Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.lrs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A	For the	2022 calend	ar year, or t	.ax year begi	nning		, 2022, a	and endi	ng		, 20		
В	Check If a	ipplicable:	C Name of org	ganization T !	HE ARC OF ADAMS	COUNTY INC	, , , , , , , , , , , , , , , ,			D Emplo	yer identification number		
] ,	Address o	hange	Doing busin	1088 88							84-0679337		
	Name cha	ange	Number and	d street (or P.O. b	ox if mail is not delivered to stre	eet address)		Room/sul	te	E Telepi	none number		
₹	Initial retu	ım		E 112TH A		•					(303) 428-0310		
٦,	Final retu	m/terminated	City or town	, state or provinc	e, country, and ZiP or foreign po	ostal code	,			G Gross receipts			
=	Amended			er, CO 80						\$ 1,139,881			
=		n pending		address of princip					H(a) is this e or	roup return f	or subordinates? Yes X No		
									H(b) Are all s				
	Tax-axam	npt status:	501(c)(3)	501(c) () (Insert no.)	947(a)(1) or	527		1 ' '		t. See Instructions		
	Website:		ARCADAM		, (aara, □	<u> </u>			H(c) Group e				
			Corporation		ssociation Other		L Year of format	ion: 196			al domicile: CO		
	rt I	Summar			Sacration Cuter		L TOD OTTOMICAL	ion. <u>1</u>	<u> </u>	tate of log	al dollidio.		
	1		•	nization'e mie	sion or most significant a	refixitions TO	PROMOTE I	ישור כורי	NEDAT. MI	PT.PAD	E OF PERSONS WITH		
	"	-	_		MENTAL DISABILI'				AINING,		ATION, RECRUITMENT		
ቋ				DEVELOE	MENIAL DISABILI	TIES INCOG	A RESEARC	m, In	ALNING,	EDUCA	ALLON, RECRUITMENT		
Governance		AND SUPPORT.											
ē	١,	Chook this h	ov 🗀 if the	organization	discontinued its operation	ne or disposed of	mara than 2i	50/ of Ite	not accate				
ő	3		•	-	erning body (Part VI, Iin	·				3	6		
9			-	=	=	='				4			
Activities &	4		-	_	ers of the governing body								
ž	5				In calendar year 2022 (F					5	13		
AG	6			ers (estimate i	= :					6	5		
	7a				n Part VIII, column (C), li					7a	0		
	b	Net unrelate	d business to	axable incom	e from Form 990-T, Pari	II, line 11		• • • •		7b	0		
Revenue	_								Prior Year		Current Year		
	8		-	•				-	1,162	,839	1,139,630		
	9				ne 2g)						0		
	10		=		(A), lines 3, 4, and 7d)					384	201		
æ	11							11	11,452				
	12	Total revenu	e - add lines	8 through 11	(must equal Part VIII, co	olumn (A), line 12)			1,174	,675	1,139,881		
	13	Grants and	similar amour	nts paid (Part	t IX, column (A), lines 1-	3)					0		
	14	Benefits paid to or for members (Part IX, column (A), line 4)								0			
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)							857	,575 839,112			
Expenses	16a	a Professional fundraising fees (Part IX, column (A), line 11e)									0		
든	b	Total fundra	ising expens	es (Part IX, c	olumn (D), line 25)		0						
盔	17	Other expen	ises (Part IX,	, column (A), l	lines 11a-11d, 11f-24e)				120	,427	148,622		
	18	Total expens	ses. Add line	es 13-17 (mus	st equal Part IX, column	(A), line 25)			978	,002	987,734		
	19	Revenue les	s expenses.	Subtract line	e 18 from line 12				196	,673	152,147		
	8							Begi	nning of Curre	ent Year	End of Year		
ž.	20	Total assets	(Part X, line	16)					1,345	,481	1,488,381		
Assi	21	Total liabiliti	es (Part X, lir	ne 26)					51	,212	41,965		
Net Assets or	22	Net assets of	or fund balan	ices. Subtrac	t line 21 from line 20 .	<i>.</i>			1,294	,269	1,446,416		
Pa	irt II		ıre Block								· · · · · · · · · · · · · · · · · · ·		
Und	er penalti	es of perjury, I de	clare that I have		turn, including accompanying se			t of my know	wledge and bel	lef, it is			
true	, correct,	and complete. De ⊺	claration of prepare	arer (other than o	officer) is based on all information	n of which preparer ha	s any knowledge.			-			
		KARI	EASTERL	ĽΥ						İ			
Sig	n	Signature of offi								Da	te		
He	re	KARI	EASTERL	Y. EXECU	TIVE DIRECTOR								
		Type or print na		/									
		Print/Type pr	eparer's name		Preparer's signature		Date		Check	☐ lf	PTIN		
Pai	d	Charles	s Poysti,	, CPA	Charles Poysti	. CPA	03-27-20	023	self-em	_	P00070003		
	pare				& Associates LL	•	~~ ±; £\		Firm's EIN	p.oyou			
	e Only			PO Box					hone no.				
اټب	• • • • • • • • • • • • • • • • • • •	y Finn's accures	10		CO 80237				HOUGHO.	3U3-	285-2500		
Mar	the ID	S discuss this	return with f		shown above? See instru	ıctions		l)		503-	X Yes No		
IVICITY	THE HEAD	- GID 6000010 U II I	Z COMMITTER STATE AND A STATE	PIOPOIDI ?	ハル・カー・エレングロー シロロ コロロル	**********					165 170		

	1990 (2022) THE ARC OF ADAMS COUNTY INC 84-06/933/ Page 2							
Pa	rt III Statement of Program Service Accomplishments							
	Check if Schedule O contains a response or note to any line in this Part III							
1	Briefly describe the organization's mission:							
	TO PROMOTE THE GENERAL WELFARE OF PERSONS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES							
	THROUGH RESEARCH, TRAINING, EDUCATION, RECRUITMENT AND SUPPORT.							
2	Did the organization undertake any significant program services during the year which were not listed on the							
	prior Form 990 or 990-EZ?							
	If "Yes," describe these new services on Schedule O.							
3	Did the organization cease conducting, or make significant changes in how it conducts, any program							
	services?							
	If "Yes," describe these changes on Schedule O.							
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by							
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,							
	the total expenses, and revenue, if any, for each program service reported.							
4a	(Code:) (Expenses \$ 789,059 including grants of \$) (Revenue \$)							
	EDUCATION, RESEARCH AND SUPPORT OF AND FOR THE FURTHERANCE OF UNDERSTANDING OF CHILDREN AND							
	ADULTS WITH INTELLECTUAL/DEVELOPMANTAL DISABILITIES IN ADAMS COUNTY AND ADJOINING							
	CITIES/COUNTIES.							
46	(Code:) (Expenses \$ including grants of \$) (Revenue \$)							
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)							
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)							
4d	Other program services (Describe on Schedule O.)							
	(Expenses \$ including grants of \$) (Revenue \$)							
40	Total program service expenses 789 050							

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		j	
	candidates for 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)			i
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
_	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
-	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	complete Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	-		х
J	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	-		_
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10	100	
••	VII, VIII, IX, or X as applicable.			Sarry.
-	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			. 5 5 12
61	complete Schedule D, Part VI	11a	x	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more	- 104		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		ж
c	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	1		
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		x
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a				
	Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		x
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		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		х
20 a	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_

Form 990 (2022) THE ARC OF ADAMS COUNTY INC 84-0679337 Page 4 Checklist of Required Schedules (continued) Part IV Yes No 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 X 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated 23 Х Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b 24a Х Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?........ 24b b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c **24**d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 25a 25a X Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior b year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 25b X 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 35% 26 Х 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these 27 X 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): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 28a X 28b A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 28c Х 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. 31 х Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." 32 Х 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Х 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 35a 35a Х If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2........ 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and

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	 	

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	5		300
b	Enter the number of Forms W-2G included in 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	

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management No Yes 6 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 6 Dld any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? X 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3 X 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?...... X 5 5 Х 6 Did the organization have members or stockholders? 6 X Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8b X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? . . . 11a Describe on Schedule O the process, if any, used by the organization to review this Form 990. b 12a Х Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . 12b Х Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c X 13 13 X 14 14 X 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a X 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 Colorado 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain on Schedule O) 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records. KARI EASTERLY (303)428-0310, 641 E 112TH AVE, Denver, CO 80233

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84-0679337

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - · List all of the organization's current key employees, if any. See 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

				((C)					
(A)	(B) Average hours				sition			(D)	(E)	(F)
Name and title						nan one		Reportable	Reportable	Estimated amount
Mario dia dia		box, unless person is both an officer and a director/trustee)						compensation	compensation	of other
	per week							from the organization (W-2/	from related organizations (W-2/	compensation from the
	(list any hours for	or o	SUI	Officer	Ke	em Hg	Horme	1099-MISC/	1099-MISC/	organization and
	related	direc Vidu	timit		em /	Highest cor employee	mer	1099-NEC)	1099-NEC)	related organizations
	organizations	D E	mai		Key employee	88 2011				
	below	Individual trustee or director	Institutional trustee		9	mpens				
	dotted line)	. "	99			sate				
						_				

(1) KARI EASTERLY	55.00									
EXECUTIVE DIRECTOR				X				95,780	00	0
(2) KATE O'DONNELL										
MEMBER		х						0	0	0
(3) JEFF ALTHAUS										
MEMBER		Х						0	0	0
(4) ALBERT NATICCHIONI										
TREASURER		Х		_X				0	0	. 0
(5) LYNNELLE ZACKROFF										
VICE PRESIDENT		Х		X				. 0	0	0
(6) DANA HOLINKA										
PRESIDENT		х		Х				0	0	<u> </u>
(7) STEVE TIEMANN										
SECRETARY		Х		X				0	0	0_
(B)										
								1	<u> </u>	
(9)										
(10)										
14.43										
(11)										
(40)										
(12)										
(40)										
(13)										
(4.4)				$\vdash\vdash$					-	
(14)										

	Name and title	Average hours per week	(C) Position (do not check more than one box, unless person is both ar officer and a director/trustee)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee Key employee		organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(15)											
<u>(16)</u>											
<u>(17)</u>											
(1 <u>8</u>)											
<u>(19)</u>										1	
(20)											
<u>(21)</u>											
(22)											
(23)		-									
(24)											
(25)											
C	Subtotal	ion A .		• •			 				
	Total (add lines 1b and 1c)								95,780	0	0
	rotal number of individuals (including but not limit reportable compensation from the organization	ea to those i	isted a	DOVE	*) WI	ю ге	ceive	u mo	ore than \$100,000	OI	
3	Did the organization list any former officer, direc	le J for such	individ	lual							Yes No
	For any individual listed on line 1a, is the sum of reorganization and related organizations greater the individual	nan \$150,000)? <i>If</i> "γ	'es," 	con	iplet • •	e Sch	edul	e J for such		. 4 X
	Did any person listed on line 1a receive or accrue for services rendered to the organization? <i>If "Ye</i> :			-			_				. 5 x
	n B. Independent Contractors Complete this table for your five highest compensa	ted indepen	dent co	nfro	otoro	the	t recoi	WC4	more than \$400 0	On of	
	compensation from the organization. Report comp										•
	(A)								(B)		(C)
	Name and business addres	55							Description of servi	Ges	Compensation
2	Total number of independent contractors (includin	in hut not lies	itad ta	thee	o lic	tod -	aha:s	\ 121k			

84-0679337

Part '	VIII	Statement of Rev			- 4 (1 1 41-1	- m - 4220			г
		Check If Schedule O co	ontains a respons	e or not	e to any line in thi	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns .		1a					
6 7 40	b	Membership dues		1b					
Contributions, Gifts, Grants and Other Similar Amounts	C	Fundraising events		1c					
ָהַ <u>הַ</u>	d	Related organizations .		1d	1,130,168				
ar A	е	Government grants (contr	ibutions)	1e					
8. E	f	All other contributions, gif	ts, grants,						
2 2		and similar amounts not in	nciuded above	1f	9,462				
	g	Noncash contributions inc	luded in						
멸		lines 1a-1f		1g					
	h	Total. Add lines 1a-1f				1,139,630			
				L	Business Code				
ris .	2a								
ξ	b								
Ser	C			.					
yram Serv Revenue	d								9
Program Service Revenue	е								
Ę		All other program service i		_					
	g	Total. Add lines 2a-2f .		• • • •				haisin san y	a e laste dest
	3	Investment income (includi	ing dividends, inte	erest, ar	d				
		other similar amounts) .				201			201
	4	Income from investment of	· · · · · · · · · · · · · · · · · · ·	-					-
	5	Royalties				Tager of the state of the same			
			(i) Real		(il) Personal				
		Gross rents	6a						
		Less: rental expenses	6b						
		Rental income or (loss)	6c		•••••				
	d	Net rental income or (loss)				and the second of the second o	Line of Allendary	· Constant of the control of the con	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	7a	Gross amount from	(i) Securition	ies	(li) Other				
		sales of assets	_						
		other than inventory	7a						
	b	Less: cost or other basis							
an Le		and sales expenses	7b						
		Gain or (loss)	[[[
Officer Reve		Net gain or (loss) Gross income from fundra					.Washing salah		
윭	oa		ising						
0		events (not including \$ _ of contributions reported or	n lino	-					
		1c). See Part IV, line 18		8a					
	h	Less: direct expenses .		8b					
		Net income or (loss) from				POLA SHILL HAVE AND SHILL			Page 1 to the County Special No. 15 (County S
		Gross income from gaming		"				275,24K, 255,13	
	34	activities, See Part IV, line	-	9a					
	h	Less: direct expenses .		9b					
		Net Income or (loss) from				Jan German Jackson	A CONTRACTOR OF STREET	And the second of the second o	<u> </u>
	L			Ĭ				100000000000000000000000000000000000000	2 K & B & B & B
	Tua	Gross sales of inventory, I returns and allowances .		10a					
	Ь	Less: cost of goods sold		10b					學是在主義等
		Net income or (loss) from				1. 164 J.C. 1441-128 N	Contract to the Contract of th	* * (*********************************	<u> </u>
	1	scinsonio or poody nome		 i	Business Code				
w	11a	OTHER		ķ	00099	50		A AND THE PROPERTY AND AND	50
nor Te	b		•			1			1
scellano Revenue	~								
Miscellanous Revenue	d	All other revenue							
Σ		Total. Add lines 11a-11d		-		50			
		Total revenue. See instru				1,139,881	200 Att 4 Att 4 Att 5		

Part IX Statement of Functional Expenses

Secti	ion 501(c)(3) and 501(c)(4) organizations must complete all t		nizations must comple	te column (A).	
	Check if Schedule O contains a response or note to				
	ot Include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	b, and 10b of Part VIII.	·	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
_	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
4	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	05 700	62 250	22 420	
6	Compensation not included above to disqualified	95,780	63,350	32,430	
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	665,953	558,321	107,632	
8	Pension plan accruals and contributions (include	000,900	556,521	107,032	.
·	section 401(k) and 403(b) employer contributions)	16,331	12,383	3,948	
9	Other employee benefits	10,551	12,303	3,540	
10	Payroll taxes	61,048	48,743	12,305	
11	Fees for services (nonemployees):	02,010	10,715		
а	Management				
b	Legal				
C	Accounting			<u> </u>	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17 .				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
_	(A) amount, list line 11g expenses on Schedule O.)	17,966		17,966	
12	Advertising and promotion				
13	Office expenses	17,368	15,965	1,403	
14	Information technology	12,912	11,004	1,908	
15	Royalties				
16	Occupancy	38,110	30,467	7,643	
17	Travel	6,772	3,574	3,198	
18	Payments of travel or entertainment expenses				•
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	23,122	17,340		
23	Insurance	9,229	6,962	2,267	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
a -	COMMUNITY AND MEMBER SERVICE	23,143	20,950	2,193	
b					
C					
d	All all and an arrangement of the second of				
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	987,734	789,059	198,675	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundralsing solicitation. Check here fif				
	following SOP 98-2 (ASC 958-720)	ļ	<u> </u>		

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X		• • •	
			(A) Beginning of year		(B)
	4	Cook you latered the wine	beginning of year		End of year
	1	Cash - non-interest-bearing		1	207.100
	2	Savings and temporary cash investments	666,588	2	827,193
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%		1 1 1	ALL SANGERS OF SAN
	_	controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined		10.5	
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
Assets	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 906,813			
	b	Less: accumulated depreciation	678,893	10c	661,188
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,345,481	16	1,488,381
	17	Accounts payable and accrued expenses	51,212	17	41,965
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
u)	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
ap		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		25	
	26	Total Ilabilities. Add lines 17 through 25	51,212	26	41,965
		Organizations that follow FASB ASC 958, check here			
10		and complete lines 27, 28, 32, and 33.			
ğ	27	Net assets without donor restrictions	1,294,269	27	1,446,416
<u>far</u>	28	Net assets with donor restrictions		28	
Ä		Organizations that do not follow FASB ASC 958, check here		**************************************	
Net Assets or Fund Balances		and complete lines 29 through 33.			
F.	29	Capital stock or trust principal, or current funds	production of the contraction	29	
SE.	30	Pald-in or capital surplus, or land, building, or equipment fund		30	
SSe	31	Retained earnings, endowment, accumulated income, or other funds		31	
# A	32	Total net assets or fund balances	1,294,269	32	1,446,416
S	33	Total liabilities and net assets/fund balances	1,345,481	33	1,488,381
			-,0-20,-201		

orm	990 (2022) THE ARC OF ADAMS COUNTY INC	84-0679	<u> 337 </u>	<u>P</u> ε	age 12
Par	t 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	1,	139,	881
2	Total expenses (must equal Part IX, column (A), line 25)	2		987,	734
3	Revenue less expenses. Subtract line 2 from line 1	3		152,	,147
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,	294,	269
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	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	1,	446,	,416
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			<u> </u>	
				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 O.			1.70	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a	х	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	X Separate basis				1 (-
b	Were the organization's financial statements audited by an independent accountant?		. 2b		х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			İ	
	the audit, review, or compilation of its financial statements and selection of an Independent accountant?		. 2c	1	
	If the organization changed either its oversight process or selection process during the tax year, explain on		4.12		
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		. 3a		X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
			. 3b		
FA			Forr	n 990	(2022)

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SCHEDULE A (Form 990)

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.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Name of the organization Employer identification number THE ARC OF ADAMS COUNTY INC 84-0679337 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(III). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a coilege or university owned or operated by a governmental unit described in section 170(b)(1)(A)(IV). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 🗵 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in **section 170(b)(1)(A)(vI)**. (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from cross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, c its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations g Provide the following information about the supported organization(s). (I) Name of supported organization (III) Type of organization (Iv) is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

Schedule A (Form 990) 2022 THE ARC OF ADAMS COUNTY INC 84-0679337 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (a) 2018 (b) 2019 Calendar year (or fiscal year beginning in) (c) 2020 (d) 2021 (e) 2022 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 893,091 955,914 956,373 1,162,839 1,139,630 5,107,847 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 893,091 955,914 956,373 1,162,839 1,139,630 5,107,847 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) 914,223 Public support. Subtract line 5 from line 4. 4,193,624 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 (c) 2020**(b)** 2019 (d) 2021 (e) 2022 (f) Total Amounts from line 4 7 893,091 955,914 956,373 1,162,839 1,139,630 5,107,847 8 Gross income from interest, dividends, payments received on securities loans. rents, royalties, and income from similar sources 1,331 3,759 3,245 384 201 8,920 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 323 652 11,452 50 12,477 11 Total support. Add lines 7 through 10 5,129,244 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) 14 81.76 % 15 Public support percentage from 2021 Schedule A, Part II, line 14 15 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this 16a b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check 17a 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line . 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain

in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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THE ARC OF ADAMS COUNTY INC 84-0679337 Page 3 Schedule A (Form 990) 2022 Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2018 (b) 2019 (c) 2020(d) 2021 (e) 2022 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise 2 sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons . 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 c Add lines 7a and 7b Public support. (Subtract line 7c from Section B. Total Support (a) 2018 (b) 2019 (c) 2020(d) 2021 (e) 2022 (f) Total Calendar year (or fiscal year beginning in) Amounts from line 6 9 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 C 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 14 organization, check this box and stop here Section C. Computation of Public Support Percentage % Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) 15 16 Public support percentage from 2021 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) . . . 17 % 17 Investment income percentage from 2021 Schedule A, Part III, line 17 % 18 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 19a 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and

line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . .

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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.)

<u> </u>	ion A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing		res	NO
•	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.	1		ļ ·
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).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer		-	
Ja	lines 3b and 3c below.	3a	1	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and	a		
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the	- 12 s.		
	organization made the determination.	3b		l inte.
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	30	<u> </u>	
·	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с	a Nefin	1
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If	36	1000	 7 27
→ a	"Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.	40	A 4	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	4a	1.77	
D	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.	4b		
_		40	100	
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	100		
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)	1.5		
		40		
5a	purposes. Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	4c	1.000	1
Ja	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;	100		
	(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).	5а	148° 3	
ь	Type I or Type II only. Was any added or substituted supported organization part of a class already	Ja		1
D	designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	\vdash	+
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	30	1	
•	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited	\$ 7		
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filling organization's supported organizations? If "Yes," provide detail in Part VI.	6		1000
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor	(51) 44	10,53	1 1 1 1 1 1 1
•	(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).	7	1.67.2	2941
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line			Aug 1
	7? If "Yes," complete Part I of Schedule L (Form 990).	8	i i san n	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more	S.5.	1000	
	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 .	9a		Trans.
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which	3.5		100
	the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit	/ :	1000	
•	from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>	9с	Pro Minis	at State for t
10a		K 1071	277979	1.4.
·va	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below.	10a	21-3311	
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	100		
	determine whether the organization had excess business holdings.)	10b	J#4 -	2000

Part I	V 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		
	A family member of a person described on line 11a above?	11b		
C	A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,	1.4.		
	provide detail in Part VI.	11c		
Section	on B. Type I Supporting Organizations		I	
			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 Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the		ľ :	14 11
_	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	1.11		T _W
	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,		1.00	
مالات مالات	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations		Vaa	Ma
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		Yes	No
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			A S
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	4	ma fair a	itan ita
Section	on D. All Type III Supporting Organizations		L	<u> </u>
OGCER	on b. All Type in oupporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		100	110
	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	11 - 1247 - 3	. 15
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		7 9 1	
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			S 11. 18
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	1.1	700 000
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have		- 1 - 1 - 1	11.0
	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			1.000
	supported organizations played in this regard.	3]	
Section	on 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 year (see	inst	ructio	ons).
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 government entity (see instru	ctions,)	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,		74	
	how the organization was responsive to those supported organizations, and how the organization determined	534.		
	that these activities constituted substantially all of its activities.	2a	<u> </u>	
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	1		Ask.
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would	324.45		
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		NA DEL	
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	За		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		1.3	
	of its supported organizations? If "Vas " describe in Part VII the role played by the organization in this regard	3h	1	1

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gan	izations	37 rage 0
	Check here if the organization satisfied the Integral Part Test as a qualifying			in Part VI). See
	Instructions. All other Type III non-functionally integrated supporting organi	izati	ons must complete Section	s A through E.
Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		1
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	on B - Minimum Asset Amount	•	(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	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			

7

emergency temporary reduction (see instructions).

	84~0679337	Page 7
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Section D - Distributions					Current Year	
1	Amounts paid to supported organizations to accomplish ex		1			
2	Amounts paid to perform activity that directly furthers exer		ed			
_	organizations, in excess of Income from activity			2		
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organ	zations	3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required)	- provide details in Part	VI)	5		
6	Other distributions (describe in Part VI). See instructions.	provide details in r dit	V 1)	6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which	the organization is resn	oneive	-		
U	(provide details in Part VI). See instructions.	ine organization is resp	Olisive	8		
9	Distributable amount for 2022 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
10	Line 6 amount divided by line 9 amount		(i1)	יו	(iii)	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(") Underdistributior Pre-2022	ıs	Distributable Amount for 2022	
1	Distributable amount for 2022 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2022					
	(reasonable cause required - explain in Part VI). See					
	instructions.					
3	Excess distributions carryover, if any, to 2022			2		
а	From 2017			4, 1		
b	From 2018					
С	From 2019					
d	From 2020					
е	From 2021					
f	Total of lines 3a through 3e					
a	Applied to underdistributions of prior years		20 10 10 10 10 10 10 10 10 10 10 10 10 10			
	Applied to 2022 distributable amount					
i	Carryover from 2017 not applied (see instructions)			100	大学 对 构造企业的	
ı	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2022 from			1.75		
•	Section D, line 7:					
а			The second of th			
	Applied to 2022 distributable amount				7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -	
	Remainder. Subtract lines 4a and 4b from line 4.	and the state of t				
5	Remaining underdistributions for years prior to 2022, if		- Constitution of the Cons			
-	any. Subtract lines 3g and 4a from line 2. For result					
	greater than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2022. Subtract lines 3h			77		
•	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2023. Add lines 3			-		
•	and 4c.					
8	Breakdown of line 7:			<u>an</u> Ngjar		
a	Tuesda from 2010	****				
a b	Evene from 2040			inga sa Marin		
C	Evene from 2020			<u> </u>		
d	France from 2024			7 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
e e	Evene from 2022					
¥	EXCESS HOM 2022	<u> province that is an its for the addition</u>	18 - 15 to 41 to 42 to 4 <u>2</u> No. 90	276/27	Interest of the Chinal Seathfull	

SCHEDULE D (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Name o	f the organization			Employer Identification number
THE A	RC OF ADAMS COUNTY INC			84-0679337
Pai	t I Organizations Maintaining Donor Advised	Funds or Other Sin	nilar Funds or Ac	counts.
	Complete if the organization answered "Yes"			
		(a) Donor ad		(b) Funds and other accounts
1	Total number at end of year		, 4,	•
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets	held in donor advised	
	funds are the organization's property, subject to the organization	•		
6	Did the organization inform all grantees, donors, and donor a	_		 -
	only for charitable purposes and not for the benefit of the do	-		
	conferring impermissible private benefit?			
Parl				
	Complete if the organization answered "Yes"	on Form 990 Part IV	/ line 7	
1	Purpose(s) of conservation easements held by the organiza			
•	Preservation of land for public use (for example, recreation		_	historically important land area
	Protection of natural habitat	on or education,		certified historic structure
	Preservation of open space		Freservation of a	destined instance suddities
2	Complete lines 2a through 2d if the organization held a quali	find announcetion contr	lhutlan in the form of	a concentration
2	easement on the last day of the tax year.	illed conservation contr	ibution in the lorn of	Held at the End of the Tax Year
_	Total number of conservation easements			
a				
b	Total acreage restricted by conservation easements			
C	Number of conservation easements on a certified historic st			2c
d	Number of conservation easements included in (c) acquired			
	historic structure listed in the National Register			
3	Number of conservation easements modified, transferred, re	eleasea, extinguisnea,	or terminated by the	organization during the
	tax year			
4	Number of states where property subject to conservation ea		-1 1 11 -	
5	Does the organization have a written policy regarding the pe	-	-	
	violations, and enforcement of the conservation easements i			- -
6	Staff and volunteer hours devoted to monitoring, inspecting,	nandling of violations, a	and enforcing conser	vation easements during the year
_	A second of second described to the second described t	allian and a state of the state		and the state of the same of
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and	enforcing conservation	on easements during the year
_				
8	Does each conservation easement reported on line 2(d) about			
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conserva		•	
	balance sheet, and include, if applicable, the text of the footn	ote to the organization	's financial statement	ts that describes the
	organization's accounting for conservation easements.			
Par				Other Similar Assets.
	Complete if the organization answered "Yes" of			
1a	If the organization elected, as permitted under FASB ASC 9	•		
	of art, historical treasures, or other similar assets held for pu		-	·
	service, provide in Part XIII the text of the footnote to its final			
b	If the organization elected, as permitted under FASB ASC 9			
	art, historical treasures, or other similar assets held for publi	c exhibition, education,	or research in furthe	rance of public service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historical tre			
	following amounts required to be reported under FASB ASC	C 958 relating to these	items:	
а	Revenue included on Form 990, Part VIII, line 1	=		\$
b	Assets included in Form 990, Part X			

Part VII	Investments - Other Securities. Complete if the organization answered "Yes" on F	orm 990. Part IV.	line 11b. See Form 990. Part X. line	12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1) Financial d	erivatives			
(2) Closely-he	ld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
_(E)				
_(F)				
(G)				
(H)				· · ·
	(b) must equal Form 990, Part X, col. (B) line 12.)		the little of th	
Part VIII	Investments - Program Related. Complete if the organization answered "Yes" on F	orm 990, Part IV,	line 11c. See Form 990, Part X, line	13.
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				.: 45 4
	(b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" on F	orm 990, Part IV,		
	(a) Description		(b) Book value	
(1)				
(2)				
(3)				
(4)				
<u>(5)</u>				
<u>(6)</u>				
(8)				
(9) T-(-1-(0-((h)			
	n (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.			
Part X	Complete if the organization answered "Yes" on F line 25.	Form 990, Part IV,	line 11e or 11f. See Form 990, Part	Χ,
1.		ook value		
	ncome taxes	A STATE OF THE STA		
(2)	TOTTO LUXOO			
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	b) must equal Form 990, Part X, col. (B) line 25.)			
	uncertain tax positions. In Part XIII, provide the text of the footnot	te to the organization's	financial statements that reports the	
•	liability for uncertain tax positions under FASB ASC 740. Check it			🗆

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Schedule D (Form 990) 2022

SCHEDULE O (Form 990)

Department of the Treasury

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.

OMB No. 1545-0047

Open to Public

Inspection Internal Revenue Service Employer identification number Name of the organization THE ARC OF ADAMS COUNTY INC 84-0679337 01. Members or stockholder classes and rights (Part VI, line 6) AT THE ANNUAL MEMBERSHIP MEETING THE MEMBERS ELECT THE GOVERNING BOARD TO SERVE, STAGGERED THREE YEAR TERMS. Member election for additional members (Part VI, line 7a) AT THE ANNUAL MEMBER MEETING THE MEMBERS ELECT THE GOVERNING BOARD AND OFFICERS TO SERVE AS PRESIDENT, VICE-PRESIDENT, SECRETARY, TREASURER, ETC. 03. Form 990 governing body review (Part VI, line 11) REVIEWED BY THE BOARD OF DIRECTORS AND EXECUTIVE DIRECTOR PRIOR TO FILING. 04. Conflict of interest policy compliance (Part VI, line 12c) ALL MEMBERS ARE QUERIED FROM TIME TO TIME FOR POSSIBLE AREAS OF CONFLICT OF INTEREST. THE BOARD IS SMALL ENOUGH SO THAT THEY ARE GENERALLY AWARE OF EACH OTHERS FINANCIAL AFFAIRS AND IF A POTENTIAL CONFLICT ARISES SUCH BOARD MEMBER REFRAINS FROM VOTING ON THOSE ISSUES. 05. CEO, executive director, top management comp (Part VI, line 15a) ALL SALARIES ARE REVIEWED AND APPROVED AT LEAST ANNUALLY BY THE BOARD OF DIRECTORS. 06. Other officer or key employee compensation (Part VI, line 15b ALL SALARIES ARE REVIEWED AND APPROVED AT LEAST ANNUALLY BY THE FULL BOARD OF DIRECTORS.

MADE AVAILABLE UPON REASONABLE REQUEST.

07. Governing documents, etc, available to public (Part VI, line 19)