year       N/A         Is the organization licensed to issue qualified health plans in more than one state?       N/A         Is the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13a         I H' Ye			7g		
sponsoring organization have excess business holdings at any time during the year? N/A 8   Sponsoring organizations maintaining donor advised funds. N/A 9a   a Did the sponsoring organization make any taxable distributions under section 4966? N/A 9a   b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A 9a   b Did the sponsoring organizations. Enter: N/A 10a 10b   a Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a 10b   b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 10b   section 501(c)(2) organizations. Enter: 11a 10b 11a   a Gross income from members or shareholders N/A 11a   b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a   a Section 501(c)(29) qualified nonprofit health insurance issuers. 11b 12a   b If "Yes," enter the amount of tax-exempt interest received or accrued during the year? N/A 13a   Note: See the instructions for additional information the organization must report on Schedule O. 13a   b Enter the amount of reserves on hand 13b 13a   c Enter the amount of reserves on hand 13a   a Did the organization subject to the section 4960 ax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 14a   b If "Yes," has it filed a Form 720, Schedule N. 15 <t< td=""><td>h</td><td>If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</td><td>7h</td><td>Х</td><td></td></t<>	h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Х	
sponsoring organization have excess business holdings at any time during the year?       N/A       8         Sponsoring organizations maintaining door advised funds.       N/A       9a         a Did the sponsoring organization make any taxable distributions under section 4966?       N/A       9a         b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       N/A       9a         b Did the sponsoring organizations. Enter:       Initiation fees and capital contributions included on Part VIII, line 12       N/A       Initiation fees and capital contributions included on Part VIII, line 12       N/A       Initiation fees and capital contributions included on Part VIII, line 12       N/A       Initiation fees and capital contributions included on Part VIII, line 12       N/A       Initiation fees and capital contributions included on Part VIII, line 12       N/A       Initiation fees and capital contributions included on Part VIII, line 12, for public use of club facilities       Initiation       Initiation fees and capital contributions included on Part VIII, line 12, for public use of club facilities       Initiation       Initiation         a Gross income from thems sor shareholders       N/A       Initiation       Init					
Sponsoring organizations maintaining donor advised funds.       N/A         a Did the sponsoring organization make any taxable distributions under section 4966?       N/A         b Did the sponsoring organization make any taxable distributions under section 4966?       N/A         g Did the sponsoring organization make any taxable distributions under section 4966?       N/A         g Did the sponsoring organization make any taxable distributions under section 4966?       N/A         g Section 501(c)(7) organizations. Enter:       10a         a Gross income from members or shareholders       N/A         b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)       11a         a Section 501(c)(2) qualified nonprofit health insurance issuers.       11A         b If "Yes," enter the amount of tax-exempt interest received or accrued during the year       N/A       12a         s Section 501(c)(29) qualified nonprofit health plans in more than one state?       N/A       13a         Note: See the instructions for additional information the organization must report on Schedule O.       13a       14a         b Id the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       14a         b If "Yes," set the instructions and file Som apyment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       14a		sponsoring organization have excess business holdings at any time during the year? N/A	8		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       N/A       9b         Section 501(c)(7) organizations. Enter:       10a       10a       10a         a Initiation fees and capital contributions included on Part VIII, line 12       N/A       10a       10b         Section 501(c)(12) organizations. Enter:       10b       10b       10b         a Gross income from members or shareholders       N/A       11a       11a       11b         b Gross income from members or shareholders       N/A       11b       12a       12a         b If "Yes," enter the amount of tax-exempt interest received or accrued during the year       N/A       12b       12a         b Enter the amount of reserves the organization must report on Schedule O.       N/A       13a       13a         organization is licensed to issue qualified health plans in more than one state?       N/A       13a         vest: see the instructions for additional information the organization must report on Schedule O.       14a       14a         b Id the organization receive any payments for indoor tanning services during the tax year?       14a       14a         b Id the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15       16         if "Yes," see the instructions and file Form 4720	1	Sponsoring organizations maintaining donor advised funds.			
Section 501(c)(7) organizations. Enter:       I/A       I0a       I0a         Initiation fees and capital contributions included on Part VIII, line 12       N/A       I0a       I0b         Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       I0b       I0b       I0b         Section 501(c)(12) organizations. Enter:       I1a       I0b       I0b       IIa       IIa         Gross income from members or shareholders       N/A       I1a       IIb       IIb       IIIc	а	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
a       Initiation fees and capital contributions included on Part VIII, line 12       N/A       10a       10b         b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b       10b         Section 501(c)(12) organizations. Enter:       a       11a       11a         a       Gross income from members or shareholders       N/A       11a       11b         b       Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       N/A       12b         Section 501(c)(29) qualified nonprofit health insurance issuers.       a       Is the organization licensed to issue qualified health plans in more than one state?       N/A       13a         Note: See the instructions for additional information the organization must report on Schedule O.       13a       13a         c       Enter the amount of reserves on hand       13c       14a         a       13th tied a Form 720 to report these payments? If "No," provide an explanation on Schedule O       14b         b       If "Yes," see the instructions and file Form 4720, Schedule N. <t< td=""><td>D</td><td>Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A</td><td>9b</td><td></td><td></td></t<>	D	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
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b       Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       11b         a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       N/A       12b         Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       N/A       13a         Note: See the instructions for additional information the organization must report on Schedule O.       b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       14a         a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       14b         b       If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O       14b         Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15         If "Yes," see the instructions and file Form 4720, Schedule N.       16       16         Is the organization an educational institution subject to the section 4968 excise tax	а	Gross income from members or shareholders N/A 11a			
a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the yearN/A	b				
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b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       N/A       12b         Section 501(c)(29) qualified nonprofit health insurance issuers.       Is the organization licensed to issue qualified health plans in more than one state?       N/A       13a         Note: See the instructions for additional information the organization must report on Schedule O.       Is the organization is licensed to issue qualified health plans       13b       13a         c       Enter the amount of reserves the organization is required to maintain by the states in which the organization receive any payments for indoor tanning services during the tax year?       14a         a       Did the organization receive any payments for indoor tanning services during the tax year?       14a         b       If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O       14b         Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15         If "Yes," see the instructions and file Form 4720, Schedule N.       16         Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16         If "Yes," complete Form 4720, Schedule O.       17         Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951,			12a		
Section 501(c)(29) qualified nonprofit health insurance issuers.   a   Is the organization licensed to issue qualified health plans in more than one state?   Note: See the instructions for additional information the organization must report on Schedule O.   b   Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans   c   Enter the amount of reserves on hand   a   Did the organization receive any payments for indoor tanning services during the tax year?   b   If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O   is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?   If "Yes," see the instructions and file Form 4720, Schedule N.   is the organization an educational institution subject to the section 4968 excise tax on net investment income?   If "Yes," complete Form 4720, Schedule O.   YA   If "Yes," complete Form 4720, Schedule O.   If "Yes," complete Form 4720, Schedule O.   If "Yes," complete Form 4720, Schedule O.   If "Yes," complete Form 6069.					
Note: See the instructions for additional information the organization must report on Schedule O.       Image: Construction of the instruction of the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       Image: Image					
Note: See the instructions for additional information the organization must report on Schedule O.       Image: the instruction of the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	а	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		
b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c       Enter the amount of reserves on hand       13c         a       Did the organization receive any payments for indoor tanning services during the tax year?       14a         b       If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> 14b         c       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15         If "Yes," see the instructions and file Form 4720, Schedule N.       16         Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16         If "Yes," complete Form 4720, Schedule O.       17         If "Yes," complete Form 6069.       17					
organization is licensed to issue qualified health plans 13b   c Enter the amount of reserves on hand   Ha Did the organization receive any payments for indoor tanning services during the tax year?   b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O   b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O   c Itab   c Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or   excess parachute payment(s) during the year? 15   If "Yes," see the instructions and file Form 4720, Schedule N.   c Is the organization an educational institution subject to the section 4968 excise tax on net investment income?   c If "Yes," complete Form 4720, Schedule O.   d If "Yes," complete Form 6069.					
c       Enter the amount of reserves on hand       13c         a       Did the organization receive any payments for indoor tanning services during the tax year?       14a         b       If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> 14b         c       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or       14b         c       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or       15         if "Yes," see the instructions and file Form 4720, Schedule N.       15         if "Yes," complete Form 4720, Schedule O.       16         if "Yes," complete Form 4720, Schedule O.       16         if "Yes," complete Form 4720, Schedule O.       17         if "Yes," complete Form 6069.       17					
a Did the organization receive any payments for indoor tanning services during the tax year?       14a         b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O       14b         Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15         If "Yes," see the instructions and file Form 4720, Schedule N.       16         Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16         If "Yes," complete Form 4720, Schedule O.       16         Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?       N/A         If "Yes," complete Form 6069.       17					
b       If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O       14b         i       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15         If "Yes," see the instructions and file Form 4720, Schedule N.       16         is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16         If "Yes," complete Form 4720, Schedule O.       16         Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?       N/A         If "Yes," complete Form 6069.       17			14a		X
Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or       15         If "Yes," see the instructions and file Form 4720, Schedule N.       16         If sthe organization an educational institution subject to the section 4968 excise tax on net investment income?       16         If "Yes," complete Form 4720, Schedule O.       16         Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?       N/A         If "Yes," complete Form 6069.       17					
excess parachute payment(s) during the year?       15         If "Yes," see the instructions and file Form 4720, Schedule N.       16         Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16         If "Yes," complete Form 4720, Schedule O.       16         Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?       N/A         If "Yes," complete Form 6069.       17					
If "Yes," see the instructions and file Form 4720, Schedule N.       16         Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16         If "Yes," complete Form 4720, Schedule O.       16         7 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?       N/A         If "Yes," complete Form 6069.       17			15		X
Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16         If "Yes," complete Form 4720, Schedule O.       Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?       N/A         If "Yes," complete Form 6069.       If "Yes," complete Form 6069.       If "Yes," complete Form 6069.					
If "Yes," complete Form 4720, Schedule O.         Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?         If "Yes," complete Form 6069.			16		x
7 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?       N/A       17         If "Yes," complete Form 6069.			_		
activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? N/A 17 If "Yes," complete Form 6069.					
If "Yes," complete Form 6069.			17		
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Form 990 (2021)	Form	990	(2021)
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### THE ARC OF THE UNITED STATES

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

ect					
	ion A. Governing Body and Management				
			a a 🖂	Yes	
		<b>1</b> a	23		
	If there are material differences in voting rights among members of the governing body, or if the governing				
ļ	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
	Enter the number of voting members included on line 1a, above, who are independent		23		
2	there are material differences in voting rights among members of the governing body, or if the governing dy delegated bread authority to an executive committee or similar committee, explain on Schedule 0. If the the number of voting members included on line in a pachove, who are independent in the independent of the organization delegate control over management duries customarily performed by or under the direct supervision officers, directors, trustees, or key employees to a management company or other person?  4 the organization delegate control over management duries customarily performed by or under the direct supervision officers, directors, trustees, or key employees to a management duries customarily performed by or under the direct supervision officers, directors, trustees, or key employees to a management duries customarily performed by or under the direct supervision officers, directors, trustees, or key employees to a management duries customarily performed by or under the direct supervision officers, directors, trustees, or stockholders, or other persons who had the power to elect or appoint one or ore mambers of the organization reserved to (or subject to approval by) members, stockholders, or 7to the organization contemporaneously downent the meetings held or written actions undertaken during the year by the following: the governing body?  5 the organization have members, the organization reserved to (or subject to approval by) members, stockholders, or 7to ore members of the organization the governing body?  5 the organization make any significant diverses on <i>Schedule O</i> 5 the organization have beach at the meetings held or written actions undertaken during the year by the following: the governing body?  5 the organization have written policies and procedures governing the activities of such chapters, affiliates, 10 the organization have written policies and procedures governing the doy before filing the form?  5 the organization have written policies and procedures governing the activities of				
	A Governing Body and Management         er the number of voting members of the governing body at the end of the tax year       1       23         are are material differences in voting rights among members of the governing body, or if the governing or voting members included on line 1a, above, who are independent       1       0         ary offierd, director, trustee, or key employee have a family relationship or a business relationship with any other car, director, trustee, or key employee have a family relationship or a business relationship with any other car, director, trustee, or key employees to a management duries customaily performed by or under the direct supervision officers directors, trustees, or key employees to a significant diversion of the organization base members, stockholders?       1       0       23         the organization have members, stockholders?       1       1       0       2       3         any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or sons other than the governing body?       2       2       2       2         any governance decisions of the organization reserved to proval by) members, stockholders, or sons other than the governing body?       2       2       2       2         the organization have members, stockholders, or stockholders, or sons other than the governing body?       2       2       2       2         the organization have bodied of the governing body?       2       2       2       2       2       2				
3	Did the organization delegate control over management duties customarily performed by or under t	the direct supervision			
,	of officers, directors, trustees, or key employees to a management company or other person?		3		
4	Did the organization make any significant changes to its governing documents since the prior Form	n 990 was filed?	····		
5	Did the organization become aware during the year of a significant diversion of the organization's a	issets?	5		
6	Did the organization have members or stockholders?		6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint one or			
ſ	more members of the governing body?		7a	X	
ſ	persons other than the governing body?		7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y	ear by the following:			T
a	The governing body?			X	Ι
b	Each committee with authority to act on behalf of the governing body?		8b	Х	T
					Τ
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		
ect	ion B. Policies (This Section B requests information about policies not required by the Internal I	Revenue Code.)			
				Yes	
Da '	Did the organization have local chapters, branches, or affiliates?		10a	Х	
					Ī
			10b	X	
				Х	1
		, 0			1
			12a	X	I
				Х	1
					1
			12c	X	
				X	1
				X	1
					1
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	PETER V. BERNS - (202)534-3700				_
	1825 K STREET, NW, 1200, WASHINGTON, DC 20006				_

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

Name and title         Average hours per liter and attention method below         Description and related below         Description and related room below         Reportable compensation from below         Reportable compensation from below         Estimated automation from below           (1)         PETER BEENS         60.00         X         543,643.         0.         81,816.           (1)         PETER BEENS         60.00         X         543,643.         0.         81,816.           (2)         AUBEN NODE/DEZ         40.00         X         196,019.         0.         20,022.           (4)         REFERENCE         40.00         X         196,019.         0.         20,022.           (4)         REFERENCE         60.00         X         196,019.         0.         20,022.           (4)         REFERENCE         0.00         X         196,019.         0.         20,022.           (4)         REFERENCE         0.00         X         196,019.         0.         20,022.           (6)         MARTY FORD         40.00         X         137,956.         0.         24,710.           (7)         GLENN GRIFTIN         40.00         X         134,560.         0.         0.           (8)         DLEN		, , , , , , , , , , , , , , , , , , ,	l								(E)
Name and theAverage hours per week (ist ary ing and the hours per week (ist ary ing and the organization ing and the ing and the organization ing and the organization ing and the organization 	(A)	(B)							(D)	(E)	(F)
under an anterconventere (list any hours for related organizations below line)incom and anterconventere organizations (1)incom related organizations (1)incom related organizations (1)incom related organizations (1)incom related organizations (1)incom related related organizations (1)incom related organizations (1)incom related related organizations (1)incom related (1)incom related (1)incom related (1)incom related (1)incom related (1)incom related (1)incom related (1)incom related <td>Name and title</td> <td>U U</td> <td></td> <td>not c</td> <td>heck i</td> <td>more</td> <td>than</td> <td></td> <td></td> <td>•</td> <td></td>	Name and title	U U		not c	heck i	more	than			•	
(I)         PETER BERNS         (I)         (I) <th< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>•</td><td></td><td></td></th<>									•		
(1)         PETER BERNS         60.00         X         543,643.         0.         81,816.           CHIEF PARCUTIVE OFFICER         4.00         X         215,468.         0.         29,393.           (3)         JULIE WARD         40.00         X         215,468.         0.         29,393.           (3)         JULIE WARD         40.00         X         196,019.         0.         20,022.           (4)         KRISC. OFF., PUBLIC POLICY         X         192,511.         0.         28,451.           (5)         MATTNE BOYRE         40.00         X         149,148.         0.         19,569.           (6)         MARTY FORD         40.00         X         137,956.         0.         24,710.           (7)         GLEN JORKIC         40.00         X         134,117.         0.         20,419.           (8)         NCOLE JORKIC         40.00         X         134,560.         0.         16,940.           (9)         KENMETH OAKES         10.00         X         X         0.         0.           (10)         GRALE JORKIC         2.00         X         0.         0.         0.           (11)         HUGH BYANS         2.000			2					,			
(1)         PETER BERNS         60.00         X         543,643.         0.         81,816.           CHIEF PARCUTIVE OFFICER         4.00         X         215,468.         0.         29,393.           (3)         JULIE WARD         40.00         X         215,468.         0.         29,393.           (3)         JULIE WARD         40.00         X         196,019.         0.         20,022.           (4)         KRISC. OFF., PUBLIC POLICY         X         192,511.         0.         28,451.           (5)         MATTNE BOYRE         40.00         X         149,148.         0.         19,569.           (6)         MARTY FORD         40.00         X         137,956.         0.         24,710.           (7)         GLEN JORKIC         40.00         X         134,117.         0.         20,419.           (8)         NCOLE JORKIC         40.00         X         134,560.         0.         16,940.           (9)         KENMETH OAKES         10.00         X         X         0.         0.           (10)         GRALE JORKIC         2.00         X         0.         0.         0.           (11)         HUGH BYANS         2.000			lirect							U U	•
(1)         PETER BERNS         60.00         X         543,643.         0.         81,816.           CHLEF PARCUTIVE OFFICER         45.00         X         215,468.         0.         29,393.           (3)         JULE WARD         40.00         X         196,019.         0.         20,022.           (4)         KRISC. OFF., PUBLIC POLICY         X         196,019.         0.         20,022.           (4)         KRISC ACT., COFF., KNTG & COMMUNICATIONS         X         152,511.         0.         28,451.           (5)         MATTWE BOYRE         40.00         X         137,956.         0.         24,710.           (7)         GLEN JORG         X         134,117.         0.         20,419.           (7)         GLEN JORKIC         40.00         X         134,560.         0.         16,940.           (8)         NICOLE JORKIC         40.00         X         134,560.         0.         16,940.           (9)         KENCLE JORKIC         40.00         X         X         0.         0.           SR. EXEC. OFF., STATE ADVOCACY         1.00         X         X         0.         0.         0.           (9)         KENNETH OAKES         10.00 <td></td> <td></td> <td>e or c</td> <td>tee</td> <td></td> <td></td> <td>satec</td> <td></td> <td>, , , , , , , , , , , , , , , , , , ,</td> <td>•</td> <td></td>			e or c	tee			satec		, , , , , , , , , , , , , , , , , , ,	•	
(1)         PETER BERNS         60.00         X         543,643.         0.         81,816.           CHLEF PARCUTIVE OFFICER         45.00         X         215,468.         0.         29,393.           (3)         JULE WARD         40.00         X         196,019.         0.         20,022.           (4)         KRISC. OFF., PUBLIC POLICY         X         196,019.         0.         20,022.           (4)         KRISC ACT., COFF., KNTG & COMMUNICATIONS         X         152,511.         0.         28,451.           (5)         MATTWE BOYRE         40.00         X         137,956.         0.         24,710.           (7)         GLEN JORG         X         134,117.         0.         20,419.           (7)         GLEN JORKIC         40.00         X         134,560.         0.         16,940.           (8)         NICOLE JORKIC         40.00         X         134,560.         0.         16,940.           (9)         KENCLE JORKIC         40.00         X         X         0.         0.           SR. EXEC. OFF., STATE ADVOCACY         1.00         X         X         0.         0.         0.           (9)         KENNETH OAKES         10.00 <td></td> <td></td> <td>ruste</td> <td>l trus</td> <td></td> <td>/ee</td> <td>mpen</td> <td></td> <td>·</td> <td>1000 1120)</td> <td>e e</td>			ruste	l trus		/ee	mpen		·	1000 1120)	e e
(1)         PETER BERNS         60.00         X         543,643.         0.         81,816.           CHLEF PARCUTIVE OFFICER         45.00         X         215,468.         0.         29,393.           (3)         JULE WARD         40.00         X         196,019.         0.         20,022.           (4)         KRISC. OFF., PUBLIC POLICY         X         196,019.         0.         20,022.           (4)         KRISC ACT., COFF., KNTG & COMMUNICATIONS         X         152,511.         0.         28,451.           (5)         MATTWE BOYRE         40.00         X         137,956.         0.         24,710.           (7)         GLEN JORG         X         134,117.         0.         20,419.           (7)         GLEN JORKIC         40.00         X         134,560.         0.         16,940.           (8)         NICOLE JORKIC         40.00         X         134,560.         0.         16,940.           (9)         KENCLE JORKIC         40.00         X         X         0.         0.           SR. EXEC. OFF., STATE ADVOCACY         1.00         X         X         0.         0.         0.           (9)         KENNETH OAKES         10.00 <td></td> <td></td> <td>d ual t</td> <td>utiona</td> <td>_</td> <td>mplo</td> <td>ist co oyee</td> <td>L.</td> <td>,</td> <td></td> <td></td>			d ual t	utiona	_	mplo	ist co oyee	L.	,		
(1)         PETER BERNS         60.00         X         543,643.         0.         81,816.           CHLEF PARCUTIVE OFFICER         45.00         X         215,468.         0.         29,393.           (3)         JULE WARD         40.00         X         196,019.         0.         20,022.           (4)         KRISC. OFF., PUBLIC POLICY         X         196,019.         0.         20,022.           (4)         KRISC ACT., COFF., KNTG & COMMUNICATIONS         X         152,511.         0.         28,451.           (5)         MATTWE BOYRE         40.00         X         137,956.         0.         24,710.           (7)         GLEN JORG         X         134,117.         0.         20,419.           (7)         GLEN JORKIC         40.00         X         134,560.         0.         16,940.           (8)         NICOLE JORKIC         40.00         X         134,560.         0.         16,940.           (9)         KENCLE JORKIC         40.00         X         X         0.         0.           SR. EXEC. OFF., STATE ADVOCACY         1.00         X         X         0.         0.         0.           (9)         KENNETH OAKES         10.00 <td></td> <td></td> <td>ndivi</td> <td>nstitu</td> <td>Office</td> <td>(e y e i</td> <td>Highe</td> <td>-orme</td> <td></td> <td></td> <td>5</td>			ndivi	nstitu	Office	(e y e i	Highe	-orme			5
CHIEF EXECUTIVE OFFICER         4.00         X         543,643.         0.         81,816.           (2) RUBEN RODRIGUEZ         45.00         X         215,468.         0.         29,393.           (3) JULIE WARD         40.00         X         196,019.         0.         20,022.           (4) KRISTEN MCKIERNAN         40.00         X         152,511.         0.         28,451.           (5) MATTHEW BOVER         40.00         X         149,148.         0.         19,569.           (6) MARTY FORD         40.00         X         134,117.         0.         20,419.           (7) GLEN GRIFFIN         40.00         X         134,117.         0.         20,419.           (8) NICOLE JORNIC         40.00         X         134,560.         0.         16,940.           (9) KENNETH OAKES         10.00         X         X         0.         0.         0.           (10) GRACE L. FRANCIS         2.00         X         X         0.         0.         0.           (11) HUGH EVANS         2.00         X         X         0.         0.         0.           (12) LAURA KENNEDY         2.00         X         X         0.         0.         0.	(1) PETER BERNS	60.00	_	_	0	-					
CHIEF OPERATING OFFICER         1.00         X         215,468.         0.29,393.           (3) JULE MARD         40.00         X         196,019.         0.20,022.           (4) KRISTEN MCKLENNAN         40.00         X         196,019.         0.20,022.           (4) KRISTEN MCKLENNAN         40.00         X         152,511.         0.28,451.           (5) MATTHEW BOYER         40.00         X         149,148.         0.19,569.           (6) MARTY FORD         40.00         X         137,956.         0.24,710.           (7) GLENN GRIFFIN         40.00         X         134,117.         0.20,419.           SR. DIR., DIG. MKTG & ENGAGEMENT         X         134,560.         0.16,940.           (8) NICOLE JORNIC         40.00         X         134,560.         0.16,940.           (9) KENNETH OAKES         10.00         X         X         0.0.         0.           (10) GRACE L. FRANCIS         2.00         X         0.0.         0.         0.           VICE PRESIDENT         1.000 X         X         0.0.         0.         0.           (11) HUGH EVANS         2.000         X         0.0.         0.         0.           SECECTARY         1.000 X         X	CHIEF EXECUTIVE OFFICER		1		х				543,643.	Ο.	81,816.
(3)         JULIE WARD         40.00         X         196,019.         0.         20,022.           (4)         KRISTEN MCKIERNAN         40.00         X         196,019.         0.         20,022.           (4)         KRISTEN MCKIERNAN         40.00         X         152,511.         0.         28,451.           (5)         MATTHEW BOYER         40.00         X         149,148.         0.         19,569.           (6)         MARTY PORD         40.00         X         137,956.         0.         24,710.           (7)         GLNN GRIFFIN         40.00         X         134,117.         0.         20,419.           (8)         NICOLG JORNIC         40.00         X         134,560.         0.         16,940.           (9)         KENNETH OAKES         10.00         X         X         0.         0.         0.           (10)         GRACE L. FRANCIS         2.00         X         X         0.         0.         0.           (11)         HUB EVANS         2.00         X         X         0.         0.         0.           (11)         HERSIDENT         1.000 X         X         0.         0.         0.         0. <td>(2) RUBEN RODRIGUEZ</td> <td>45.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(2) RUBEN RODRIGUEZ	45.00									
SR. EXEC. OFF., FUBLIC POLICY         X         196,019.         0.         20,022.           (4)         KRISTEN MCKIERNAN         40.00         X         152,511.         0.         28,451.           (5)         MATTHEW BOYER         40.00         X         149,148.         0.         19,569.           (6)         MARTY FORD         40.00         X         137,956.         0.         24,710.           (7)         GLENN GRIFFIN         40.00         X         134,117.         0.         20,419.           (8)         NICOLE JORNIC         40.00         X         134,560.         0.         16,940.           (9)         KENNETH OAKES         10.00         X         X         0.         0.         0.           (10)         GRACE L. FRANCIS         2.000         X         X         0.         0.         0.           VICE PRESIDENT         1.00         X         X         0.         0.         0.         0.           VICE PRESIDENT         1.00         X         X         0.         0.         0.         0.           SECRETARY         1.00         X         X         0.         0.         0.         0.         0.	CHIEF OPERATING OFFICER	1.00	1			Х			215,468.	0.	29,393.
(4)         KRISTEN MCKIERNAN         40.00         X         152,511.         0.         28,451.           (5)         MATTHEW BOYER         40.00         X         149,148.         0.         19,569.           (6)         MARTY FORD         40.00         X         137,956.         0.         24,710.           (7)         GLENICR ADVISOR         X         134,117.         0.         20,419.           (8)         NICOLE JORWIC         40.00         X         134,560.         0.         16,940.           (9)         KENNERH ADVCACY         X         0.         0.         0.         0.           (10)         GRACE L. FRANCIS         2.00         X         0.         0.         0.           (11)         HUGH EVANS         2.00         X         0.         0.         0.           (12)         LAURA KENNEDY         2.00         X         0.         0.         0.           (13)         FREDERICK         1.00         X         X         0.         0.         0.           (14)         MEGHAN BURKE         2.00         X         0.         0.         0.         0.           (13)         FREBERICK MISILO, JR.	(3) JULIE WARD	40.00									
SR. EXEC. OFF. MKTG & COMMUNICATIONS         X         152,511.         0.         28,451.           (5)         MATTHEW BOYER         40.00         X         149,148.         0.         19,569.           (6)         MARTY FORD         40.00         X         137,956.         0.         24,710.           (7)         GLENN GRIFFIN         40.00         X         134,117.         0.         20,419.           (8)         NICOLE JORNIC         40.00         X         134,560.         0.         16,940.           (9)         KENETH OAKES         10.00         X         X         0.         0.         0.           (11)         UGRACE L. FRANCIS         2.00         X         X         0.         0.         0.           (11)         HUGH EVANS         2.00         X         X         0.         0.         0.           (12)         LAURA KENNEDY         2.00         X         X         0.         0.         0.           (14)         MEGALEN FRESIDENT         1.00         X         X         0.         0.         0.           (15)         JULIAURA KENNEDY         2.00         X         0.         0.         0.         0. <td>SR. EXEC. OFF., PUBLIC POLICY</td> <td></td> <td></td> <td></td> <td></td> <td>Х</td> <td></td> <td></td> <td>196,019.</td> <td>0.</td> <td>20,022.</td>	SR. EXEC. OFF., PUBLIC POLICY					Х			196,019.	0.	20,022.
(5) MATTHEW BOYER       40.00       X       149,148.       0.       19,569.         (6) MARTY FORD       40.00       X       137,956.       0.       24,710.         (7) GLENN GRIFFIN       40.00       X       134,117.       0.       20,419.         (8) NICOLE JORWIC       40.00       X       134,1560.       0.       16,940.         (9) KENNETH OAKES       10.00       X       X       0.       0.       0.         (10) GRACE L. FRANCIS       2.00       X       0.       0.       0.       0.         VICE PRESIDENT       1.00 X       X       0.       0.       0.       0.       0.         SECREAC OFF., STATE ADVOCACY       1.00 X       X       0.       0.       0.       0.       0.         (10) GRACE L. FRANCIS       2.00       X       X       0. <t< td=""><td>(4) KRISTEN MCKIERNAN</td><td>40.00</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	(4) KRISTEN MCKIERNAN	40.00									
SR. DIR., CORP. & FDN PARTNERSHIPS         X         149,148.         0.         19,569.           (6) MARTY FORD         40.00         X         137,956.         0.         24,710.           (7) GLENN GRIFFIN         40.00         X         134,117.         0.         20,419.           (8) NICOLE JORWIC         40.00         X         134,560.         0.         16,940.           (9) KENNETH OAKES         10.00         X         X         0.         0.         0.           PRESIDENT         1.000         X         X         0.         0.         0.           VICE PRESIDENT         1.000         X         X         0.         0.         0.           VICE PRESIDENT         1.000         X         X         0.         0.         0.           VICE PRESIDENT         1.000         X         X         0.         0.         0.           SECRETARY         1.000         X         X         0.         0.         0.         0.           (11) HUGH EVANS         2.00         X         X         0.         0.         0.         0.           (12) LAURA KENNEDY         1.000         X         X         0.         0.	SR. EXEC. OFF. MKTG & COMMUNICATIONS						Х		152,511.	0.	28,451.
(6) MARTY FORD         40.00         X         137,956.         0.24,710.           (7) GLENN GRIFFIN         40.00         X         134,117.         0.20,419.           (8) NICOLE JORWIC         40.00         X         134,560.         0.16,940.           SR. EXEC. OFF., STATE ADVOCACY         X         134,560.         0.16,940.           (9) KENNETH OAKES         10.00         X         X         0.0.         0.           PRESIDENT         1.000         X         X         0.0.         0.         0.           VICE PRESIDENT         1.000         X         X         0.0.         0.         0.           VICE PRESIDENT         1.000         X         X         0.0.         0.         0.           VICE PRESIDENT         1.000         X         X         0.         0.         0.           (11) HUGH EVANS         2.00         X         X         0.         0.         0.           SECRETARY         1.000         X         X         0.         0.         0.           (12) LAURA KENNEDY         2.00         X         X         0.         0.         0.           (13) FREDERICK MISILO, JR.         2.00         X	(5) MATTHEW BOYER	40.00									
SENIOR ADVISOR         X         137,956.         0.         24,710.           (7)         GLENN GRIFFIN         40.00         X         134,117.         0.         20,419.           (8)         NICOLE JORWIC         40.00         X         134,560.         0.         16,940.           (9)         KENNETH OARES         10.00         X         X         0.         0.         0.           PRESIDENT         1.000         X         X         0.         0.         0.         0.           (10)         GRACE L. FRANCIS         2.00         X         X         0.         0.         0.         0.           (11)         HUGH EVANS         2.00         X         X         0.         0.         0.           (12)         LAURA KENNEDY         2.00         X         X         0.         0.         0.           (13)         FREDERICK MISILO, JR.         2.00         X         X         0.         0.         0.           (12)         LAURA KENNEDY         2.00         X         X         0.         0.         0.           (13)         FREDERICK MISILO, JR.         2.00         X         X         0.         0. <td>SR. DIR., CORP. &amp; FDN PARTNERSHIPS</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Х</td> <td></td> <td>149,148.</td> <td>0.</td> <td>19,569.</td>	SR. DIR., CORP. & FDN PARTNERSHIPS						Х		149,148.	0.	19,569.
(7)       GLENN GRIFFIN       40.00       X       134,117.       0.20,419.         SR. DIR., DIG. MKTG & ENGAGEMENT       40.00       X       134,117.       0.20,419.         (8)       NICOLE JORNIC       40.00       X       134,117.       0.20,419.         SR. EXEC. OFF., STATE ADVOCACY       X       134,560.       0.16,940.         (9)       KENNETH OAKES       10.00       X       X       0.0.       0.         PRESIDENT       1.000       X       X       0.0.       0.       0.         (10)       GRACE L. FRANCIS       2.00       X       X       0.0.       0.       0.         (11)       HUG E VANS       2.00       X       X       0.0.       0.       0.         (12)       LAURA KENNEDY       2.000       X       X       0.       0.       0.         TREASURER       1.000       X       X       0.       0.       0.       0.         (13)       FREDERICK MISILO, JR.       2.000       X       X       0.       0.       0.         (14)       MECHAN BURKE       2.000       X       0.       0.       0.       0.         BOARD DIRECTOR       X	(6) MARTY FORD	40.00									
SR. DIR., DIG. MKTG & ENGAGEMENT         X         134,117.         0.         20,419.           (8) NICOLE JORWIC         40.00         X         134,560.         0.         16,940.           SR. EXEC. OFF., STATE ADVOCACY         X         134,560.         0.         16,940.           (9) KENNETH OAKES         10.00         X         X         0.         0.         0.           PRESIDENT         1.000         X         X         0.         0.         0.         0.           (10) GRACE L. FRANCIS         2.000         X         X         0.         0.         0.         0.           (11) HUGH EVANS         2.000         X         X         0.         0.         0.         0.           SECRETARY         1.000         X         X         0.         0.         0.         0.           (11) HUGH EVANS         2.000         X         X         0.         0.         0.         0.           (12) LAURA KENNEDY         2.000         X         X         0.         0.         0.         0.           (13) FREDERIC MISILO, JR.         2.000         X         X         0.         0.         0.         0.           BOARD D	SENIOR ADVISOR						Х		137,956.	0.	24,710.
(8) NICOLE JORWIC       40.00       X       134,560.       0.       16,940.         (9) KENNETH OAKES       10.00       X       X       0.       0.       0.         (9) KENNETH OAKES       10.00       X       X       0.       0.       0.         (10) GRACE L. FRANCIS       2.00       X       0.       0.       0.       0.         VICE PRESIDENT       1.00       X       X       0.       0.       0.       0.         (11) HUGH EVANS       2.00       X       X       0.       0.       0.       0.         SECRETARY       1.000       X       X       0.       0.       0.       0.         (12) LAURA KENNEDY       2.00       X       X       0.       0.       0.       0.         TREASURER       1.000       X       X       0.       0.       0.       0.         (13) FREDERICK MISILO, JR.       2.00       X       X       0.       0.       0.       0.         BOARD DIRECTOR       X       X       0.       0.       0.       0.       0.       0.         BOARD DIRECTOR       X       X       0.       0.       0.       0. <td>(7) GLENN GRIFFIN</td> <td>40.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(7) GLENN GRIFFIN	40.00									
SR. EXEC. OFF., STATE ADVOCACY         X         134,560.         0.         16,940.           (9) KENNETH OAKES         10.00         X         X         0.         0.         0.           PRESIDENT         1.00         X         X         0.         0.         0.           (10) GRACE L. FRANCIS         2.00         X         X         0.         0.         0.           (11) HUGH EVANS         2.00         X         X         0.         0.         0.           SECRETARY         1.00         X         X         0.         0.         0.           (12) LAURA KENNEDY         2.00         X         X         0.         0.         0.           (13) FREDERICK MISILO, JR.         2.00         IMMEDIATE PAST PRESIDENT         0.         0.         0.           (14) MEGHAN BURKE         2.00         X         0.         0.         0.         0.           BOARD DIRECTOR         X         0.         0.         0.         0.         0.         0.           (16) DENA GASSNER         2.00         X         0.         0.         0.         0.         0.           BOARD DIRECTOR         X         0.         0.							Х		134,117.	0.	20,419.
(9)KENNETH OAKES10.00XXX0.0.0.PRESIDENT1.00XXX0.0.0.0.(10)GRACE L. FRANCIS2.00XX0.0.0.0.VICE PRESIDENT1.00XX0.0.0.0.(11)HUGH EVANS2.00XX0.0.0.0.(12)LAURA KENNEDY2.00XX0.0.0.0.(13)FREDERICK MISILO, JR.2.00XX0.0.0.0.(14)MEGHAN BURKE2.00XX0.0.0.0.BOARD DIRECTORXX0.0.0.0.0.0.(16)DENA GASSNER2.00XX0.0.0.0.BOARD DIRECTORXX0.0.0.0.0.0.(17)DEBBI HARRIS2.00X0.0.0.0.0.	(8) NICOLE JORWIC	40.00									
PRESIDENT         1.00         X         X         0.         0.         0.         0.           (10) GRACE L. FRANCIS         2.00         X         X         0.         0.         0.         0.           VICE PRESIDENT         1.00         X         X         0.         0.         0.         0.           (11) HUGH EVANS         2.00         X         X         0.         0.         0.         0.           SECRETARY         1.00         X         X         0.         0.         0.         0.           (12) LAURA KENNEDY         2.00         X         X         0.         0.         0.         0.           TREASURER         1.00         X         X         0.         0.         0.         0.           (13) FREDERICK MISILO, JR.         2.00         X         X         0.         0.         0.           (14) MEGHAN BURKE         2.00         X         X         0.         0.         0.         0.           BOARD DIRECTOR         X         0.         0.         0.         0.         0.         0.           (16) DENA GASSNER         2.00         X         0.         0.         0. <td>· · ·</td> <td>10.00</td> <td></td> <td></td> <td></td> <td></td> <td>Х</td> <td></td> <td>134,560.</td> <td>0.</td> <td>16,940.</td>	· · ·	10.00					Х		134,560.	0.	16,940.
(10) GRACE L. FRANCIS       2.00       X       X       0.       0.       0.         VICE PRESIDENT       1.00       X       X       0.       0.       0.       0.         (11) HUGH EVANS       2.00       X       X       0.       0.       0.       0.         SECRETARY       1.00       X       X       0.       0.       0.       0.         (12) LAURA KENNEDY       2.00       X       X       0.       0.       0.       0.         TREASURER       1.00       X       X       0.       0.       0.       0.         (13) FREDERICK MISILO, JR.       2.00       X       X       0.       0.       0.       0.         (14) MEGHAN BURKE       2.00       X       0. </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0</td> <td>•</td>										0	•
VICE PRESIDENT         1.00         X         X         0.         0.         0.           (11) HUGH EVANS         2.00         X         X         0.         0.         0.         0.           SECRETARY         1.00         X         X         0.         0.         0.         0.           (12) LAURA KENNEDY         2.00         X         X         0.         0.         0.         0.           TREASURER         1.00         X         X         0.         0.         0.         0.           (13) FREDERICK MISILO, JR.         2.00			X		Х				0.	0.	0.
(11) HUGH EVANS       2.00       X       X       0.       0.       0.         SECRETARY       1.00       X       X       0.       0.       0.       0.         (12) LAURA KENNEDY       2.00       X       X       0.       0.       0.       0.         TREASURER       1.00       X       X       0.       0.       0.       0.         (13) FREDERICK MISILO, JR.       2.00       X       X       0.       0.       0.       0.         IMMEDIATE PAST PRESIDENT       1.00       X       X       0.       0.       0.       0.         (14) MEGHAN BURKE       2.00       X       0.       0.       0.       0.       0.         BOARD DIRECTOR       X       0.       0.       0.       0.       0.       0.         (15) JULLIAN COPELAND       2.00       X       0.       0.       0.       0.       0.       0.         BOARD DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (16) DENA GASSNER       2.00       X       0.       0.       0.       0.       0.       0.       0.       0.       0. <td></td> <td>•</td>											•
SECRETARY         1.00         X         X         0.			X		Х				0.	0.	0.
(12) LAURA KENNEDY2.00XX0.0.0.TREASURER1.00XXX0.0.0.(13) FREDERICK MISILO, JR.2.00XX0.0.0.IMMEDIATE PAST PRESIDENT1.00XX0.0.0.(14) MEGHAN BURKE2.00XX0.0.0.BOARD DIRECTORX0.0.0.0.(15) JULLIAN COPELAND2.00X0.0.0.BOARD DIRECTORX0.0.0.0.(16) DENA GASSNER2.00X0.0.0.BOARD DIRECTORX0.0.0.0.BOARD DIRECTORX0.0.0.0.BOARD DIRECTORX0.0.0.0.BOARD DIRECTORX0.0.0.0.BOARD DIRECTORX0.0.0.0.	(11) HUGH EVANS										
TREASURER         1.00         X         X         0.			X		Х				0.	0.	0.
(13) FREDERICK MISILO, JR.2.00XX0.0.0.IMMEDIATE PAST PRESIDENT1.00XX0.0.0.0.(14) MEGHAN BURKE2.00X0.0.0.0.BOARD DIRECTORX0.0.0.0.0.(15) JULLIAN COPELAND2.00X0.0.0.0.BOARD DIRECTORX0.0.0.0.0.(16) DENA GASSNER2.00X0.0.0.0.BOARD DIRECTORX0.0.0.0.0.(17) DEBBI HARRIS2.00X0.0.0.0.BOARD DIRECTORX0.0.0.0.0.	(12) LAURA KENNEDY										•
IMMEDIATE PAST PRESIDENT1.00XX0.0.0.(14) MEGHAN BURKE2.00X0.0.0.0.BOARD DIRECTORX0.0.0.0.0.(15) JULLIAN COPELAND2.00X0.0.0.0.BOARD DIRECTORX0.0.0.0.0.(16) DENA GASSNER2.00X0.0.0.0.BOARD DIRECTORX0.0.0.0.0.(17) DEBBI HARRIS2.00X0.0.0.0.BOARD DIRECTORX0.0.0.0.0.			X		Х				0.	0.	0.
(14) MEGHAN BURKE2.00X0.0.0.BOARD DIRECTORX0.0.0.0.0.(15) JULLIAN COPELAND2.00X0.0.0.0.BOARD DIRECTORX0.0.0.0.0.(16) DENA GASSNER2.00X0.0.0.0.BOARD DIRECTORX0.0.0.0.0.BOARD DIRECTORX0.0.0.0.0.BOARD DIRECTORX0.0.0.0.0.BOARD DIRECTORX0.0.0.0.0.											•
BOARD DIRECTORX0.0.0.(15) JULLIAN COPELAND2.00X0.0.0.BOARD DIRECTORX0.0.0.0.(16) DENA GASSNER2.00X0.0.0.BOARD DIRECTORX0.0.0.0.(17) DEBBI HARRIS2.00X0.0.0.BOARD DIRECTORX0.0.0.0.			X		Х				0.	0.	0.
(15) JULLIAN COPELAND2.00X0.0.0.BOARD DIRECTORX0.0.0.0.0.(16) DENA GASSNER2.00X0.0.0.0.BOARD DIRECTORX0.0.0.0.0.(17) DEBBI HARRIS2.00X0.0.0.0.BOARD DIRECTORX0.0.0.0.0.		2.00									•
BOARD DIRECTORX0.0.0.(16) DENA GASSNER2.00X0.0.0.BOARD DIRECTORX0.0.0.0.(17) DEBBI HARRIS2.00X0.0.0.BOARD DIRECTORX0.0.0.0.			X						0.	0.	0.
(16) DENA GASSNER2.00X0.0.0.BOARD DIRECTORX0.0.0.0.0.(17) DEBBI HARRIS2.00X0.0.0.0.BOARD DIRECTORX0.0.0.0.0.		2.00									<u>^</u>
BOARD DIRECTORX0.0.0.(17) DEBBI HARRIS2.00X0.0.0.BOARD DIRECTORX0.0.0.0.		0.00	X						0.	0.	0.
(17) DEBBI HARRIS         2.00         X         0.		2.00								~	<u>^</u>
BOARD DIRECTOR X 0. 0. 0.			X						0.	0.	0.
		2.00									^
	BOARD DIRECTOR		Х						0.	0.	0 • Eorm <b>990</b> (2021)

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Form 990 (2021)

Form 990 (2	2021)
Dart VII	•

13-5642032 Page 8

(A) Name and title	(B) Average hours per		not c	Pos heck	more	than		<b>(D)</b> Reportable compensation	•	( <b>C</b> ) Reportable compensation		
	week (list any hours for related organizations below line)	tee or director	Institutional trustee	officer	lirecto	Highest compensated signated s	stee)	(W-2/1099-NEC)	from related organization (W-2/1099-MIS 1099-NEC)	l s SC/	com fr org an	nount of other pensatic om the anizatior d related anization
(18) JASMINE HARRIS BOARD DIRECTOR	2.00	x			×	1.0		0.		0.		
(19) BURT HUDSON	2.00											
BOARD DIRECTOR		х						0.		0.		
(20) HUSSAIN ISMAIL	2.00									~		
BOARD DIRECTOR		X						0.		0.		
21) STACY KRAY	2.00							0.		0		
SOARD DIRECTOR	2.00	X						0.		0.		
22) RUSSELL LEHMANN BOARD DIRECTOR	4.00	x						0.		Ο.		
23) CHLOE ROTHSCHILD	2.00				-		-	0.		0.		
BOARD DIRECTOR	2.00	x						0.		0.		
(24) MITCH ROUTON	2.00											
SOARD DIRECTOR		x						0.		Ο.		
(25) MEREDITH SADOULET	2.00											
BOARD DIRECTOR		x						0.		Ο.		
26) KAREN SHOEMAKER	2.00											
SOARD DIRECTOR		X						0.		0.		
1b Subtotal								1,663,422.		0.	24	1,32
c Total from continuation sheets to Part	VII, Section A							0.		0.		1
d Total (add lines 1b and 1c)								1,663,422.		0.	24	1,32
2 Total number of individuals (including but	t not limited to th	lose	liste	ed al	bove	e) wł	no re	eceived more than \$100	,000 of reportab	le		
compensation from the organization												Yes
<b>3</b> Did the organization list any <b>former</b> office	er director trust	ee k	(ev e	emp	love	e o	r hia	hest compensated emr	olovee on			100 1
line 1a? If "Yes," complete Schedule J fo								· · ·			3	
4 For any individual listed on line 1a, is the												
and related organizations greater than \$	50,000? If "Yes,	" со	mple	ete S	Sche	edule	e J f	or such individual	-		4	Х
5 Did any person listed on line 1a receive of	r accrue compe	nsat	ion f	rom	any	/ unr	relat	ed organization or indiv	idual for services			
rendered to the organization? If "Yes," co	mplete Schedul	e J f	or su	uch	pers	son .					5	
Section B. Independent Contractors												
1 Complete this table for your five highest	-	-								npens	ation	from
the organization. Report compensation for	or the calendar y	ear	endi	ng v	vith	or w	vithir		year.			
(A) Name and busine	ss address							<b>(B)</b> Description of s	ervices	C	<b>))</b> ompe	<b>;)</b> nsation
GRAPHCOM, INC., 1219 CH		20	R	זער	<u> </u>		╈	DESIGN, PRIN			ompe	Isation
			1	// 11	,			MAILING	iine,		32	2,78
							-				52	<u></u>
GETTYSBURG, PA 17325	FICS. LLO	2.	3(	) ()	N							
GETTYSBURG, PA 17325 HARRIS INSIGHTS & ANALY								MARKETING RE	SEARCH		12	2.77
GETTYSBURG, PA 17325 HARRIS INSIGHTS & ANALY								MARKETING RE	SEARCH		12	2,77
GETTYSBURG, PA 17325 HARRIS INSIGHTS & ANALY								MARKETING RE	SEARCH		12	2,77
GETTYSBURG, PA 17325 HARRIS INSIGHTS & ANALY								MARKETING RE	SEARCH		12	2,77
GETTYSBURG, PA 17325 HARRIS INSIGHTS & ANALY							1	MARKETING RE	SEARCH		12	2,77
GETTYSBURG, PA 17325 HARRIS INSIGHTS & ANALY							1	MARKETING RE	SEARCH		12	2,77
GETTYSBURG, PA 17325 HARRIS INSIGHTS & ANALY LASALLE ST, STE. 5575, 0	CHICAGO,	II	<u> </u>	506	554	4					12	2,77
<b>3ETTYSBURG, PA 17325</b> HARRIS INSIGHTS & ANALY LASALLE ST, STE. 5575, 0 <b>2</b> Total number of independent contractors	CHICAGO,	II	<u> </u>	506	554	4					12	2,77
2 Total number of independent contractors \$100,000 of compensation from the orga	CHICAGO,	II not lii	mite	5 0 6 d to	tho	4 se lis 2	sted	above) who received n				2,77
GETTYSBURG, PA 17325 HARRIS INSIGHTS & ANALY LASALLE ST, STE. 5575, 0 2 Total number of independent contractors \$100,000 of compensation from the orga SEE PART VII, SECTIO	CHICAGO,	II not lii	mite	5 0 6 d to	tho	4 se lis 2	sted	above) who received n				
2 Total number of independent contractors \$100,000 of compensation from the orga	CHICAGO,	II not lii	mite	5 0 6 d to	tho	4 se lis 2	sted	above) who received n				2 , 7 7 990 (2

Form 990 THE AR Part VII Section A. Officers, Directors	, Trustees, Key Er	nplo	oyee	s, a	nd H	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)	Ľ		(C				(D)	(E)	(F)
Name and title	Average				osition			Reportable	Reportable	Estimated
	hours	(c	heck	all t	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensatio
	(list any hours for	irecto				emp		organization	(W-2/1099-MISC)	from the
	related	e or d	tee			sated		(W-2/1099-MISC)		organizatior and related
	organizations	Individual trustee or director	Institutional trustee		yee	Highest compensated employee				organization
	below	idual	ution	S.	Key employee	est co	er			5
	line)	Indiv	Instit	Officer	Keye	High	Former			
(27) KATHLEEN STAUFFER	2.00									
BOARD DIRECTOR		X						0.	0.	(
(28) CHRIS STEWART	2.00									
BOARD DIRECTOR		Х						0.	0.	(
(29) FAYE TATE	2.00									
BOARD DIRECTOR		Х						0.	0.	
(30) JOSE VELASCO	2.00								_	
BOARD DIRECTOR		X						0.	0.	(
(31) CAROL WHEELER	2.00									
BOARD DIRECTOR	1.00	X						0.	0.	(
		1								
		-					-			
	I	L	I		I	L	I			

04-01-21

# Form 990 (2021) THE ARC OF THE UNITED STATES Part VIII Statement of Revenue Image: Constraint of Revenue Image: Constraint of Revenue

		Check if Schedule O contains a response of	or note to any lin				
				<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts t	1 :	Federated campaigns 1a	779.				
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues 1b					
<u>م</u>		Fundraising events					
ìifts ar A		Related organizations 10	42,776.				
s, G		Government grants (contributions) <b>1e</b>	1,687,984.				
Si		All other contributions, gifts, grants, and	, , -				
the		similar amounts not included above <b>1f</b>	5,641,324.				
Ē		Noncash contributions included in lines 1a-1f	70,042.				
anc		Total. Add lines 1a-1f		7,372,863.			
_			Business Code	, ,			
ø	2 8	AFFILATE DUES	900099	2,818,439.	2,818,439.		
Program Service Revenue		PROGRAM SERVICE FEES	900099	409,081.	409,081.		
Sei	c	REGISTRATION FEES	900099	380,357.	380,357.		
eve		AFFILATE MGMT. FEES	900099	129,929.	129,929.		
2 B G G	e			,	,		
- L	f	All other program service revenue					
	c	<b>Total.</b> Add lines 2a-2f		3,737,806.			
	3	Investment income (including dividends, intere					
		other similar amounts)		166,519.			166,519.
	4	Income from investment of tax-exempt bond p					
	5	Royalties	🕨	120,713.			120,713.
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
	k	Less: rental expenses 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)	►				
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory <b>7a</b>					
	k	Less: cost or other basis					
ne		and sales expenses 7b					
Other Revenue	c	Gain or (loss)					
Re		Net gain or (loss)	►				
her	8 8	Gross income from fundraising events (not					
đ		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18					
	k	b Less: direct expenses 8b					
	c	Net income or (loss) from fundraising events	►				
	9 a	Gross income from gaming activities. See					
		Part IV, line 19 9a					
	k	b Less: direct expenses 9b					
	c	Net income or (loss) from gaming activities	►				
	10 a	Gross sales of inventory, less returns					
		and allowances 10a					
	k	Less: cost of goods sold 10b					
	C	Net income or (loss) from sales of inventory	►				
si			Business Code				
eor	11 a	MISCELLANEOUS INCOME	900099	4,040.			4,040.
Miscellaneous Revenue	k	)					
ev el	C						
Mis		All other revenue					
	e	e Total. Add lines 11a-11d	►	4,040.			
	12	Total revenue. See instructions	►	11,401,941.	3,737,806.	0.	291,272.
13200	9 12-0	9-21					Form <b>990</b> (2021)

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Part IX Statement of Functional Expenses

THE ARC OF THE UNITED STATES

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

D٥	not include amounts reported on lines 6b,	(A)	this Part IX	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	630,459.	630,459.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
-	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1,086,361.	886,123.	103,507.	96,731
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	4,251,413.	3,398,640.	158,852.	693,921
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	327,372.	261,584.	11,656.	54,132
9	Other employee benefits	497,213.	415,439.	9,847.	71,927
0	Payroll taxes	393,064.	315,581.	18,320.	59,163
1	Fees for services (nonemployees):				
а	Management				
b					
с	Accounting	28,672.	26,990.	203.	1,479
	Lobbying	-	-		
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	27,250.		27,250.	
g		-			
Ŭ	column (A), amount, list line 11g expenses on Sch 0.)	834,899.	785,935.	5,908.	43,056
2	Advertising and promotion	177,962.	136,470.	-2.	41,494
3	Office expenses	218,676.	87,199.	5,206.	126,271
4	Information technology				
5	Royalties				
6	Occupancy	586,474.	466,538.	31,605.	88,331
7	Travel	24,483.	21,746.	1,275.	1,462
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	170,895.	151,792.	8,898.	10,205
20	Interest				
21	Payments to affiliates				
2	Depreciation, depletion, and amortization	200,770.	166,757.	6,703.	27,310
3	Insurance	28,675.	26,873.	-2,917.	4,719
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	EQUIP. REPAIRS/MAINT.	500,510.	388,210.	30,858.	81,442
b	SUBSCRIPTIONS AND DUES	177,261.	163,985.	-179.	13,455
с	PUBLICATION PRODUCTION	164,780.	97,751.	402.	66,627
d	BAD DEBT EXPENSE	66,557.		66,557.	-
	All other expenses	32,625.	25,003.	1,163.	6,459
25	Total functional expenses. Add lines 1 through 24e	10,426,371.	8,453,075.	485,112.	1,488,184
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 Check here infollowing SOP 98-2 (ASC 958-720)				

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Form **990** (2021)

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16,467,907.

18,905,974.

Form 990 (2021)

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

		Check if Schedule O contains a response or note to any line in this Part X			
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cach non interact hearing	1,463,802.	1	2,017,208.
	2	Cash - non-interest-bearing Savings and temporary cash investments	127,119.	2	428,409.
	2		107,586.	2	120,851.
		Pledges and grants receivable, net	1,395,466.	4	813,120.
	4	Accounts receivable, net Loans and other receivables from any current or former officer, director,	1,333,400.	4	015,120.
	5				
		trustee, key employee, creator or founder, substantial contributor, or 35%		5	
	6	controlled entity or family member of any of these persons		5	
	0	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
<i>(</i> 0	7			7	
Assets		Notes and loans receivable, net		8	
As	8 9	Inventories for sale or use	114,436.	9	122,189.
		Prepaid expenses and deferred charges	111,150.	9	122,105.
	IUa	basis. Complete Part VI of Schedule D			
	ь	Less: accumulated depreciation 10b 2,186,741.	381,262.	10c	187,481.
	11	Investments - publicly traded securities	8,271,950.	11	9,678,508.
	12	Investments - publicly traded securities	2,759,308.	12	3,410,391.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1,846,978.	15	2,127,817.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	16,467,907.	16	18,905,974.
	17	Accounts payable and accrued expenses	981,704.	17	988,893.
	18	Grants payable		18	
	19	Deferred revenue	65,000.	19	38,500.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ŝ	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
iabi		controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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	702,392.		611,963.
	26	Total liabilities. Add lines 17 through 25	1,749,096.	26	1,639,356.
s		Organizations that follow FASB ASC 958, check here 🕨 🔟			
jce.		and complete lines 27, 28, 32, and 33.			
alar	27	Net assets without donor restrictions	3,173,089.	27	5,794,200.
а В	28	Net assets with donor restrictions	11,545,722.	28	11,472,418.
ň		Organizations that do not follow FASB ASC 958, check here 🕨			
Net Assets or Fund Balances		and complete lines 29 through 33.			
ts (	29	Capital stock or trust principal, or current funds		29	
SSe	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
∌t A	31	Retained earnings, endowment, accumulated income, or other funds	11 710 011	31	
ž	32	Total net assets or fund balances	14,718,811.	32	17,266,618.

Total liabilities and net assets/fund balances

THE ARC OF THE UNITED STATES

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-	000	(0004)
Form	990	(2021)

Form	1990 (2021) THE ARC OF THE UNITED STATES	13-5	642032	Pag	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
	· · ·				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,401	L,9	41.
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,426	5,3	71.
3	Revenue less expenses. Subtract line 2 from line 1	3	975	5,5	70.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	14,718	3,8	11.
5	Net unrealized gains (losses) on investments	5	1,572	2,2	37.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	17,266	5,6	18.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.	_		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	9 <b>90</b> (	2021)

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SCHEDULE A	١
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Department of the Treasury

(Form 990)

Total

# Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

2021
Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.							Inspection			
Name of the organization			ion	v					Employer	r identification number
	THE ARC OF THE UNITED STATES							1	3-5642032	
Pa	rt I									
The	organ	•			(For lines 1 through 12, c					
1					on of churches describe					
2	$\square$	,		,	Attach Schedule E (Forn			-////-/-		
3	$\square$				anization described in se		)/b)/1)/ <b>/</b> /i	ii)		
4	$\square$				njunction with a hospita				(iii) Enter	the hospital's name
•		city, and stat	÷							the hoopital o hamo,
5				or the benefit of a co	ollege or university owned	d or opera	ted by a d	overnmental	unit descrit	oed in
Ŭ		-	-	Complete Part II.)			.cu oy u g	eventional		
6				• •	mental unit described in	section 17	70(b)(1)(A)	(v).		
	X				antial part of its support 1				the general	l public described in
•				omplete Part II.)	andar part of its support	ionia gov	cimicina		ine general	
8					(1)(A)(vi). (Complete Par	+ II )				
9	$\square$				l in section 170(b)(1)(A)(		ed in conii	inction with a	land-grant	college
Ũ		-	-	-	culture (see instructions).		-		-	-
		university:		grant concept of agric			name, en	y, and state o	r the colleg	
10			ion that norma	Illy receives (1) more	than 33 1/3% of its sup	port from	contributio	ons members	hin fees a	nd aross receipts from
					ct to certain exceptions;					
					e (less section 511 tax) fr					
				mplete Part III.)					gamzation	
11					ively to test for public sa	fety See	section 5	09(a)(4)		
12	$\square$	-	-	-	sively for the benefit of, to	•			arry out the	e purposes of one or
		-	-		ed in <b>section 509(a)(1)</b> o				-	
					of supporting organizatio					
а			-		supervised, or controlled		-		-	/ aivina
-				-	gularly appoint or elect a	•			•••••	
			-	complete Part IV, Se	• • • •					561212
b				-	d or controlled in connec	tion with it	ts support	ed organizatio	on(s), by ha	avina
				-	anization vested in the s			-		-
			-	t complete Part IV,					.goo oop	
с				-	g organization operated	in connec	tion with.	and functiona	ally integrat	ed with.
			-		s). You must complete I				,	,
d		<b>-</b>	-		porting organization oper				rted organ	ization(s)
			-		zation generally must sa				-	
			-		nplete Part IV, Sections	•		-		
е					written determination fro				II. Type III	
		functionally	/ integrated, o	r Type III non-functio	onally integrated support	ing organi	zation.	, , , , , , , , , , , , , , , , , , ,	<i>,</i> <b>,</b>	
f	Ente									
g				n about the supporte						
	(	(i) Name of supp	orted	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your govern	anization listed ing document?	(v) Amount o	f monetary	(vi) Amount of other
		organizatior	ו		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)

### Schedule A (Form 990) 2021

#### THE ARC OF THE UNITED STATES

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	4,326,031.	4,020,377.	4,913,323.	6,309,679.	7,372,863.	26,942,273.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge $\dots$						
4	Total. Add lines 1 through 3	4,326,031.	4,020,377.	4,913,323.	6,309,679.	7,372,863.	26,942,273.
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)						4,689,175.
_	Public support. Subtract line 5 from line 4.						22,253,098.
Se	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	<b>(e)</b> 2021	<b>(f)</b> Total
7	Amounts from line 4	4,326,031.	4,020,377.	4,913,323.	6,309,679.	7,372,863.	26,942,273.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources $\dots$	333,835.	369,961.	336,834.	256,638.	287,232.	1,584,500.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on $\dots$						
10	Other income. Do not include gain						
	or loss from the sale of capital		20 550	10 005	6 0		
	assets (Explain in Part VI.)	7,052.	38,559.	10,985.	6,559.	4,040.	67,195.
	Total support. Add lines 7 through 10						28,593,968.
	Gross receipts from related activities,		,				,708,553.
13	First 5 years. If the Form 990 is for the	•	rst, second, third, t	fourth, or fifth tax	year as a section 5	501(c)(3)	
0	organization, check this box and stor						
-	ction C. Computation of Publ						77 00
	Public support percentage for 2021 (					14	77.82 % 72.65 %
	Public support percentage from 2020						
16a	<b>33 1/3% support test - 2021.</b> If the c						x and ► X
	stop here. The organization qualifies						
Ľ	<b>33 1/3% support test - 2020.</b> If the c						
47.	and <b>stop here.</b> The organization qual						►∟
1/2	10% -facts-and-circumstances tes						
	and if the organization meets the fact			•		6	
	meets the facts and circumstances to	•	•		•	17a and line 15 is	
	10% -facts-and-circumstances tes	-					10% Uf
	more, and if the organization meets the						
10	organization meets the facts-and-circ						
18	Private foundation. If the organization	T UIU HOL CHECK A		a, 100, 17a, 01 17t	, CHECK THIS DOX 8		s  Form 990) 2021
						Schedule A	

### THE ARC OF THE UNITED STATES

## (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

qualify under the tests listed below, please complete Part II.)

	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 202	21 <b>(f)</b> Total
	Gifts, grants, contributions, and		(2)	(3) = 210	(2) =====	(-, 2.52	
-	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
1	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 202	21 (f) Total
	Amounts from line 6						
0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
h	Unrelated business taxable income						
D	(less section 511 taxes) from businesses						
	acquired ofter June 20 1075						
_							
	Add lines 10a and 10b Net income from unrelated business						
•	activities not included on line 10b, whether or not the business is						
2	regularly carried on Other income. Do not include gain				+		
-	or loss from the sale of capital						
2	assets (Explain in Part VI.)				+		
	Total support. (Add lines 9, 10c, 11, and 12.)			formation on Citile Across		F01(-)(0)	
4	First 5 years. If the Form 990 is for the check this box and stop here	-			-		
Sec	tion C. Computation of Public						·····
	Public support percentage for 2021 (I			column (f))		15	%
	Public support percentage from 2020					16	%
	ction D. Computation of Invest						
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	%
	33 1/3% support tests - 2021. If the					33 1/3% . an	
	more than 33 1/3%, check this box a						$\blacktriangleright$
b	33 1/3% support tests - 2020. If the						1/3%. and
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organizatio						
	23 01-04-22						edule A (Form 990) 2021
				16			· · · · · · · · · · · · · · · · · · ·
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Schedule A (Form 990) 2021

1

2

3a

3b

Yes No

### Part IV Supporting Organizations

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

### Section A. All Supporting Organizations

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

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17

3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b Schedule A (Form 990) 2021

### Schedule A (Form 990) 2021 THE ARC OF THE UNITED STATES

2

Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in <b>Part VI.</b>	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.
Section C. Type II Supporting Organizations

Section C. Type if Supporting Organizations						

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).
 1
 1
 1

 Section D. All Type III Supporting Organizations
 1
 1
 1

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

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

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).
- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- c \_\_\_\_\_ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" provide details in **Part VI.**
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard*.
   132025 01-04-22

3b Schedule A (Form 990) 2021

2a

2b

3a

Yes No

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Schedule A	(Form 990) 202
Devt V	Turne III Nie

onizations

Ра 1	rt V Type III Non-Functionally Integrated 509(a)(3) Support			Part VI) See instructio
•	All other Type III non-functionally integrated supporting organizations mu	-		Part VI). See instructio
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		(-
2	Recoveries of prior-year distributions	2		
2		3		
4	Other gross income (see instructions)	4		
4 5	Add lines 1 through 3. Depreciation and depletion	5		
6		- 5		
0	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
_	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
5	emergency temporary reduction (see instructions).	6		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2021

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Par	t V   Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations <sub>(continu</sub>	led)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported			
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in <b>Part VI</b> )		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsiv	e		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount		-	10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	าร	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
c	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2017				
b	Excess from 2018				
С	Excess from 2019				
d	Excess from 2020				
е	Excess from 2021				

Schedule A (Form 990) 2021

132027 01-04-22

Part VI	Supplemental In	formation. Prov	vide the explanat	ions required h	ov Part II line	10: Part II, line 1	7a or 17b: Part III	line 12:
	Part IV, Section A, line line 1; Part IV, Section Section D, lines 5, 6, a	es 1, 2, 3b, 3c, 4b, D, lines 2 and 3; F	4c, 5a, 6, 9a, 9b Part IV, Section E	, 9c, 11a, 11b, E, lines 1c, 2a, 2	and 11c; Part 2b, 3a, and 3b	IV, Section B, li Part V, line 1; F	nes 1 and 2; Part I\ Part V, Section B, li	/, Section C, ne 1e; Part V
	(See instructions.)			., _, _,				
							Sabadula	(Form 990)
32028 01-04-2	2						Schedule F	

## Schedule B

(Form 990)

Organization

Filers of:

Department of the Treasury Internal Revenue Service

Name of the organization

* *	PUBLIC	DISCLOSURE	COPY	* *
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## **Schedule of Contributors**

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

OMB No. 1545-0047

2021

Employer identification number

13-5642032

	THE	ARC	OF	THE	UNITED	STATES	
type (cheo	ck one):						
	Se	ection:					

Form 990 or 990-EZ	X 501(c)( 3) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> 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, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### Special Rules

X For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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 its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Name of organization

Employer identification number

THE ARC OF THE UNITED STATES

13-5642032

#### Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 X Person Payroll 1,577,833. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 2 X Person Payroll 1,115,357. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 3 X Person Payroll 820,000. Noncash \$ (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 Х Person Payroll 388,137. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 5 X Person Payroll 250,000. Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 6 X Person Pavroll 211,500. Noncash \$ (Complete Part II for noncash contributions.) 123452 11-11-21 Schedule B (Form 990) (2021) 23

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21031111 745960 01813

Name of organization

Employer identification number

13-5642032

### THE ARC OF THE UNITED STATES

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 7 X Person Payroll 184,490. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution X 8 Person Payroll 165,000. Noncash \$ (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contributions.) (c) (d) (a) (b) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash \$ (Complete Part II for noncash contributions.) 123452 11-11-21 Schedule B (Form 990) (2021) 24

2021.04021 THE ARC OF THE UNITED STATE 01813\_\_1

THE A	RC OF THE UNITED STATES		13-5642032
Part II	Noncash Property (see instructions). Use duplicate copies of Part	t 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
		_	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\$	
23453 11-1	<sup>1-21</sup> <b>25</b>		Schedule B (Form 990) (202

Name of organization

Employer identification number

12 5612022

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<sup>2021.04021</sup> THE ARC OF THE UNITED STATE 01813\_1

Schedule I	B (Form 990) (2021)		Page
Name of o	organization		Employer identification number
THE A	RC OF THE UNITED STATES	5	13-5642032
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious,	tions to organizations described in s ) through (e) and the following line en charitable, etc., contributions of \$1,000 or	section 501(c)(7), (8), or (10) that total more than \$1,000 for the ye
(a) No.	Use duplicate copies of Part III if additional		
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	
	Transferee's name, address, a	Ind ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of git	[
	Transferee's name, address, a 	Ind ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gif ind ZIP + 4	Relationship of transferor to transferee
123454 11-1	1-21	26	Schedule B (Form 990) (202

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2021.04021 THE ARC OF THE UNITED STATE 01813\_\_1

SCHEDULE C	Po	OMB No. 1545-0047				
(Form 990)	Form 990) For Organizations Exempt From Income Tax Under section 501(c) and section 527				7	2021
	Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.					Open to Public
Department of the Treasury Internal Revenue Service	-	-				Inspection
Department of the Treasury Internal Revenue Service       Go to www.irs.gov/Form990 for instructions and the latest information.         If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Active Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.          • Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.          • Section 527 organizations: Complete Part I-A only.         If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), the • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete • Section 501(c)(3) organizations: Complete Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, F Tax) (See separate instructions), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III.						Inspection vities), then en ete Part II-B. complete Part II-A. Part V, line 35c (Proxy identification number 3 – 5 6 4 2 0 3 2
1 Provide a descripti	on of the organiz	ation's direct and indirect politic	al campaign activities i	in Part IV.		
		ures			►\$	
		gn activities				
Part I-B Compl	ata if tha ara	anization is axampt und	or contion 501(a)	(3)		
	-	anization is exempt und incurred by the organization und			▶\$	
	•	incurred by organization manage			► \$ <u> </u>	
		n 4955 tax, did it file Form 4720			· · · ·	Yes No
<b>b</b> If "Yes," describe in	n Part IV.					
Part I-C Compl	ete if the org	anization is exempt und	er section 501(c),	, except section 5	501(c)(3	).
1 Enter the amount of	lirectly expended	by the filing organization for sec	ction 527 exempt funct	tion activities	►\$	
2 Enter the amount of	of the filing organ	ization's funds contributed to otl	her organizations for se			
exempt function ac					▶\$	
	-	. Add lines 1 and 2. Enter here a				
					►\$	Yes No
		<b>1120-POL</b> for this year?		litical argonizations to		
made payments. F contributions recei	or each organiza ved that were pro	tion listed, enter the amount pair omptly and directly delivered to a additional space is needed, prov	d from the filing organiz a separate political org ide information in Part	zation's funds. Also ent anization, such as a se	ter the arr	nount of political
<b>(a)</b> Namo	9	<b>(b)</b> Address	(c) EIN	(d) Amount paid fro filing organization funds. If none, enter	's con -0 p de	e) Amount of political tributions received and promptly and directly elivered to a separate political organization. If none, enter -0
For Paperwork Reduct	ion Act Notice,	see the Instructions for Form 9	990 or 990-EZ.		Schee	dule C (Form 990) 2021

<b>L</b> , <i>n</i> , ,	
132041	11-03-21

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Schedule C (Form 990) 2021THE ARC OF THE UNITED STATES13-5642032Page 2							
Part II-A Complete if the org	ganization i	s exei	mpt under sectio	n 501(c)(3) and fi	ed Form 5768 (el	ection under	
section 501(h)).							
	-		liated group (and list in	Part IV each affiliated	group member's nam	e, address, EIN,	
expenses, and sha		, 0	. ,	uisissa saaku			
B Check ► if the filing organiza	ition checked i	oox A ar	nd "limited control" pro	ovisions apply.	(a) Filing	(b) Affiliated group	
	ts on Lobbyin	• •			organization's	totals	
(The term "expen	ditures" mean	is amou	ints paid or incurred.)		totals		
1a Total lobbying expenditures to infl	uence public o	pinion (	grassroots lobbying)		0.		
<b>b</b> Total lobbying expenditures to infl	uence a legisla	ative boo	dy (direct lobbying)		190,000.		
c Total lobbying expenditures (add l	ines 1a and 1b	)			190,000.		
d Other exempt purpose expenditur	es				10,236,371.		
e Total exempt purpose expenditure					10,426,371.		
f Lobbying nontaxable amount. Ent		from the	e following table in bot	h columns.	671,319.		
If the amount on line 1e, column (a) of	. ,		bying nontaxable am				
Not over \$500,000		-	the amount on line 1e.				
Over \$500,000 but not over \$1,00		,	00 plus 15% of the exc				
Over \$1,000,000 but not over \$1,5	,	. ,	00 plus 10% of the exc	.,,,			
Over \$1,500,000 but not over \$17	, ,		0 plus 5% of the exce	ss over \$1,500,000.			
Over \$17,000,000	;	\$1,000,	000.				
g Grassroots nontaxable amount (er	ter 25% of line	o 1f)			167,830.		
h Subtract line 1g from line 1a. If zer		,			0.		
i Subtract line 1f from line 1c. If zero					0.		
j If there is an amount other than ze							
reporting section 4911 tax for this	-					Yes No	
			eraging Period Under				
(Some organizations t					of the five columns b	elow.	
			ate instructions for lin				
	Lobbying	g Expei	nditures During 4-Yea	ar Averaging Period	r	r	
Calendar year	<b>(a)</b> 2018	Q	<b>(b)</b> 2019	<b>(c)</b> 2020	( <b>d)</b> 2021	(e) Total	
(or fiscal year beginning in)	(a) 2010	0	(b) 2019	(0) 2020	( <b>u</b> ) 2021		
2a Lobbying nontaxable amount	620,	307.	674,541.	658,619.	671,319.	2,624,786.	
<b>b</b> Lobbying ceiling amount							
(150% of line 2a, column(e))						3,937,179.	
c Total lobbying expenditures	160,	000.	200,000.	250,000.	190,000.	800,000.	
	155	077	160 625		167 020	CEC 107	
d Grassroots nontaxable amount	155,	0//.	168,635.	164,655.	167,830.	656,197.	
e Grassroots ceiling amount						984,296.	
(150% of line 2d, column (e))						JUH, 430.	

Schedule C (Form 990) 2021

132042 11-03-21

f Grassroots lobbying expenditures

## Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)	
		Yes	Νο	Amo	ount
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? $\dots$				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		<u>5) or or</u>	ation	
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4)		b), or se	ection	
	501(c)(6).			Yes	No
				162	NO
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the			ation	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				ie 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year				
	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
-	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions				
	t IV Supplemental Information				
Drovi	do the descriptions required for Port I.A. line 1: Port I.P. line 4: Port I.C. line 5: Port II.A (affiliated group		A lines 1		

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990) 2021

132043 11-03-21

SCHEDULE D

Department of the Treasury Internal Revenue Service

Name of the organization

(Form 9	<del>9</del> 90)
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Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

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

OMB No. 1545-0047 **Open to Public** Inspection

	Employ
'ES	

oyer identification number 13-5642032

	THE ARC OF THE UNITED STATES		13-5642032				
Pa	rt I Organizations Maintaining Donor Advised Funds or Other	Similar Funds or <i>I</i>	Accounts.Complete if the				
	organization answered "Yes" on Form 990, Part IV, line 6.						
	(a) Donor advise	ed funds	(b) Funds and other accounts				
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in writing that the assets h	eld in donor advised fu	nds				
_	are the organization's property, subject to the organization's exclusive legal control?						
6	Did the organization inform all grantees, donors, and donor advisors in writing that g						
	for charitable purposes and not for the benefit of the donor or donor advisor, or for a						
	impermissible private benefit?		Yes No				
Pa	rt II Conservation Easements. Complete if the organization answered "Ye		/, line 7.				
1	Purpose(s) of conservation easements held by the organization (check all that apply)						
	Preservation of land for public use (for example, recreation or education)		orically important land area				
	Protection of natural habitat		tified historic structure				
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualified conservation contril	oution in the form of a c	conservation easement on the last				
	day of the tax year.		Held at the End of the Tax Year				
а	Total number of conservation easements		2a				
b	Total acreage restricted by conservation easements		2b				
с	Number of conservation easements on a certified historic structure included in (a)		2c				
d							
	listed in the National Register		2d				
3	Number of conservation easements modified, transferred, released, extinguished, or		inization during the tax				
	year ▶						
4	Number of states where property subject to conservation easement is located						
5	Does the organization have a written policy regarding the periodic monitoring, inspec	tion, handling of					
	violations, and enforcement of the conservation easements it holds?		Yes 📃 No				
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, a	nd enforcing conservat	tion easements during the year				
	▶						
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and e	nforcing conservation e	easements during the year				
	▶ \$						
8	Does each conservation easement reported on line 2(d) above satisfy the requirement	nts of section 170(h)(4)(	(B)(i)				
	and section 170(h)(4)(B)(ii)?						
9	In Part XIII, describe how the organization reports conservation easements in its reve	enue and expense state	ement and				
	balance sheet, and include, if applicable, the text of the footnote to the organization'	s financial statements t	hat describes the				
	organization's accounting for conservation easements.		<u>.</u>				
Pai	rt III Organizations Maintaining Collections of Art, Historical Tr	easures, or Other	Similar Assets.				
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.						
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its rev						
	of art, historical treasures, or other similar assets held for public exhibition, education		ance of public				
_	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.						
b	b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of						
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,						
	provide the following amounts relating to these items:		<b>N</b>				
	(i) Revenue included on Form 990, Part VIII, line 1		<b>N A</b>				
~	(ii) Assets included in Form 990, Part X						
2	If the organization received or held works of art, historical treasures, or other similar a	-	, provide				
	the following amounts required to be reported under FASB ASC 958 relating to these						
	Revenue included on Form 990, Part VIII, line 1						
	Assets included in Form 990, Part X						
	For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Schedule D (Form 990) 2021				
13205	<sup>1</sup> 10-28-21 <b>30</b>						

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		OF THE UNI			011		13-56			age <b>2</b>
	t III Organizations Maintaining C							<b>ts</b> (contir	nued)	
3	Using the organization's acquisition, accessi	on, and other records	s, check any of the	e following that m	nake sig	nificant	use of its			
_	collection items (check all that apply):									
a	Public exhibition	d		change program						
b	Scholarly research	e	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	•	•	•			se in Par	t XIII.		
5	During the year, did the organization solicit of							-		-
	to be sold to raise funds rather than to be ma							Yes		No
Par	<b>t IV</b> Escrow and Custodial Arran		te if the organizati	on answered "Ye	es" on Fo	orm 990	, Part IV,	line 9, or	-	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod							7		7
	on Form 990, Part X?						L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:							
								Amoun	t	
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on F	orm 990, Part X, line :	21, for escrow or o	custodial accoun	t liability	/?	L	Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has bee	n provided on Pa	art XIII					
Par	t V Endowment Funds. Complete i	f the organization and	swered "Yes" on F		·					
		(a) Current year	<b>(b)</b> Prior year	(c) Two years b	ack (d	<b>)</b> Three y	ears back	(e) Four	r years	back
1a	Beginning of year balance	2,188,399.	2,053,015	. 1,839,7	757.	2,0	01,935.	1	,869,	051.
b	Contributions									
	Net investment earnings, gains, and losses	145,870.	151,860	. 227,9	910.	-1	62,178.		192,	014.
d	Grants or scholarships									
	Other expenditures for facilities									
	and programs	22,952.	16,476	. 14,6	552.				59,	130.
f	Administrative expenses									
	End of year balance	2,311,317.	2,188,399	. 2,053,0	015.	1,8	39,757.	2	,001,	935.
2	Provide the estimated percentage of the cur					·	·			
	Board designated or quasi-endowment	.0000	%	(-))						
	Permanent endowment 100.0000	%								
	Term endowment									
Ŭ	The percentages on lines 2a, 2b, and 2c sho									
39	Are there endowment funds not in the posse	•	tion that are held	and administered	d for the	organiz	ation			
ou	by:	ssion of the organiza				organiz	ation	Γ	Yes	No
	-							3a(i)		X
	<i>c, c</i>									X
h	(ii) Related organizations If "Yes" on line 3a(ii), are the related organization	tions listed as requir	od on Schodulo P	 າ				3b		
4	Describe in Part XIII the intended uses of the			۰				30		
<u> </u>	t VI Land, Buildings, and Equipm		wittent funds.							
i ui	Complete if the organization answere		Part IV line 11a	See Form 990 P	Part X lin	ne 10				
		(a) Cost or ot	· · · · · · · · · · · · · · · · · · ·				4	(d) Dee	le volu	
	Description of property	basis (investm	. ,	st or other s (other)		umulate eciation	a	( <b>d)</b> Boo	k valu	е
	Land		Dasis		uepre	SolatiOIT				
	Land									
	Buildings				<u></u>	11 0'		0		76
	Leasehold improvements			96,510.		11,93			$\frac{4}{4}, \frac{5}{7}$	
	Equipment			91,491.		26,70			4,7	
-	Other			36,221.	84	48,10	13.		8,1	
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part )	X, column (B), line	10c.)					7,4	
						:	Schedule	D (Forn	n <b>990</b> )	2021

132052 10-28-21

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.         (a) Description of security or category (including mane of security)       (b) Book value       (c) Method of valuation: Cost or end-of-year market value         (a) TAXABLE BONDS       3, 410, 391.       END-OF-YEAR MARKET VALUE         (b)       (c)       (c)         (c)       (c)       (c)         (d)       (c)       (c)         (e)       (c)       (c)         (f)       (c)       (c)         (d)       (c)       (c)         (e)       (c)       (c)         (f)       (c)       (c)         (f)       (c)       (c)         (f)       (c)		THE UNITED STA	ATES	13-5642032 Page 3
(a) Description of Security or Caligory measure are area secure.       (b) Book value       (c) Method of valuation: Cost or and of year market value         (b) Thrancial derivatives       (c) Cockey hield equity interests       (c) Cockey hield equity interests       (c) Cockey hield equity interests         (a) Other       (c) Cockey hield equity interests       (c) Cockey hield equity interests       (c) Cockey hield equity interests         (b) Education       (c) Cockey hield equity interests       (c) Cockey hield equity interests       (c) Cockey hield equity interests         (c) Cockey hield equity interests       (c) Cockey hield equity interests       (c) Cockey hield equity interests       (c) Cockey hield equity interests         (b) Cockey hield equity interests       (c) Cockey hield equity interests       (c) Cockey hield equity interests       (c) Cockey hield equity interests         (c) Cockey hield equity interests       (c) Cockey hield equity interests       (c) Cockey hield equity interests       (c) Cockey hield equity interests         (c) Cockey hield equity interests       (c) Cockey hield equity interests       (c) Cockey hield equity interests       (c) Cockey hield equity interests         (d) Cockey hield equity interests       (c) Cockey hield equity interests       (c) Cockey hield equity interests       (c) Cockey hield equity interests         (d) Cockey hield equity interests       (c) Cockey hield equity interests       (c) Cockey hield equity interests <t< th=""><th>Part VII Investments - Other Securities.</th><th>on Form 000 Port IV line 1</th><th>1b Cas Form 000 Dart V line 10</th><th></th></t<>	Part VII Investments - Other Securities.	on Form 000 Port IV line 1	1b Cas Form 000 Dart V line 10	
(1) Financial derivatives				r end-of-vear market value
(2) Cosely held equity interests			(c) Method of Valdation. Cost o	r end-or-year market value
(3) Other       3,410,391.       END-OF-YEAR MARKET VALUE         (6) TAXABLE BONDS       3,410,391.       END-OF-YEAR MARKET VALUE         (7)       (7)       (7)       (7)         (8) Other Asset       (9) Book value       (9) Book value       (9) Book value         (9)       (9) Experiments - Program Related       (9) Book value       (9) Book value       (9) Book value         (1)       (9) Book value         (1)       (9) Book value       <				
(A)       TAXABLE BONDS       3,410,391.       END-OF-YEAR MARKET VALUE         (B)       (C)       (C)       (C)         (C)       (C)       (C)       (C)         (D)       (C)       (C)       (C)         (D)       (C)       (C)       (C)         (D)       (C)       (C)       (C)       (C)         (D)       (D)       (D)       (D)       (D)       (D)         (D)       (D)       (D)       (D)       (D)       (D)       (D)         (D)				
(B)       (C)         (C)       (C)         (B)       (C)         (B)       (C)         (B)       (C)         (B)       (C)         (G)		3,410,391.	END-OF-YEAR MARK	ET VALUE
(C)       (D)         (E)       (D)         (E)       (D)         (F)       (D)         (G)       (D)         (D)				
(D)       (B)         (B)       (C)         (C)				
(f)       (G)         (G)       (G)         (H)       (G)         (H)       (G)         (G)       (G)         (H)       (G)         (H)       (G)         (H)       (G)         (G)				
[0]       [0]         (H)       [1]         (Part VIII)       Investments - Program Related.         Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.         (a)       [b] Book value         (b)       [c] Method of valuation: Cost or end of year market value         (1)       [c]         (a)       [c]         (a)       [c]         (a)       [c]         (a)       [c]         (b)       [c]         (c)       [c]         (d)       [c]         (e)       [c]         (f)       [c]         (f)       [c]         (g)       [c]         (f)       [f]         (f)       [f]         [f]       [f]         [f]       [f]         [f]       [f]         [f]       [f]         [f] <td>(E)</td> <td></td> <td></td> <td></td>	(E)			
(h)         3,410,391.           Tetal. (Cot. (h) must equal form 990, Part X, col. (B) line 12.)         3,410,391.           (a) Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.         (e) Method of valuation: Cost or end-of-year market value           (a) Description of investment         (b) Book value         (e) Method of valuation: Cost or end-of-year market value           (f)         (f)         (f)         (f)           (g)         (f)         (f)         (f)	(F)			
Total: (cb. (b) must equal form 990, Part X, col. (B) line 12) b 3, 410, 391. Part VIII Investments - Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (a) (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method Sasts. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (c) DEPOSITS (c) Method Sasts. (c) DEPOSITS (c) Method Sasts. (c) DEPOSITS (c) Method Sasts. (c) Method Sas	(G)			
Part VIII       Investments - Program Related.         Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.         (a) Description of investment       (b) Book value         (1)       (c) Method of valuation: Cost or end of year market value         (2)       (c)         (3)       (c)         (4)       (c)         (5)       (c)         (6)       (c)         (7)       (c)         (a) Description       (b) Book value         (f) BENEFICIAL INTEREST IN PERPETUAL TRUST       1, 571, 792.         (2) DEPOSTRS       178, 787.         (4) DEFERRED COMPENSATION PLAN ASSETS       336, 184.         (6)       (c)         (7)       (c)         (6)       (c)         (7)       (c)         (6)       (c)         (7)       (c)	(H)			
Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.           (a) Description of investment         (b) Book value         (c) Method of valuation: Cost or end-of-year market value           (1)         (a)         (b) Book value         (c) Method of valuation: Cost or end-of-year market value           (2)         (a)         (c)         (c)         (c)           (3)         (c)         (c)         (c)         (c)           (4)         (c)         (c)         (c)         (c)           (6)         (c)         (c)         (c)         (c)           (7)         (c)         (c)         (c)         (c)           (9)         (c)         (c)         (c)         (c)           (10)         (c)         (c)         (c)         (c)           (a)         (c)         (c)         (c)         (c)           (b)         (c)         (c)         (c)         (c)         (c)           (c)         (c)         (c)         (c)         (c)         (c)         (c)           (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)           (c)         (c)         (c) </td <td>Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)</td> <td>3,410,391.</td> <td></td> <td></td>	Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	3,410,391.		
(a) Description of investment       (b) Book value       (c) Method of valuation: Cost or end-of-year market value         (1)       (a)       (b)         (2)       (c)       (c)         (3)       (c)       (c)         (4)       (c)       (c)         (6)       (c)       (c)         (7)       (c)       (c)         (6)       (c)       (c)         (7)       (c)       (c)         (9)       (c)       (c)         (1)       BENEFICIAL INTEREST IN PERPETUAL TRUST       (c)         (1)       DEFERRED COMPENSATION PLAN ASSETS       (c)         (3)       DEFERRED COMPENSATION PLAN ASSETS       (c)         (6)       (c)       (c)         (7)       (c)       (c)       (c)         (7)       (c)       (c)       (c)         (7)       (c)       (c)       (c)       (c)         (8)       (c)       (c)       (c)       (c)<				
(1)       (2)         (2)       (3)         (3)       (4)         (4)       (5)         (6)       (6)         (7)       (7)         (8)       (9)         (9)       (1)         (9)       (1)         (1)       (1)         (1)       (1)         (1)       (1)         (1)       (1)         (1)       (1)         (2)       (1)         (2)       (2)         (3)       (1)         (4)       (1)         (5)       (1)         (6)       (1)         (7)       (1)         (8)       (1)         (9)       (2)         (1)       (2)         (6)       (2)         (9)       (2)         (1)       (2)         (1)       (2)         (1)       (2)         (2)       DEFRRED REMET         (3)       (2)         (1)       (2)         (2)       DEFERRED REMET         (2)       DEFERRED REMET         (2)       DEFERRED REMET     <				r and of year market yelve
(2)       (3)         (4)       (4)         (5)       (5)         (6)       (7)         (7)       (7)         (8)       (9)         (9)       (10)         (11)       (12)         (12)       (12)         (13)       (14)         (14)       (15)         (15)       (16)         (16)       (17)         (17)       (16)         (18)       (17)         (19)       (17)         (11)       (16)         (12)       DEPOSITS         (14)       (17)         (15)       (17)         (16)       (17)         (17)       (17)         (16)       (17)         (17)       (17)         (18)       (19)         (19)       (11)         (11)       Federal form 990, Part X, col. (10) line 15.)         (12)       DEPERRED COMPENSATION         (13)       Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         (11)       Federal form 990, Part X, col. (11) line 15.)       (11) Federal form 990, Part X, col. (11) line 15.		(D) BOOK value	(C) Method of Valuation: Cost o	r end-oi-year market value
(9)       (1)         (6)       (2)         (7)       (3)         (8)       (3)         (9)       (4)         (9)       (3)         (1)       (4)         (1)       (4)         (1)       (5)         (1)       (6)         (1)       (1)         (2)       DEPCSITS         (3)       (4)         (4)       (5)         (5)       (4)         (1)       BENEFICIAL INTEREST IN PERPETUAL TRUST         (1)       BENEFRED COMPENSATION PLAN ASSETS         (3)       DEFORM RELATED PARTIES         (4)       (5)         (7)       (6)         (7)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       2, 127, 817.         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1)       Federal income taxes         (2)       DEFERRED RENT         (2)       DEFERRED RENT         (3)       DEFERRED COMPENSATION         (4)       (5)				
(4)       (5)         (6)       (7)         (7)       (8)         (9)       (9)         Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶       (9)         Part X       Other Assets.         (9)       (9)         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.         (1) BENEFICIAL INTEREST IN PERPETUAL TRUST       1, 571, 792.         (2) DEPOSITS       41, 054.         (3) DUE FROM RELATED PARTIES       178, 787.         (4) DEFERRED COMPENSATION PLAN ASSETS       336, 184.         (6)       (6)         (7)       (9)         (9)       (9)         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         (9)       (9)         (1) Federal income taxes       (1)         (2) DEFERRED RENT       275, 779.         (3) DEFERRED COMPENSATION       336, 184.         (4)       (6)         (7)       (9)         (1) Federal income taxes       (1)         (2) DEFERRED RENT       275, 779.         (3) DEFERRED COMPENSATION       336, 184.         (6)       (6)       (7)				
(6)       (7)         (8)       (9)         (9)       (10) must equal Form 990, Part X, col. (8) line 13.) ►         Part IX       Other Assets.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.         (1)       BENEFICIAL INTEREST IN PERPETUAL TRUST         (1)       BENEFICIAL INTEREST IN PERPETUAL TRUST         (2)       DEPOSITS         (3)       DUE FROM RELATED PARTIES         (4)       DEFERRED COMPENSATION PLAN ASSETS         (5)       (3)         (6)       (7)         (7)       (8)         (9)       (9)         (1)       Federal income taxes         (2)       DEFERRED RENT         (2)       DEFERRED RENT         (2)       DEFERRED RENT         (3)       DEFERRED RENT         (4)       (b) Book value         (1)       Federal income taxes         (2)       DEFERRED RENT         (3)       DEFERRED COMPENSATION         (4)       (b) Book value         (5)       (c)         (6)       (c)         (7)       (3) DEFERRED RENT         (4)       (5)       (6)      <				
(6)       (7)         (8)       (8)         (9)       (9)         Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶       (b) Book value         (a) Description       (b) Book value         (1) BENEFICIAL INTEREST IN PERPETUAL TRUST       1, 571, 792.         (2) DEPOSITS       41, 054.         (3) DUE FROM RELATED PARTIES       178, 787.         (4) DEFERRED COMPENSATION PLAN ASSETS       336, 184.         (6)       (7)         (7)       (8)         (9)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       > 2, 127, 817.         Part X       Other Liabilities.       2, 127, 817.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.       1.         (a) Description of liability       (b) Book value       (b) Book value         (1) Federal income taxes       275, 779.       3 36, 184.         (2) DEFERRED RENT       275, 779.       (3) DEFERRED COMPENSATION       336, 184.         (4)       (6)       (7)       (7)       (8)         (9)       (9)       (9)       (1, 963.       (6)       (7)         (8)       (9)       (9)       (1, 963.				
(7)       (8)         (9)       (9)         Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►       (a) Description         (a) Description       (b) Book value         (1) BENEFICIAL INTEREST IN PERPETUAL TRUST       1, 571, 792.         (a) DEFROM RELATED PARTIES       41, 054.         (b) EFROM RELATED PARTIES       178, 787.         (c) DEFERRED COMPENSATION PLAN ASSETS       336, 184.         (6)       (7)         (7)       (a) Description of liability         (b) Book value       (c)         (7)       (b) Efrement answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         (7)       (b) Encore taxes         (7)       (c) Description of liability         (9)       (b) Book value         (1) Federal income taxes       2, 127, 817.         (a) Description of liability       (b) Book value         (1) Federal income taxes       275, 7779.         (2) DEFERRED RENT       275, 779.         (3) DEFERRED COMPENSATION       336, 184.         (6)       (c)         (7)       (d)         (6)       (f)         (7)       (g) DESCRED RENT         (g) DEFERRED RENT       275, 779.				
(8)       (9)         (9)       Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►         Part IX       Other Assets.         (a) Description       (b) Book value         (1)       BENEFICIAL INTEREST IN PERPETUAL TRUST       1, 571, 792.         (2)       DEPOSITS       41, 054.         (3)       DUE FROM RELATED PARTIES       178, 787.         (4)       DEFERRED COMPENSATION PLAN ASSETS       336, 184.         (6)       (7)       (8)         (9)       (9)       2, 127, 817.         Part X       Other Liabilities.       2, 127, 817.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.       1.         (a)       Description of liability       (b) Book value         (1)       Federal income taxes       275, 779.         (2)       DEFERRED COMPENSATION       336, 184.         (4)       (6)       (7)         (3)       DEFERRED RENT       275, 779.         (3)       DEFERRED COMPENSATION       336, 184.         (4)       (5)       (6)         (7)       (9)       EFERRED COMPENSATION       336, 184.         (6)       (7)       (7)       (7)				
(9)         Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶         Part IX       Other Assets.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.         (a) Description       (b) Book value         (1) BENEFICIAL INTEREST IN PERPETUAL TRUST       1, 571, 792.         (2) DEPOSITS       41, 054.         (3) DUE FROM RELATED PARTIES       178, 787.         (4) DEFERRED COMPENSATION PLAN ASSETS       336, 184.         (5)       (6)         (7)       (8)         (9)       2, 127, 817.         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         (a) Description of liability       (b) Book value         (1) Federal income taxes       275, 779.         (3) DEFERRED RENT       275, 779.         (3) DEFERRED COMPENSATION       336, 184.         (4)       (6)         (6)       (7)         (7)       (8)         (8)       (9)         (9) DEFERRED RENT       275, 779.         (3) DEFERRED RENT       (1, 96, 779.         (3) DEFERRED COMPENSATION       336, 184.         (6)				
Part IX       Other Assets.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.       (b) Book value         (1)       BENEFICIAL INTEREST IN PERPETUAL TRUST       1, 571, 792.         (2)       DEPOSITS       41,054.         (3)       DUE FROM RELATED PARTIES       178,787.         (4)       DEFERRED COMPENSATION PLAN ASSETS       336,184.         (5)       (6)       (7)         (8)       (9)       7         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       2,127,817.         Part X       Other Liabilities.       2,127,817.         (1)       Federal income taxes       (b) Book value         (2)       DEFERRED RENT       275,779.         (3)       DEFERRED COMPENSATION       336,184.         (4)       (5)       (6)         (7)       (3) DEFERRED RENT       275,779.         (3) DEFERRED COMPENSATION       336,184.         (4)       (5)       (6)         (7)       (7)       (8)         (9)       Complete form 990, Part X, col. (B) line 25.)       611,963.         (6)       (7)       (7)       (7)         (6)       (7)       (7)				
Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.       (b) Book value         (1) BENEFICIAL INTEREST IN PERPETUAL TRUST       1, 571, 792.         (2) DEPOSITS       411, 054.         (3) DUE FROM RELATED PARTIES       178, 787.         (4) DEFERRED COMPENSATION PLAN ASSETS       336, 184.         (5)       (6)         (7)       (8)         (9)       2, 127, 817.         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1       (a) Description of liability         (b) Book value       (b) Book value         (1) Federal income taxes       275, 779.         (3) DEFERRED RENT       275, 779.         (3) DEFERRED COMPENSATION       336, 184.         (4)       (6)         (7)       (7)         (8)       (9)         (9)       0         (10) EFERRED RENT       275, 779.         (3) DEFERRED RENT       275, 779.         (3) DEFERRED COMPENSATION       336, 184.         (4)       (6)         (7)       (7)         (8)       (6)         (9)       0	Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
(a) Description       (b) Book value         (1) BENEFICIAL INTEREST IN PERPETUAL TRUST       1,571,792.         (2) DEPOSITS       41,054.         (3) DUE FROM RELATED PARTIES       178,787.         (4) DEFERRED COMPENSATION PLAN ASSETS       336,184.         (5)       (6)         (7)       (8)         (9)       2,127,817.         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       2,127,817.         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.       (b) Book value         (1) Federal income taxes       (b) Book value       (c) Book value         (1) Federal income taxes       275,779.       (3) DEFERRED RENT       275,779.         (3) DEFERRED COMPENSATION       336,184.       (4)       (5)       (6)         (7)       (6)       (7)       (6)       (7)         (8)       (9)       (7)       (6)       (7)         (8)       (9)       (7)       (6)       (7)         (6)       (7)       (6)       (7)       (6)         (9)       (7)       (6)       (7)       (6)         (9)       (7)       (6)	Part IX Other Assets.			
(1) BENEFICIAL INTEREST IN PERPETUAL TRUST       1,571,792.         (2) DEPOSITS       41,054.         (3) DUE FROM RELATED PARTIES       178,787.         (4) DEFERRED COMPENSATION PLAN ASSETS       336,184.         (5)       (6)         (7)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       > 2,127,817.         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value       (b) Book value         (1) Federal income taxes       (b) Book value         (2) DEFERRED RENT       275,779.         (3) DEFERRED COMPENSATION       336,184.         (4)       (5)         (6)       (7)         (7)       (8)         (9)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       611,963.         2       Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	-		1d. See Form 990, Part X, line 15.	
(2) DEPOSITS       41,054.         (3) DUE FROM RELATED PARTIES       178,787.         (4) DEFERRED COMPENSATION PLAN ASSETS       336,184.         (5)       (6)         (7)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       2,127,817.         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.       (b) Book value         (1) Federal income taxes       275,779.         (2) DEFERRED RENT       275,779.         (3) DEFERRED COMPENSATION       336,184.         (4)       (5)         (6)       (7)         (7)       (8)         (9)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       611,963.         2       Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	.,			
(3) DUE FROM RELATED PARTIES       178,787.         (4) DEFERRED COMPENSATION PLAN ASSETS       336,184.         (5)       (6)         (6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       > 2,127,817.         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value       (b) Book value         (1) Federal income taxes       275,779.         (2) DEFERRED RENT       275,779.         (3) DEFERRED RENT       336,184.         (4)       (5)         (6)       (7)         (7)       (3) DEFERRED COMPENSATION         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       611,963.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the		RPETUAL TRUST		
(4) DEFERRED COMPENSATION PLAN ASSETS       336,184.         (5)       (6)         (7)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       2,127,817.         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.       (b) Book value         (1) Federal income taxes       (b) Expert ED         (2) DEFERRED RENT       275,779.         (3) DEFERRED RENT       275,779.         (3) DEFERRED COMPENSATION       336,184.         (4)       (5)         (6)       (7)         (7)       (8)         (9)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       611,963.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	N=/			
(5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)         Part X         Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (1) Federal income taxes         (2) DEFERRED RENT         (3) DEFERRED COMPENSATION         (4)         (5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         611, 963.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the				
(6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       > 2,127,817.         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.       1.         (a) Description of liability       (b) Book value         (1) Federal income taxes       275,779.         (3) DEFERRED RENT       275,779.         (3) DEFERRED COMPENSATION       336,184.         (4)       (6)         (5)       (6)         (7)       (8)         (9)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       611,963.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the		N ASSETS		330,184.
(7)       (8)         (9)       2,127,817.         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (1)       Federal income taxes         (2)       DEFERRED RENT         (3)       DEFERRED COMPENSATION         (4)       (5)         (6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       611, 963.         2.       Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the				
(8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       2,127,817.         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.       (b) Book value         (1) Federal income taxes       (b) Book value         (2) DEFERRED RENT       275,779.         (3) DEFERRED COMPENSATION       336,184.         (4)       (5)         (6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       611,963.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the				
(9)       Interview of the second seco				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       ▶ 2,127,817.         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (1) Federal income taxes       (b) Book value         (2) DEFERRED RENT       275,779.         (3) DEFERRED COMPENSATION       336,184.         (4)       (5)         (6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       611,963.         2.       Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the				
Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (1)       Federal income taxes         (2)       DEFERRED         (3)       DEFERRED         (4)       336, 184.         (5)       (6)         (7)       (8)         (9)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       (b) line 25.)         2.       Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the		e 15.)		▶ 2,127,817.
1.       (a) Description of liability       (b) Book value         (1) Federal income taxes       275,779.         (2) DEFERRED RENT       275,779.         (3) DEFERRED COMPENSATION       336,184.         (4)       (5)         (6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       611,963.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the		/		
(1) Federal income taxes       275,779.         (2) DEFERRED RENT       275,779.         (3) DEFERRED COMPENSATION       336,184.         (4)       (5)         (5)       (6)         (7)       (8)         (9)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       611,963.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, lir	ne 25.
(2) DEFERRED RENT       275,779.         (3) DEFERRED COMPENSATION       336,184.         (4)       (5)         (6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       611,963.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	1. (a) Description of liability			(b) Book value
(3) DEFERRED COMPENSATION       336,184.         (4)       (5)         (5)       (6)         (7)       (8)         (9)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       611,963.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(1) Federal income taxes			
(4)         (5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(-)			
(5)       (6)         (7)       (8)         (9)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       ▶ 611, 963.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(3) DEFERRED COMPENSATION			336,184.
(6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(4)			
(7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the				
(8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       ▶ 611,963.         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the				
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the				
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the		25)		611 062
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Schedule D (Form 990) 2021

132053 10-28-21

Sche	edule D (Form 990) 2021 THE ARC OF THE UNITED STATES	3		13-	5642032 Page	4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statement	ts Wi	th Revenue per R			_
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total revenue, gains, and other support per audited financial statements			1	20,687,024	•
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					_
а	Net unrealized gains (losses) on investments	2a	1,572,237.			
b	Donated services and use of facilities	2b	7,740,096.			
с		2c				
d		2d				
е	Add lines <b>2a</b> through <b>2d</b>			2e	9,312,333	
3	Subtract line <b>2e</b> from line <b>1</b>			3	11,374,691	•
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	27,250.			
b	Other (Describe in Part XIII.)	4b				
с	Add lines <b>4a</b> and <b>4b</b>			4c	27,250	
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12.)			5	11,401,941	
						÷
Pa	rt XII Reconciliation of Expenses per Audited Financial Statemen			Retu	irn.	Ē
Pa	Reconciliation of Expenses per Audited Financial Statemen           Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	nts W	ith Expenses per			
Pa 1	rt XII Reconciliation of Expenses per Audited Financial Statemen	nts W	ith Expenses per	Retu	ırn. 18,139,217	
	rt XII       Reconciliation of Expenses per Audited Financial Statemen         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:	nts W	fith Expenses per	1		
1	rt XII       Reconciliation of Expenses per Audited Financial Statemen         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:	nts W	ith Expenses per	1		
1 2	rt XII       Reconciliation of Expenses per Audited Financial Statemen         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities	nts W	fith Expenses per	1		
1 2 a	rt XII       Reconciliation of Expenses per Audited Financial Statement         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses	2a	fith Expenses per	1		
1 2 b c d	rt XII       Reconciliation of Expenses per Audited Financial Statement         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a 2b 2c 2d	7 , 740 , 096 .	1	18,139,217	
1 2 b c d	rt XII       Reconciliation of Expenses per Audited Financial Statement         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other losses         Other losses through 2d	2a 2b 2c 2d	7 , 740 , 096 .	1 2e	18,139,217 7,740,096	<u>.</u>
1 2 b c d	rt XII       Reconciliation of Expenses per Audited Financial Statement         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a 2b 2c 2d	7 , 740 , 096 .	1	18,139,217	<u>.</u>
1 2 b c d e	rt XII       Reconciliation of Expenses per Audited Financial Statement         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other losses         Other losses through 2d	2a 2b 2c 2d	7,740,096.	1 2e	18,139,217 7,740,096	<u>.</u>
1 2 b c d 3	rt XII       Reconciliation of Expenses per Audited Financial Statement         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 4a	7 , 740 , 096 .	1 2e	18,139,217 7,740,096	<u>.</u>
1 2 3 4	rt XII       Reconciliation of Expenses per Audited Financial Statemen         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	7,740,096.	1 2e	18,139,217 7,740,096 10,399,121	· ·
1 2 3 4	rt XII       Reconciliation of Expenses per Audited Financial Statement         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)         Add lines 4a and 4b	2a 2b 2c 2d 4a 4b	7,740,096.	1 2e 3 4c	18,139,217 7,740,096 10,399,121 27,250	· · ·
1 2 d e 3 4 b c 5	rt XII       Reconciliation of Expenses per Audited Financial Statement         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	7,740,096.	1 2e 3	18,139,217 7,740,096 10,399,121	· · ·

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

### PART V, LINE 4:

### GENERAL SUPPORT AND VARIOUS SPECIFIC PROJECT PURPOSES.

PART X, LINE 2:

FOR THE YEAR ENDED DECEMBER 31, 2021, THE ORGANIZATIONS HAVE DOCUMENTED

THEIR CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES

GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES AND HAVE DETERMINED

THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR

33

### DISCLOSURE IN THE CONSOLIDATED FINANCIAL STATEMENTS.

132054 10-28-21

21031111 745960 01813

Part XIII Supplemental Information	<b>n</b> (continued)								
22055 10.28 21								Schedule [	D (Form 990)
32055 10-28-21	2021	04001	34	300		ביוח	TINT	0,000,000	01017
31111 745960 01813	2021	.04021	THE	ARC	OF.	THE	UNITED	STATE	υτατς

SCHEDULE I (Form 990)	Go	Grants and Oth overnments, ar	nd Individual	ls in the Ŭni	ted States		омв №. 1545-0047 <b>2021</b>
Department of the Treasury Internal Revenue Service	Comp	_	Attach to Formers.gov/Form990 fo	m 990.			Open to Public Inspection
Name of the organization THE ARC C	F THE UNI	ITED STATES					Employer identification number $13-5642032$
Part I General Information on Grants a	Ind Assistance						
<ol> <li>Does the organization maintain records criteria used to award the grants or assi</li> <li>Describe in Part IV the organization's privation</li> </ol>	stance?	itoring the use of grant	t funds in the United	d States.			X Yes No
Part II Grants and Other Assistance to recipient that received more than	-				anization answered "	Yes" on Form 990, Par	t IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
THE ARC TENNESSEE 545 MAINSTREAM DRIVE SUITE 100 NASHVILLE, TN 37228	62-0639154	501(C)(3)	40,000.	0.			MLK DAY SERVICE / SEPTEMBER 11TH DAY OF SERVICE / INCLUSIVE VOLUNTEERING
THE ARC NATURE COAST 5283 NEFF LAKE ROAD BROOKSVILLE, FL 34601	23-7305830	501(C)(3)	35,000.	0.			MLK DAY SERVICE / SEPTEMBER 11TH DAY OF SERVICE
THE ARC OF OKLAHOMA 2516 E 71ST ST STE A TULSA, OK 74136	73-0749376	501(C)(3)	30,000.	0.			CHAPTER FEDERAL POLICY / MLK DAY SERVICE / COVID 19 EMERGENCY ASSISTANCE
AHRC - NEW YORK CITY 83 MAIDEN LANE 9TH FLOOR NEW YORK, NY 10038	13-5596746	501(C)(3)	27,500.	0.			MLK DAY SERVICE
RIDGE AREA ARC 4352 INDEPENDENCE ST AVON PARK, FL 33825	59-0829984	501(C)(3)	18,750.	0.			MLK DAY SERVICE / SEPTEMBER 11TH DAY OF SERVICE
NEWSTAR SERVICE 1005 WEST END AVENUE CHICAGO HEIGHTS, IL 60411	23-7294685		17,500.	0.			TECH PROGRAM GRANT
2 Enter total number of section 501(c)(3) a	•	•	ne line 1 table				40.
3 Enter total number of other organization LHA For Paperwork Reduction Act Notice							

## Schedule I (Form 990) THE ARC OF THE UNITED STATES Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
THE ARC LANE COUNTY							
4181 E STREET							
SPRINGFIELD, OR 97478	93-0423965	501(C)(3)	17,500.	0.			TECH PROGRAM GRANT
THE ARC OF GREATER INDIANAPOLIS							
7701 E. 21ST STREET							
INDIANAPOLIS, IN 46219	35-0924720	501(C)(3)	17,500.	0.			TECH PROGRAM GRANT
				- •			
THE ARC OF WELD COUNTY							
5312 WEST 9TH STREET DRIVE SUITE 1	\$						
GREELEY, CO 80634	84-1222223	501(C)(3)	17,500.	0.			TECH PROGRAM GRANT
THE ARC OF UNION COUNTY							
70 DIAMOND RD							
SPRINGFIELD, NJ 07081	22-1686764	501(C)(3)	17,500.	0.			TECH PROGRAM GRANT
THE ADD OF CONTRACT NADAR AND							
THE ARC OF SOUTHERN MARYLAND 355 W DARES BEACH RD							
PRINCE FREDERICK, MD 20678	52-1062351	501(C)(3)	17,500.	0.			TECH PROGRAM GRANT
TRINCE FREDERICK, MD 20070	52 1002551	501(0)(3)	17,500.	••			
STAR INC.							
182 WOLFPIT AVE							
NORWALK, CT 06851	06-0726489	501(C)(3)	17,500.	0.			MLK DAY SERVICE
YOUTH IMPACT							
3000 FORT BLVD							
EL PASO, TX 79930	38-3939967	501(C)(3)	17,500.	0.			MLK DAY SERVICE
GREATER SUSQUEHANNA VALLEY UNITED							
WAY - 228 ARCH ST - SUNBURY, PA				_			SEPTEMBER 11TH DAY OF
17801	23-1697631	501(C)(3)	15,000.	0.			SERVICE
THE ARC OF PALM BEACH COUNTY							
1201 AUSTRALIAN AVE							SEPTEMBER 11TH DAY OF
RIVIERA BEACH, FL 33404	59-0883386	501(C)(3)	15,000.	0.			SERVICE

### 13-5642032 F

Page 1

#### THE ARC OF THE UNITED STATES Schedule I (Form 990) Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE ARC OF WEST VIRGINIA 1917 DUDLEY AVE PARKERSBURG, VA 26101	55-0451401	501(C)(3)	15,000.	0.			CHAPTER FEDERAL POLICY / COVID 19 EMERGENCY ASSISTANCE
THE ARC OF THE US MISSOURI CHAPTER 2501 MAGUIRE BLVD. COLUMBIA, MO 65201	80-0078835	501(C)(3)	14,792.	0.			CHAPTER FINANCIAL SUPPORT
THE ARC OF SOUTH CAROLINA 1202 12TH STREET CAYCE, SC 29033	57-0422304	501(C)(3)	12,500.	0.			CHAPTER FEDERAL POLICY / MLK DAY SERVICE
THE ARC OF HARRISONBURG AND ROCKINGHAM - 620 SIMMS AVE - HARRISONBURG, VA 22802	54-0995095	501(C)(3)	12,500.	0.			MLK DAY SERVICE
THE ARC MUSKEGON 601 TERRACE STREET SUITE 101 MUSKEGON, MI 49440	38-1586705	501(C)(3)	12,500.	0.			MLK DAY SERVICE / INCLUSIVE VOLUNTEERING
ATHLETES FOR HOPE 2 BETHESDA METRO SUITE 1320 BETHESDA, MD 20814	20-4773044	501(C)(3)	10,000.	0.			SEPTEMBER 11TH DAY OF SERVICE
THE ARC OF THE CENTRAL CHESAPEAKE REGION, INC 1332 DONALD AVE - SEVERN, MD 21144	52-6047882	501(C)(3)	10,000.	0.			SEPTEMBER 11TH DAY OF SERVICE
THE ARC OF VIRGINIA 2147 STAPLES MILL ROAD RICHMOND, VA 23230	54-0652554	501(C)(3)	10,000.	0.			CHAPTER FEDERAL POLICY
THE ARC ANCHORAGE 2211 ARCA DRIVE ANCHORAGE, AK 99508	92-0028571	501(C)(3)	10,000.	0.			CHAPTER FEDERAL POLICY

13-5642032

#### THE ARC OF THE UNITED STATES Schedule I (Form 990) Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
THE ARC OF THE QUAD CITIES AREA 4016 NINTH STREET	26 2615006	E01(0)(2)	10,000	0			W K DAY GEDUIGE
ROCK ISLAND, IL 61201	36-2615996	501(C)(3)	10,000.	0.			MLK DAY SERVICE
THE ARC WESTCHESTER 265 SAW MILL RIVER ROAD							
HAWTHORNE, NY 10532	13-1740065	501(C)(3)	10,000.	0.			INCLUSIVE VOLUNTEERING
CASS COMMUNITY SOCIAL SERVICES 3745 CASS AVE							
DETROIT, MI 48201	38-3429921	501(C)(3)	10,000.	0.			MLK DAY SERVICE
THE ARC NEW YORK 29 BRITISH AMERICAN BLVD, 2ND FLOOP LATHAM, NY 12110		501(C)(3)	7,500.	0.			COVID 19 EMERGENCY ASSISTANCE
THE ARC OF WASHINGTON STATE 2638 STATE AVENUE NE OLYMPIA, WA 98506	91-0747027	501(C)(3)	7,500.	0.			COVID 19 EMERGENCY ASSISTANCE
THE ARC OF TEXAS 8001 CENTRE PARK DRIVE, SUITE 100 AUSTIN, TX 78754	74-1342667	501(C)(3)	7,500.	0.			COVID 19 EMERGENCY ASSISTANCE
THE ARC OF MINNESOTA 2446 UNIVERSITY AVE W STE 110 ST PAUL, MN 55114	41-0795254	501(C)(3)	7,500.	0.			COVID 19 EMERGENCY ASSISTANCE
THE ARC OF INDIANA 143 W MARKET ST #200 INDIANAPOLIS, IN 46204	35-1075886	501(C)(3)	7,500.	0.			COVID 19 EMERGENCY ASSISTANCE
THE ARC OF NEBRASKA 215 CENTENNIAL MALL S STE 508 LINCOLN, NE 68508	47-0495350	501(C)(3)	7,500.	0.			COVID 19 EMERGENCY ASSISTANCE

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Schedule I (Form 990)

13-5642032

Page 1

# Schedule I (Form 990) THE ARC OF THE UNITED STATES Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
THE ARC OF MASSACHUSETTS 217 SOUTH ST WALTHAM, MA 02453	04-2223502	501(C)(3)	7,500.	0.			COVID 19 EMERGENCY ASSISTANCE
THE ARC OF MARYLAND 8601 ROBERT FULTON DR #140 COLUMBIA, MD 21046	52-0741602	501(C)(3)	7,500.	0.			COVID 19 EMERGENCY ASSISTANCE
THE ARC OF ALABAMA 557 S LAWRENCE STREET MONTGOMERY, AL 36104	63-0483374	501(C)(3)	7,500.	0.			COVID 19 EMERGENCY ASSISTANCE
THE ARC OF NORTH CAROLINA 353 EAST SIX FORKS RD SUITE 300 RALEIGH, NC 27609	56-0753097	501(C)(3)	6,500.	0.			COVID 19 EMERGENCY ASSISTANCE
THE ARC OF IOWA 114 S. 11TH STREET WEST DES MOINES, IA 50265	42-0820385	501(C)(3)	6,000.	0.			COVID 19 EMERGENCY ASSISTANCE
THE ARC SUNRISE OF CENTRAL FLORIDA 35201 RADIO RD LEESBURG, FL 34788	59-1930274	501(C)(3)	5,500.	0.			CHAPTER FINANCIAL SUPPORT
THE ARC OF KENTUCKY INC 706 E MAIN ST A FRANKFORT, KY 40601	61-0593311	501(C)(3)	5,400.	0.			CHAPTER FINANCIAL SUPPORT

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Schedule I (Form 990)

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Schedule I (Form 990) 2021

THE ARC OF THE UNITED STATES

13-5642032

Page 2

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

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

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

PART I, LINE 2:

THE ARC HAS A STANDARD WRITTEN GRANT AGREEMENT. THE GRANT AGREEMENT

INCORPORATES, BY REFERENCE, THE TERMS OF THE GRANT PROPOSAL AND GRANT

BUDGET AND REQUIRES GRANTEES TO PROVIDE PROJECT NARRATIVE AND EXPENDITURE

**REPORTS ANNUALLY.** 

sc	HEDULE J	Compensation Information	I	OMB No.	1545-00	47	
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest	F	20	21		
		Compensated Employees		ΖU		1	
Dena	tment of the Treasury	<ul> <li>Complete if the organization answered "Yes" on Form 990, Part IV, line 23.</li> <li>Attach to Form 990.</li> </ul>		Open to Public			
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe			
Nan	ne of the organizatio		Employer i			mber	
_		THE ARC OF THE UNITED STATES	13-5	564203	2		
Pa	rt I Question	s Regarding Compensation					
					Yes	No	
1a		iate box(es) if the organization provided any of the following to or for a person listed on Form	1 990,				
		line 1a. Complete Part III to provide any relevant information regarding these items.					
	First-class or o	, jaka setter set					
	Travel for com						
		cation and gross-up payments					
		spending account Personal services (such as maid, chauffe	ur, chef)				
	If any of the house						
D	•	on line 1a are checked, did the organization follow a written policy regarding payment or		41-			
•		provision of all of the expenses described above? If "No," complete Part III to explain		1b			
2	•	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,		2			
	trustees, and onice	ers, including the CEO/Executive Director, regarding the items checked on line 1a?		2			
3	Indicate which if a	ny, of the following the organization used to establish the compensation of the organization'	· c				
5		ector. Check all that apply. Do not check any boxes for methods used by a related organization					
		ation of the CEO/Executive Director, but explain in Part III.					
	Compensation						
		compensation consultant $X$ Compensation survey or study					
	X Form 990 of o		committee				
			Johnmittee				
4	4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing						
	organization or a re						
а				4a		X	
b		ceive payment from a supplemental nonqualified retirement plan?				Х	
с	c Participate in or receive payment from an equity-based compensation arrangement?					Х	
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.							
	Only section 501(	c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on				
	contingent on the r						
а	The organization?			5a		X	
		ation?				X	
		or 5b, describe in Part III.					
6	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on				
	contingent on the r	net earnings of:					
а						X	
b		ation?				X	
		or 6b, describe in Part III.					
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment					
		nes 5 and 6? If "Yes," describe in Part III		7	Х		
8	Were any amounts	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to	the				
	initial contract exce	ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X	
9		id the organization also follow the rebuttable presumption procedure described in					
		n 53.4958-6(c)?					
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Sched	dule J (Forr	n 990)	) 2021	

132111 11-02-21

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

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

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

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) PETER BERNS	(i)	491,955.	51,688.	0.	53,823.	27,993.	625,459.	0.
CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) RUBEN RODRIGUEZ	(i)	211,100.	4,368.	0.	19,640.	9,753.	244,861.	0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JULIE WARD	(i)	188,323.	7,696.	0.	17,648.	2,374.	216,041.	0.
SR. EXEC. OFF., PUBLIC POLICY	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KRISTEN MCKIERNAN	(i)	141,995.	10,516.	0.	13,988.	14,463.	180,962.	0.
SR. EXEC. OFF. MKTG & COMMUNICATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MATTHEW BOYER	(i)	149,148.	0.	0.	12,469.	7,100.	168,717.	0.
SR. DIR., CORP. & FDN PARTNERSHIPS	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) MARTY FORD	(i)	137,956.	0.	0.	13,265.	11,445.	162,666.	0.
SENIOR ADVISOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) GLENN GRIFFIN	(i)	128,917.	5,200.	0.	12,071.	8,348.	154,536.	0.
SR. DIR., DIG. MKTG & ENGAGEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) NICOLE JORWIC	(i)	134,560.	0.	0.	12,106.	4,834.	151,500.	0.
SR. EXEC. OFF., STATE ADVOCACY	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

#### PART I, LINE 7:

THE CEO EARNED BONUSES UNDER THE TERMS OF A WRITTEN BONUS PLAN THAT

INCLUDES QUANTITATIVE GOALS THAT ARE BASED, IN PART, ON ACHIEVING INCREASES

IN CERTAIN TYPES OF REVENUE. THIS AMOUNT HAS BEEN REFLECTED IN PART II,

COLUMN B(II).

SEE PART II FOR BONUSES

Schedule J (Form 990) 2021

#### **SCHEDULE M** (Form 990)

### **Noncash Contributions**

OMB No. 1545-0047

ZI Z

**Open to Public** 

Inspection

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Department of the Treasury	
Internal Revenue Service	

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

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

#### Name of the organization

Employer	identification number
1	3-5642032

	THE ARC OF T	'HE UNI	TED STATE	S	13-5	642	032	
Pai	rt I Types of Property							
		<b>(a)</b> 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 de noncash contribu		•	S
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods			<b></b>				
6	Cars and other vehicles	X	41	70,042.	GROSS SALES	RE	CEI	PT
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 ► ()							
26	Other ()							
27	Other ()							
28	Other  ()							
29	Number of Forms 8283 received by the organi for which the organization completed Form 82							
							Yes	No
30a	During the year, did the organization receive b	y contributio	on any property re	ported in Part I, lines 1 throu	gh 28, that it			
	must hold for at least three years from the dat							
	exempt purposes for the entire holding period	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance					31	Х	
32a	Does the organization hire or use third parties	or related or	ganizations to soli	icit, process, or sell noncash				
	contributions?					32a	х	
	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	column (c) fo	r a type of propert	y for which column (a) is che	cked,			
	describe in Part II.			-				
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	ю.	Schedule N	/I (Forr	n 990)	) 2021

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

SCHEDULE M, PART I, COLUMN (B):

THE AMOUNT IN COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS.

SCHEDULE M, LINE 32B:

THE ARC USES A 3RD PARTY FOR THE CAR DONATION PROGRAM. THIS COMPANY

HANDLES ALL COMMUNICATIONS, MAINTAINS THE DATA AND FILES FORM 1098-C AS

NEEDED.

Schedule M (Form 990) 2021

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SCHEDULE O

Department of the Treasury

Internal Revenue Service Name of the organization

(Form 990)

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.

ao to www.irs.gov/Form990 for the latest mormation.

Employer identification number 13-5642032

OMB No. 1545-0047

**Open to Public** 

Inspection

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

THE ARC OF THE UNITED STATES

(I/DD) AND ACTIVELY SUPPORTS THEIR FULL INCLUSION AND PARTICIPATION IN

THE COMMUNITY THROUGHOUT THEIR LIFETIMES.

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

AND ADVOCACY ACTIVITIES CUT ACROSS A BROAD RANGE OF TOPICS, SUCH AS

HEALTH CARE, EDUCATION, EMPLOYMENT, CIVIL RIGHTS, CRIMINAL JUSTICE,

HOUSING, THE COVID-19 PANDEMIC, AND MORE.

THE ARC ALSO REGULARLY EDUCATED AND INFORMED ELECTED AND APPOINTED

GOVERNMENT OFFICIALS ABOUT THE NEEDS, INTERESTS AND CONCERNS OF PEOPLE

WITH IDD AND THEIR FAMILIES AND ABOUT THE LIKELY IMPACT OF POLICY

PROPOSALS. INPUT WAS PROVIDED TO CONGRESS, THE ADMINISTRATION,

GOVERNMENT AGENCIES AND OFFICIALS THROUGH WRITTEN CORRESPONDENCE, ORAL

AND WRITTEN TESTIMONY AND FACE-TO-FACE AND VIRTUAL MEETINGS. THE ARC

ALSO PARTICIPATED IN, AND PROVIDED LEADERSHIP FOR, A NUMBER OF FORMAL

AND INFORMAL COALITIONS AND COLLABORATIONS INVOLVED IN RELATED EFFORTS.

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

THE ARC ALSO PROMOTED BEST PRACTICES IN PROGRAMS, SERVICES AND SUPPORTS FOR PEOPLE WITH IDD. THE ARC KEPT CHAPTERS INFORMED OF CRITICAL INFORMATION AND DEVELOPMENTS IN THE FIELD, INCLUDING IN SUBJECT AREAS SUCH AS EARLY INTERVENTION, INTEGRATED EDUCATION, TRANSITION, SUPPORTED EMPLOYMENT, SUPPORTED AND INDEPENDENT LIVING, HEALTH CARE, FINANCIAL PLANNING AND RECREATION AND COMMUNITY SERVICE.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Schedule O (Form 990) 2021
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SUPPORT WAS PROVIDED TO BOARD MEMBERS, EXECUTIVE DIRECTORS AND OTHER VOLUNTEERS AND STAFF OF THE AFFILIATED CHAPTERS THROUGH A BI-WEEKLY EMAIL NEWSLETTER (FUSION), PERIODIC VIDEO CONFERENCES FOR CHAPTER LEADERS, PERIODIC WEBINARS, AN ANNUAL LEADERSHIP INSTITUTE, A NATIONAL CONVENTION, WRITTEN EDUCATIONAL MATERIALS, EMAIL DISCUSSION GROUPS, EXTENSIVE CONTENT AVAILABLE ONLINE, AND ONE-TO-ONE TECHNICAL ASSISTANCE VIA TELEPHONE AND EMAIL. PROGRAMMING WAS CONDUCTED USING VIRTUAL MEETING TECHNOLOGY DUE TO THE COVID-19 PANDEMIC.

THE ARC PROVIDED TECHNICAL ASSISTANCE AND SUPPORT TO INDIVIDUALS WITH DISABILITIES, THEIR FAMILY MEMBERS AND FRIENDS TO ORGANIZE NEW CHAPTERS OF THE ARC, AND TO STRENGTHEN AND STABILIZE EXISTING CHAPTERS, SO THAT THEY MAY EFFECTIVELY ADVOCATE ON BEHALF OF AND SERVE THEIR CONSTITUENTS AT THE STATE AND LOCAL LEVEL. THE ARC ALSO PROMOTED INFORMATION SHARING AND EXCHANGE OF IDEAS AMONG AND BETWEEN ALL OF OUR CHAPTERS.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: PERSONNEL TO ACCOMMODATE THE NEEDS OF PEOPLE WITH IDD IN THE CRIMINAL JUSTICE SYSTEM. THE WINGS FOR AUTISM/WINGS FOR ALL PROJECT, WHICH PROVIDES AN AIRPORT TRAVEL SIMULATION FOR CHILDREN WITH AN AUTISM SPECTRUM DISORDER OR OTHER DISABILITIES AND THEIR FAMILIES, WAS SUSPENDED DUE TO THE COVID-19 PANDEMIC. THE CENTER FOR FUTURE PLANNING PROVIDED AN ONLINE RESOURCE CENTER TO ASSIST ADULTS WITH IDD AND THEIR FAMILIES TO PLAN FOR THEIR FUTURE NEEDS, AND TO PROVIDE RESOURCES FOR CHAPTERS OF THE ARC TO SUPPORT THEM. THE ARC'S TECH PROGRAMS PROVIDE ONLINE RESOURCES TO ASSIST PEOPLE WITH IDD AND THEIR FAMILIES TO ACCESS THE LATEST TECHNOLOGY TO SUPPORT THEIR LIVING IN THE COMMUNITY. THE Schedule O (Form 990) 2021 132212 11-11-21 47 21031111 745960 01813 2021.04021 THE ARC OF THE UNITED STATE 01813 1

Schedule O (Form 990) 2021	Page 2
Name of the organization THE ARC OF THE UNITED STATES	Employer identification number $13-5642032$
INCLUSIVEVOLUNTEERISM PROJECT ENGAGED PEOPLE WITH IDD IN	VOLUNTEERISM
AND COMMUNITY SERVICE AT SITES ACROSS THE NATION. THE ARC	@SCHOOL
PROGRAM PROVIDES RESOURCES AND INFORMATION TO FAMILIES TO	SUPPORT
STUDENTS WITH IDD TO OBTAIN THE SERVICES THEY NEED TO BE	SUCCESSFUL IN
SCHOOL. VARIOUS OF THESE PROGRAM ACTIVITIES CONTINUED TO	BE PRODUCED IN
ONLINE FORMATS DUE TO THE COVID-19 PANDEMIC.	

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: PUBLIC EDUCATION: THE ARC OF THE UNITED STATES (THE ARC) EDUCATED PEOPLE WITH DISABILITIES, THEIR PARENTS AND OTHER FAMILY MEMBERS, THE MEDIA, AND MEMBERS OF THE PUBLIC ABOUT THE NEEDS, INTERESTS, ISSUES AND CONCERNS OF PEOPLE WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES (IDD) AND THEIR FAMILIES. THE ARC'S PUBLIC EDUCATION EFFORTS COVERED A BROAD RANGE OF SUBJECT AREAS, SUCH AS HOUSING, EMPLOYMENT, EDUCATION, HEALTHCARE, CRIMINAL JUSTICE, COVID-19 VACCINE AWARENESS AND VOLUNTEERISM AND COMMUNITY SERVICE.

THE ARC'S PRINT AND E-NEWSLETTER, EMPOWER, WAS DISTRIBUTED THROUGHOUT THE YEAR TO MEMBERS OF THE ASSOCIATION AS WELL, TO LIBRARIES AND OTHER PUBLIC INSTITUTIONS AND TO OTHER INTERESTED INDIVIDUALS. THE ARC'S WEBSITES PROVIDE MEMBERS OF THE PUBLIC ACCESS TO A BROAD RANGE OF INFORMATION AND A VARIETY OF FREE PUBLICATIONS PROVIDING PRACTICAL ADVICE ABOUT THE INCLUSION OF PEOPLE WITH IDD IN ALL ASPECTS OF COMMUNITY LIFE. SOCIAL MEDIA SITES HELP SPREAD THE INFORMATION TO A BROADER AUDIENCE. THE ARC ALSO MONITORS LOCAL AND NATIONAL MEDIA COVERAGE ABOUT PEOPLE WITH IDD, AND DEVELOPMENTS REPORTED BY STATE AND LOCAL CHAPTERS, AND INFORMS WEBSITE USERS ABOUT CURRENT EVENTS AFFECTING PEOPLE WITH IDD AND THEIR FAMILY. THE ARC'S CATALYST AWARDS 132212 11-11-21 Schedule O (Form 990) 2021 48 21031111 745960 01813 2021.04021 THE ARC OF THE UNITED STATE 01813\_1

PROGRAM RECOGNIZES INDIVIDUALS, COMPANIES AND ORGANIZATIONS THAT ARE
HAVING AN IMPACT IN SUPPORTING PEOPLE WITH IDD TO BE FULLY INCLUDED IN
THEIR COMMUNITIES.
THE ARC RESPONDED TO HUNDREDS OF WRITTEN, PHONE, AND E-MAIL INQUIRIES
FROM INDIVIDUALS AND ORGANIZATIONS, PROVIDING INFORMATION AND RESOURCES
ON A VARIETY OF TOPICS RELATED TO IDD. INFORMATION WAS NEEDED BY MANY
FAMILIES ON AGING AND DISABILITIES, AUTISM SPECTRUM DISORDERS, FUTURE
PLANNING, HOUSING AND RESIDENTIAL FACILITIES, RARE DISORDERS, EDUCATION
ISSUES, FETAL ALCOHOL SPECTRUM DISORDERS, AND LEGAL AND CRIMINAL
JUSTICE ISSUES.
EXPENSES \$ 624,042. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
FORM 990, PART VI, SECTION A, LINE 6:
MEMBERS ARE NONPROFIT ORGANIZATIONS THAT MEET THE QUALIFICATIONS AND
REQUIREMENTS AS SET FORTH IN THE BY-LAWS TO BE A STATE OR LOCAL CHAPTER OF
THE ARC.
FORM 990, PART VI, SECTION A, LINE 7A:
MEMBERS VOTE TO ELECT THE OFFICERS AND DIRECTORS OF THE CORPORATION AND ON
ANY CHANGES TO THE BYLAWS, CORE VALUES AND POSITION STATEMENTS.
FORM 990, PART VI, SECTION A, LINE 7B:
AMENDMENTS TO THE ARTICLES OF INCORPORATION OR BYLAWS, ADOPTION AND
AMENDMENT OF POSITION STATEMENTS, AND OTHER CORPORATE ACTIONS MUST BE
APPROVED BY THE MEMBERS OF THE CORPORATION WHICH ARE THE STATE OR LOCAL
CHAPTERS.
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THE ARC OF THE UNITED STATES

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Schedule O (Form 990) 2021

Name of the organization

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Page 2

Employer identification number 13-5642032

Name of the organization THE ARC OF THE UNITED STATES	Employer identification number 13-5642032
FORM 990, PART VI, SECTION B, LINE 11B:	
BASED ON INFORMATION PROVIDED BY MANAGEMENT, THE 990 WAS	PREPARED BY THE
CPA FIRM THAT IS ALSO RESPONSIBLE FOR THE AUDIT. THE DRA	FT FORM 990 WAS

WERE PROVIDED TO THE BOARD MEMBERS BEFORE FILING.

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

THE ARC REQUIRES BOARD MEMBERS, COMMITTEE MEMBERS AND STAFF TO ANNUALLY COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT. THE COMPLETED STATEMENTS ARE REVIEWED BY THE HUMAN RESOURCES DEPARTMENT. STATEMENTS REVEALING AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST ARE FURTHER REVIEWED BY THE CHIEF EXECUTIVE OFFICER, EXECUTIVE COMMITTEE OR BOARD OF DIRECTORS AS SPECIFIED IN THE ARC'S CONFLICT OF INTEREST POLICY. IF A CONFLICT ARISES, THE CEO REVIEWS THE ARRANGEMENT AND DETERMINES IF THE RELATIONSHIP IS IN THE BEST INTEREST OF THE ARC.

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

PURSUANT TO THE TERMS OF THE EMPLOYMENT CONTRACT BETWEEN THE ORGANIZATION AND THE CHIEF EXECUTIVE OFFICER (CEO), COMPENSATION IS REVIEWED AND SET ANNUALLY IN THE COURSE OF THE ANNUAL EVALUATION OF THE CEO. THE EXECUTIVE COMMITTEE CONDUCTS AN ANNUAL REVIEW OF THE PERFORMANCE OF THE CEO, INCLUDING SETTING COMPENSATION FOR THE YEAR. THE EXECUTIVE COMMITTEE REVIEWS PUBLICLY AVAILABLE DATA REGARDING THE SALARIES BEING PAID TO EXECUTIVES IN COMPARABLE NONPROFIT ORGANIZATIONS. THE RESULTS OF THE EVALUATION, INCLUDING THE DECISION OF THE EXECUTIVE COMMITTEE REGARDING COMPENSATION, ARE REPORTED TO THE FULL BOARD OF DIRECTORS. THE LAST REVIEW TOOK PLACE IN MARCH 2019.

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Schedule O (Form 990) 2021	Page 2
Name of the organization THE ARC OF THE UNITED STATES	Employer identification number $13-5642032$
FORM 990, PART VI, SECTION B, LINE 15B: THE CEO IS RESPON	SIBLE FOR SETTING
THE COMPENSATION OF OTHER KEY EMPLOYEES OF THE ORGANIZATI	ON WITHIN THE
PARAMETERS OF THE BUDGET APPROVED BY THE BOARD OF DIRECTOR	RS. IN SETTING
SALARIES, THE EXECUTIVE DIRECTOR REVIEWS INFORMATION ON S	IMILAR POSITIONS
AT COMPARABLE ORGANIZATIONS FROM SALARY SURVEYS AVAILABLE	FROM THE MARYLAND
ASSOCIATION OF NONPROFIT ORGANIZATIONS AND FORM 990 DATA .	AVAILABLE THROUGH
GUIDESTAR.	

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL,AR,CA,FL,GA,HI,IL,KS,KY,MA,MD,MI,MN,MS,NC,NH,NJ,NM,NY,OR,PA,RI,SC,TN,UT VA,WV,WI

FORM 990, PART VI, SECTION C, LINE 19: THE ARC'S AUDITED FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, AND GOVERNING DOCUMENTS (ARTICLES OF INCORPORATION AND BY-LAWS) ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE.

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#### (Form 990)

Part I

Department of the Treasury Internal Revenue Service

### **Related Organizations and Unrelated Partnerships**

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

Attach to Form 990.
 Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

13-5642032

Name of the organization

THE ARC OF THE UNITED STATES

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

<b>(a)</b> Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or	<b>(d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity
		foreign country)			onity

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

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity		<b>g)</b> 512(b)(13) rolled itty?
				501(c)(3))		Yes	No
THE FOUNDATION OF THE ARC OF THE UNITED							
STATES - 52-1559702, 1825 K STREET, NW,	SUPPORT THE CHARITABLE						
SUITE 1200, WASHINGTON, DC 20006	PURPOSES OF THE ARC	PENNSYLVANIA	501(C)(3)	LINE 12A, I	THE ARC OF THE US	X	
THE ARC OF GEORGIA SERVICES CORPORATION -							
58-1958242, 1825 K STREET, NW, SUITE 1200,	SUPPORT THE CHARITABLE						
WASHINGTON, DC 20006	PURPOSES OF THE ARC IN GA	GEORGIA	501(C)(3)	LINE 7	THE ARC OF THE US	X	
THE ARC OF THE DISTRICT OF COLUMBIA, INC							
52-0960095, 1825 K STREET, NW, SUITE 1200,	SUPPORT THE CHARITABLE						
WASHINGTON, DC 20006	PURPOSES OF THE ARC IN DC	DISTRICT OF COLUMBIA	501(C)(3)	LINE 7	THE ARC OF THE US	X	

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

Schedule R (Form 990) 2021

#### THE ARC OF THE UNITED STATES adula B (Earm 000) 2021 Cala

13-5642032 Page **2** 

(a)	(b)	(c)	(d)		(e)		(f)		(g)	(1	h)	(i)		(j)	()	k)										
Name, address, and EIN of related organization	Primary activity	a activity	Predominant income (related, unrelated,		inant income Share		Predominant income Share of total	Share of total		ant income Share of t		10 Share of total		Share of end-of-year		hare of total Sha		Share of total Shar		are of Disproportion		. I amount in box		General or Perc	Perce	entag ershii
3		(state or foreign country)	,	excluded fi sections	, unrelated, rom tax under s 512-514)				sets	Yes	tions?	20 of Sched K-1 (Form 10	ule 💾	artner?												
	_																									
														-												
	_																									
	_																									
	_																									
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t IV Identification of Related C organizations treated as a c	Drganizations Taxable corporation or trust duri	as a Corpo ing the tax	<b>oration or Trust.</b> Co year.	omplete if t	he organizat	ion ans\	wered "Ye	s" on Fo	rm 990, P	art IV,	line 34	1, because it h	ad one	e or m	ore rel	ated										
(a)		5.	(b)	(c)	(d)		(e		(f)			(g)	(h		( Sec	<b>i)</b> ction										
Name, address, and of related organizat		Prim	ary activity	egal domicile (state or foreign	Direct cont entity		Type of (C corp, or tru	entity S corp,	Share o inco			Share of end-of-year assets	Percer owner	ntage rship	512(i contr	b)(13) rolled tity?										
				country)				131)				233613			Yes	No										
											_					<u> </u>										
					1											<u> </u>										

#### Schedule R (Form 990) 2021 THE ARC OF THE UNITED STATES

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

Not	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
	Gift, grant, or capital contribution to related organization(s)	1b		Х
	Gift, grant, or capital contribution from related organization(s)	1c	Х	
	Loans or loan guarantees to or for related organization(s)	1d		Х
	Loans or loan guarantees by related organization(s)	1e		X
				1
f	Dividends from related organization(s)	1f		X
g	Sale of assets to related organization(s)	1g		Х
h	Purchase of assets from related organization(s)	1h		Х
i	Exchange of assets with related organization(s)	1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
1	Performance of services or membership or fundraising solicitations for related organization(s)	11	Х	
n	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		Х
	Sharing of paid employees with related organization(s)	10		Х
р	Reimbursement paid to related organization(s) for expenses	1p		X
q	Reimbursement paid by related organization(s) for expenses	1q		Х
r	Other transfer of cash or property to related organization(s)	1r		X
s	Other transfer of cash or property from related organization(s)	1s		Х
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
THE FOUNDATION OF THE ARC OF THE UNITED (1) STATES	С	42,776.	BASED ON 5.5% OF NET ASSETS
(2) THE ARC OF GEORGIA SERVICES CORPORATION	L	14,722.	MANAGEMENT AGREEMENT
(3) THE ARC OF THE DISTRICT OF COLUMBIA, INC.	L	115,157.	MANAGEMENT AGREEMENT
THE FOUNDATION OF THE ARC OF THE UNITED (4) STATES	L	57,498.	ACTUAL COST
(5)			
(6)	<b>F</b> 4		

#### Schedule R (Form 990) 2021 THE ARC OF THE UNITED STATES

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(-)	(1-)		(-N			(6)	()		->	(1)	(3)	(1)																																						
(a)	(b)	(c)	(d)	(e Are	<b>e)</b> all	(f)	(g)	()	(ר	(i)	(j)	(k)																																						
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partnei 501(i org	rs sec.	Share of	Share of	Dispr tior alloca	opor- nate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General c managing	Percentage																																						
of entity		(state or foreign	excluded from tax under	org	s.?	total	end-of-year	alloca	tions?	of Schedule K-1	partner?	ownership																																						
		country)	sections 512-514)	Yes	No	income	assets	Yes	No	(Form 1065)	Yes NO																																							
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Schedule R (Form 990) 2021

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

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