**Return of Organization Exempt From Income Tax** 

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

2016

DLN: 93493072013598 OMB No 1545-0047

Department of the Treasury

Form **990** 

foundations)

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

► Information about Form 990 and its instructions is at <a href="https://www.IRS.gov/form990">www.IRS.gov/form990</a>

Open to Public

Interna	ıl Reve	nue Service		<u></u>				Inspection
A F	or the	e <b>2016</b> c		nning 07-01-2016 , and ending 06-	30-2017			
☐ Ad	ldress	pplicable change	C Name of organization THE ARC MARYLAND INC			<b>D Employe</b> 52-0741		ication number
☐ Ini _ Fir		turn	Doing business as					
		nınated 1 return	Number and street (or P O box if it 130 Lubrano Drive Suite 212	mail is not delivered to street address) Room/	suite	E Telephone		
_		on pending		untry, and ZIP or foreign postal code		(410) 57	71-9320	
			Annapolis, MD 21401	and 77 and Ext or foleign postal code		<b>G</b> Gross red	eipts \$ 1,	917,671
			F Name and address of princip ANDE KOLP	al officer	H(a) Is	this a group ret	urn for	
			130 Lubrano Drive Suite 212			ubordinates? re all subordinate	es	□Yes ☑No
I Ta	x-exen	npt status	Annapolis, MD 21401		─   `´ın	icluded?		∐ Yes ∐No
1 W	ehsit	e: NW	W THEARCMD ORG	(insert no ) 4947(a)(1) or 527	1	"No," attach a li roup exemption	•	•
			THE THE THE ONE					
<b>K</b> Forr	m of or	ganızatıon	✓ Corporation ☐ Trust ☐ Ass	sociation  Other	<b>L</b> Year of t	formation 1959	<b>M</b> State MD	of legal domicile
Pa		Sumi						
			scribe the organization's mission ON OF THE GENERAL WELFARE C	or most significant activities IF PERSONS WITH DEVELOPMENTAL DIS	ABILITIES T	HROUGH INFOR	MATION	AND REFERRAL
Governance	-							
E	-							
o ve	2	Check thi	ıs box ▶ 🔲 ıf the organızatıon d	iscontinued its operations or disposed of	more than	25% of its net as	ssets	
.5 .4	1		-	ing body (Part VI, line 1a)			3	16
Activities &	1		•	of the governing body (Part VI, line 1b)			4	16
Ě	1			alendar year 2016 (Part V, line 2a)			5 6	7
ACE	1		•	ecessary)			7a	0
	1		ated business taxable income fro	, , , ,			7b	0
						Prior Year		Current Year
O)	8	Contribut	ions and grants (Part VIII, line 1	h)		715,4	81	319,073
Ravenue	9	Program :	service revenue (Part VIII, line 2	g)		48,4	19	72,835
Rev	10	Investme	ent income (Part VIII, column (A)	, lines 3, 4, and 7d )		149,0	52	202,468
	1		venue (Part VIII, column (A), line			3,8		1,625
	_			ust equal Part VIII, column (A), line 12)		916,8	_	596,001
	1		nd similar amounts paid (Part IX, paid to or for members (Part IX,				0	0
S	1		•	penefits (Part IX, column (A), lines 5–10)	, <del>                                    </del>	293,5	<del>-</del>	341,740
Expenses	1		onal fundraising fees (Part IX, col	, , , , , , , , , , , , , , , , , , , ,	´		0	0
þ	1		raising expenses (Part IX, column (D),					
ă	17	Other exp	penses (Part IX, column (A), line	s 11a–11d, 11f–24e)		289,9	09	338,668
	18	Total exp	enses Add lines 13-17 (must ed	ual Part IX, column (A), line 25)		583,4	12	680,408
(8	19	Revenue	less expenses Subtract line 18 f	rom line 12		333,4		-84,407
Net Assets or Fund Balances					Begin	ning of Current Ye	ear	End of Year
sset 3afai	20	Total asse	ets (Part X, line 16)			3,093,0	08	3,248,542
F A E	21	Total liab	ulities (Part X, line 26)			129,8	37	128,356
žZ	22	Net asset	ts or fund balances Subtract line	21 from line 20		2,963,1	71	3,120,186
Jnde		alties of pe		nined this return, including accompanyir e Declaration of preparer (other than of				
any k	nowle	edge						
		*****	*			2018-03-09		
Sign		Signati	ure of officer			Date		
Here	2		KOLP EXECUTIVE DIRECTOR r print name and title					
Da:	۸		rint/Type preparer's name HILIP J WIMBISH Jr CPA	Preparer's signature PHILIP J WIMBISH Jr CPA	Date 2018-03-09	Check 📙 ıf   P	TIN 0128517:	
Paid Droi		ar F	irm's name  Mullen Sondberg Win	L nbish & Stone PA		self-employed Firm's EIN ► 52-:	1197902	
	pare On	₹¹ <del> </del> _	irm's address ► 2553 Housley Road S			Phone no (410) 2		
J 3 C	. UII	٠,	Annapolis, MD 2140:	<u> </u>				
May t	he IR	S discuss	this return with the preparer sho	own above? (see instructions)			<b>✓</b> Y	es 🗆 No
			duction Act Notice, see the se		Cat N	lo 11282Y		Form <b>990</b> (2016)

Form	990 (2016)					Page <b>2</b>
Par	t IIII Stateme	ent of Program Se	rvice Accomplish	nments		
	Check if S	Schedule O contains a r	esponse or note to a	ny line in this Part III		🗹
1	Briefly describe t	he organization's missi	on			
					ERSONS WITH INTELLECTUAL AND	DEVELOPMENTAL
DISA	BILITIES HAVE EQ	UAL RIGHTS AND OPPO	ORTUNITIES THROU	GH LEADERSHIP, SELF	-ADVOCACY AND PUBLIC POLICY	
	Did the organizat	tion undertake any sign	uficant program serv	uces during the year w	hich were not listed on	
_	-	90 or 990-EZ?		<del>-</del> ,		☐ Yes ☑ No
	•	these new services on				
3	•	tion cease conducting,		hanges in how it condi	ucts, any program	
	services?	<u>-</u> -				□ Yes ☑ No
	If "Yes," describe	e these changes on Sch	edule O			
4		<del>-</del>		ts for each of its three	largest program services, as measu	red by expenses
	Section 501(c)(3	s) and 501(c)(4) organi:	zations are required	to report the amount of	of grants and allocations to others, t	
	expenses, and re	evenue, if any, for each	program service rep	ported		
4a	(Code	) (Expenses \$	377,795	including grants of \$	) (Revenue \$	)
	See Additional Data		,		, ( 4	,
4b	(Code	) (Expenses \$	174,305	including grants of \$	) (Revenue \$	72,835 )
	See Additional Data	3				
	-					
4c	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)
	-					
	(Code	) (Expenses \$	38,582	including grants of \$	) (Revenue \$	)
		, (			, , ,	
		/B				
4d	Other program s (Expenses \$	ervices (Describe in Scl 38,582	nedule O) including grants of :	±	) (Revenue \$	١
4-	<u> </u>	service expenses >	590,68	•	) (Nevenue φ	,
4e	Total program	service expenses	390,00	٥٧		Form <b>990</b> (2016)

Yes

Yes

Yes

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11b

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12a

12b

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14a

14b

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18

19

Yes

Yes

Yes

Yes

Yes

or X as applicable

Section 501(c)(3) organizations.

Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥞 . . .

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 . . . . . . . . . . .

for public office? If "Yes," complete Schedule C, Part I 💆 . . . . . . . . . . . . . .

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year? 

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

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 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Was the organization included in consolidated, independent audited financial statements for the tax year?

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 . . . . . . . . . . . . .

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . .

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . .

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

No

Page 3

Nο

Nο No

Nο

Nο

Nο

No

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No

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Form 990 (2016)

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No

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Page 4

Part IV Checklist of Required Schedules (continued)

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

current and former officers, directors, trustees, key employees, and highest compensated employees If "Yes,"

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

**d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

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 II

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I . . . . . . . . . . . . . . . . . .

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

**b** If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . . . . . .

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Yes

Yes

20a

20b

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24a

24b

24c

24d

25a

25b

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Yes

Form 990 (2016)

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Par	990 (2016)			Page !
لند	t 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
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 7  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
L		   2b	Yes	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		103	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	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 bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	_		
	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?			No
	If "Yes," 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		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
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		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
n	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	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?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
.1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
2~	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
_	Section 501(c)(29) qualified nonprofit health insurance issuers.			
. 3	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for			
		. 1		
а	additional information the organization must report on Schedule O  Enter the amount of reserves the organization is required to maintain by the states in	13a		
a b	additional information the organization must report on Schedule O  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	13a		
a b c	additional information the organization must report on Schedule O  Enter the amount of reserves the organization is required to maintain by the states in	13a 14a		No

orm 9	990 (2016)			Page <b>6</b>
Part	<b>Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, and for a "8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	No" respo	nse to l	
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		✓
Sec	tion A. Governing Body and Management			
1a	Enter the number of voting members of the governing body at the end of the tax year	16	Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent  1b	16		
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	. 2		No
	Did the organization delegate control over management duties customarily performed by or under the direct supervis of officers, directors or trustees, or key employees to a management company or other person? .	ion 3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or mo members of the governing body?	re <b>7a</b>	Yes	
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year b the following	у		
	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rever	านe Code		
۰.	Did the sussemble based about on burning or officers?	10a	Yes Yes	No
b	Did the organization have local chapters, branches, or affiliates?		Yes	
L1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	114		
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
	Did the organization have a written document retention and destruction policy?	14	Yes	
	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in 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		No
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exemp status with respect to such arrangements?			
		16b		
	tion C. Disclosure			
L7	List the States with which a copy of this Form 990 is required to be filed►  MD			
	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only available for public inspection. Indicate how you made these available. Check all that apply	<i>(</i> )		
	Own website Another's website Upon request Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records  THE ORGANIZATION 130 LUBRANO DR SUITE 212 ANNAPOLIS, MD 21401 (410) 571-9320			
			orm 00	0 (2016)

(13) Lori Scott

(14) ALEX BARNES

(15) VICKI MILLS DIRECTOR

(16) STEVE MORGAN

(17) CRISTINE MARCHAND

EXECUTIVE DIRECTOR THROUGH 7-31-17

DIRECTOR

DIRECTOR

DIRECTOR

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

and Independent Contractors

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

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

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

year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations • List all of the organization's former officers, key employees, or 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 co										
List persons in the following order individual trus compensated employees, and former such persoi		rs, ınstı	tutio	nal t	rust	ees,	offic	ers, key employees	s, highest	
Check this box if neither the organization no	r any related oi	rganızat	ion c	omp	ens	ated a	any o	current officer, dire	ctor, or trustee	
<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	pers	an on on is	e bo both	che x, u n an	eck m inless office ustee	er	compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) CAROL FRIED PAST PRESIDENT	2 00	х						0	0	0
(2) RICHARD DEAN PRESIDENT	2 00	×		×				0	0	0
(3) LaurA CARR VICE PRESIDENT	2 00	х		x				0	0	0
(4) molly TIMKO SECRETARY	2 00	х		x				0	0	0
(5) ANNETTE HINKLE	2 00	×		х				0	0	0

(2) RICHARD DEAN PRESIDENT	2 00	×	×		0	0	0
(3) LaurA CARR VICE PRESIDENT	2 00	х	×		0	0	0
(4) molly TIMKO SECRETARY	2 00	x	×		0	0	0
(5) ANNETTE HINKLE TREASURER	2 00	x	×		0	0	0
(6) donna DEPHAMPLIS DIRECTOR	2 00	х			0	0	0
(7) lucY LOPEZ	2 00	V			0	0	0

			I	I				
(4) molly TIMKO SECRETARY	2 00	х		х		0	0	0
(5) ANNETTE HINKLE TREASURER	2 00	X		×		0	0	0
(6) donna DEPHAMPLIS DIRECTOR	2 00	x				0	0	0
(7) lucY LOPEZ DIRECTOR	2 00	х				0	0	0
(8) ravMOND MARSHALL	2 00							

VICE PRESIDENT								
(4) molly TIMKO SECRETARY	2 00	х		х		0	0	0
(5) ANNETTE HINKLE TREASURER	2 00	x		х		0	0	0
(6) donna DEPHAMPLIS DIRECTOR	2 00	×				0	0	0
(7) lucY LOPEZ DIRECTOR	2 00	x				0	0	0
(8) rayMOND MARSHALL DIRECTOR	2 00	x				0	0	0
(9) DINAH PYLES DIRECTOR	2 00	×				0	0	0
(10) bea rodgers DIRECTOR	2 00	×				0	0	0
(11) T Jared Morris DIRECTOR	2 00	x				0	0	0
(12) PHILLIP WEINTRAUB DIRECTOR	2 00	x				0	0	0

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139.048

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0

16,941

Form **990** (2016)

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Х

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Page 8

5

(B)

Description of services

Νo

(C)

Compensation

Form 990 (2016)

Par	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related	(	ne bo	n of or/t	t che inles ficer rust	s pers and a ee)	son	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportabl compensati from relate organizatio (W- 2/109	ion ed ins	Estima amount o compen from organizat	ated of other sation the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	key employee	Highest compensated employee	Former	2/1099-MI3C)	MISC)		relat organiza	ed
`	ANDE KOLP  UTIVE DIRECTOR EFFECTIVE 6-27-17	40 00			х				0		0		0
		-											
с Т	Sub-Total	VII, Section A		•	•	•			139,048		0		16,941
2	Total number of individuals (including but of reportable compensation from the orga	t not limited to t			abov	e) w	/ho re	ceive	ed more than \$100	,000	I		
												Yes	No
3	Did the organization list any <b>former</b> offic line 1a? <i>If "Yes," complete Schedule J for</i>							ııghe •	est compensated er	nployee on	3		No
4	For any individual listed on line 1a, is the organization and related organizations gr									he			
	ındıvıdual			•	•	•	•	•			4	Yes	

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

from the organization Report compensation for the calendar year ending with or within the organization's tax year

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

	///d///ddd	•	•		-	•	•	•	•	•	•	•	•	•	•	•	•	•	•
5	Did any	oerso	n liste	ed on	line	1a re	eceive	or	accr	ue	comp	ens	atıor	n fro	m a	any	unre	lated	org
	services	rende	ered to	o the	orga	nızat	tion? <i>l</i>	f "Y	'es,"	cor	nplet	te So	ched	ule J	J for	rsu	ch pe	erson	

Section B. Independent Contractors

compensation from the organization ▶ 0

# or accrue compensation from any unrelated organization or individual for

(A)

Name and business address

Part		<b>II</b> Statement of	Revenue								rage <b>3</b>
		<del></del>		a respo	onse or note to ar	ny line in t	this Part VIII	·			$\square$
						(	(A) revenue	(B) Related exem function reven	d or pt on	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1:	a Federated campaig	ns	1a	2,088	<u> </u>		100011	uc		312 314
nts ints		<b>b</b> Membership dues		1b	270,511	<del>-</del>					
3ra not		c Fundraising events		1c		-					
S, (		<b>d</b> Related organizatio		1d		-					
Giff Ilar		e Government grants (co		1e	1	-					
Si m		f All other contributions,				-					
tion er S		and similar amounts n		1f	46,474						
Contributions, Gifts, Grants and Other Similar Amounts		g Noncash contribution	ons included								
a tr		ın lınes 1a-1f \$									
Cont	ŀ	<b>n Total.</b> Add lines 1a-1	.f		>		319,073				
Пе					Busine	ss Code					
Ven		Convention				900099		54,160	54,16		
å.	b	CHAPTER AND MEMBER	SUPPORT			900099		18,675	18,67	5	
Service Revenue	c									1	
**	d	I ————									
ranı	e	•									
Program		All other program se				72,835					
٩		Total.Add lines 2a-2f			<u> </u>			1			
		Investment income (ii similar amounts) .			interest, and othe	er ▶	62,537	7			62,537
	4	Income from investme	ent of tax-exe	mpt be	ond proceeds	<b>▶</b>					
	5	Royalties				▶					
		_	(ı) Rea	I	(II) Personal						
	6a	Gross rents									
	Ŀ	Less rental expenses									
		Rental income or				_					
	,	(loss)									
	c	Net rental income o	r (loss)								
			(ı) Securit	ties	(II) Other						
	7a	Gross amount from sales of	1,4	61,601							
		assets other than inventory									
	Ŀ	Less cost or				_					
		other basis and sales expenses	1,3	320,486	1,1	184					
		Gain or (loss)		.41,115	-1,1	184					
		d Net gain or (loss)		•	<b>•</b>		139,93				139,931
e	8a	Gross income from for form for the control of the c		ents of							
Other Revenue		contributions reporte See Part IV, line 18		_	]						
ev		Less direct expense		a b							
ř		Net income or (loss)			ents						
the	9a	Gross income from g		ies							
0		See Part IV, line 19		а	}						
	Ŀ	Less direct expense	s	b		_					
		: Net income or (loss)			les						
	10	aGross sales of invent	ory, less								
		returns and allowand	ces	a	}						
	Ŀ	Less cost of goods s	sold	b		$\dashv$					
		Net income or (loss)		invent	tory ▶						
		Miscellaneous			Business Code						
	11	La <sub>MISCELLANEOUS</sub>			9000	99	1,625	5			1,625
	Ł										
	ď	=									
		d All other revenue .									
	•	Total. Add lines 11a	-11d		•		1,625	5			
	12	<b>2 Total revenue.</b> See	Instructions				596,00:		72,835		0 204,093
							330,00	- 1	. 2,000		Form <b>990</b> (2016)

Form 990 (2016)				Page <b>10</b>
Part IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all c Check if Schedule O contains a response or note to any	_	·	. ,	
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21		,	3 '	
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, line 15 and 16				
4 Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	165,597	151,510	12,577	1,510
<b>6</b> 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	134,149	120,728	13,421	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	947	866	72	9
9 Other employee benefits	21,333	19,414	1,842	77
<b>10</b> Payroll taxes	19,714	17,866	1,755	93
11 Fees for services (non-employees)				
a Management				
<b>b</b> Legal	16,558	4,607	11,922	29
c Accounting	44,746	42,500	2,246	
<b>d</b> Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	28,667		28,667	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)	33,804	31,232	1,801	771
12 Advertising and promotion	855	855		
13 Office expenses	23,722	16,834	1,022	5,866
<b>14</b> Information technology	2,418	2,225	179	14
15 Royalties				
<b>16</b> Occupancy	32,357	29,774	2,398	185
<b>17</b> Travel	10,960	10,537	399	24
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials .				
<b>19</b> Conferences, conventions, and meetings	75,407	75,099	302	6
<b>20</b> Interest	3,954	3,638	293	23
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	11,715	10,780	868	67
23 Insurance	1,884	1,733	140	11
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a DUBLIC POLICY FELLOWSHI	20,000	20.000		

15,538

7,049

5,246

3,788

680,408

15,088

7,049

5,246

3,101

590,682

390

637

80,931

60

50

8,795

Form **990** (2016)

**b** DUES & SUBSCRIPTIONS

c Property taxes

e All other expenses

25 Total functional expenses. Add lines 1 through 24e

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 ▶ ☐ If following SOP 98-2 (ASC 958-720)

d TRAINING

Page **11** 

3,150

41,761

86.595

128,356

3.053.698

14,375

52.113

3,120,186

3.248.542 Form **990** (2016)

3.248.542

Form 990 (2016)

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33 34

Liabilities 22

Fund Balances

Assets or

Net

Other assets See Part IV, line 11 .

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958),

check here > and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . . .

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Total assets. Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and

	Bogilling of your		Lina or your
1 Cash-non-interest-bearing	380	1	380
2 Savings and temporary cash investments	97,146	2	107,349
3 Pledges and grants receivable, net		3	
4 Accounts receivable, net	6,338	4	3,416
Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		5	
6 Loans and other receivables from other disqualified persons (as defined under			

		·						
	5	Loans and other receivables from current and for trustees, key employees, and highest compensa II of Schedule L			5			
S	6	section $4958(f)(1)$ ), persons described in section contributing employers and sponsoring organiza	and other receivables from other disqualified persons (as defined under n 4958(f)(1)), persons described in section 4958(c)(3)(B), and putting employers and sponsoring organizations of section 501(c)(9) ary employees' beneficiary organizations (see instructions) Complete of Schedule L					
eta	7	Notes and loans receivable, net		7				
Assets	8	Inventories for sale or use		8				
A	9	Prepaid expenses and deferred charges			17,181	9	21,364	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	455,180				
	b	Less accumulated depreciation	accumulated depreciation 10b 31,945				423,235	
1	4.4	Turning the control of the deal of the control of			2 525 024	44	2 690 649	

ets	7	contributing employers and sponsoring organiza- voluntary employees' beneficiary organizations Part II of Schedule L Notes and loans receivable, net	` ' ' '		7		
Ass	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges			17,181	9	21,364
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	455,180			
	ь	Less accumulated depreciation	10b	31,945	432,889	<b>10</b> c	423,235
	11	Investments—publicly traded securities .			2,535,924	11	2,689,648
	12	Investments—other securities See Part IV, line			12		
	13	Investments—program-related See Part IV, line			13		
	14	Intangible assets			14		

3.150

35,734

200 19

93.903

129.837

2.902.357

8.701

52.113

2,963,171

3.093.008

3.093.008

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Form	990 (2016)				Page <b>12</b>
Par	t XI Reconcilliation 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			596,001
2	Total expenses (must equal Part IX, column (A), line 25)	2			680,408
3	Revenue less expenses Subtract line 2 from line 1	3			-84,407
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2	,963,171
5	Net unrealized gains (losses) on investments	5			241,422
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 in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		3	,120,186
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				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
			<u>.</u> .		
D	Were the organization's financial statements audited by an independent accountant?	h	2b	Yes	<b></b>
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	Dasis,			
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
3.	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Su	nalo			

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

За

3b

No

Form **990** (2016)

Audit Act and OMB Circular A-133?

### Additional Data

Software ID:

Software Version:

**EIN:** 52-0741602

Name: THE ARC MARYLAND INC

Form 990 (2016)

Form 990, Part III, Line 4a:

ADVOCACY Systems advocacy for the rights and quality of life of persons with intellectual and developmental disabilities. Helped families secure post-secondary services for students exiting special education (transitioning youth) Helped families receive services through the autism waiver. Systems advocacy and improvement at the state level to ensure and strengthen human and civil rights for persons with intellectual and developmental disabilities includes lifespan oriented rights in public education and special education and continuing education, child care, housing, transportation, employment and family supports (Continued on Schedule O)Legislative advocacy impacted 100,000

individuals and families, including education rights, special education, child care, transition planning from school to adult life, and privacy protections Leadership on behalf of 7,000 children and adults and their families on state waiting lists. Lead statewide grassroots campaign effort to educate the public and decision makers about these needs

Other Programs include Self Advocacy Network offices offers peer mentoring, training and promotes leadership by people with developmental disabilities. Together We're Better promotes inclusive education Community-Awareness training on intellectual and developmental disabilities

#### Form 990, Part III, Line 4b: Chapter and Member Support Provide information and support to local chapters to provide quality services and supports. Support The Arc Leadership Program to develop staff leadership at the local chapter level Provide ongoing information to chapters about state and federal rights, laws and policies so they can utilize information at the local

level Provide consultation and training to chapters on self advocacy leadership. Ensure chapter involvement in state-level policy development through The Arc of Maryland

Education, Governmental Affairs and Legal Advocacy Committees state-wide Conduct Awards and recognition program for chapter, volunteer and program

excellence Promote public awareness about intellectual and developmental disabilities through social media

efile	GR/	APHIC pri	nt - DO NOT PROCE	:SS	As Filed Data -			DLN: 9	3493072013598
SCH	IED	ULE A	Publ	ic C	harity Statu	s and Pul	olic Supp	ort	OMB No 1545-0047
(For	n 990			he org	ganization is a secti	ion <b>501</b> (c)(3) d	organization o		2016
990E	Z)			4	4947(a)(1) nonexe ▶ Attach to Form 9				2010
•		the Treasury	► Information	about	Schedule A (Form			ıctions is at	Open to Public Inspection
lame	of th	ue Service ne organiza	tion		www.irs.go	<u> </u>		Employer identific	<u> </u>
HE AF	RC MAR	YLAND INC						52-0741602	
Pai			for Public Charity S					See instructions.	
	ganız.		a private foundation bed		•	•	•		
1	Ш	•	onvention of churches,					(A)(I).	
2			scribed in <b>section 170</b>			,	• • • • • • • • • • • • • • • • • • • •		
3		•	or a cooperative hospita		-				
4		name, city,	esearch organization op and state						<u> </u>
5	Ш		ation operated for the be (iv). (Complete Part II		of a college or univer	sity owned or op	perated by a gov	ernmental unit descri	bed in <b>section 170</b>
6		A federal, s	tate, or local governme	nt or g	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)( <i>t</i>	۱)(v).	
7			ation that normally rece <b>'0(b)(1)(A)(vi).</b> (Com			s support from a	governmental u	ınıt or from the gener	al public described in
8		A communi	ty trust described in <b>se</b>	ction	170(b)(1)(A)(vi)	Complete Part I	I )		
9			ural research organization rant college of agricultur						ege or university or a
0	✓	from activit	ation that normally rece les related to its exemp income and unrelated to See section 509(a)(2)	t func busine	tions—subject to cert ss taxable income (le	ain exceptions,	and (2) no more	than 331/3% of its su	pport from gross
.1	П	-	ation organized and ope	•		public safety S	ee section 509	(a)(4).	
.2		more public	ation organized and ope ly supported organizati through 12d that desci	ons de	escribed in section 5	<b>09(a)(1)</b> or <b>sec</b>	ction 509(a)(2	). See section 509(a	
а	П		supporting organization		· · · · · -	_	•		giving the supported
			n(s) the power to regula Part IV, Sections A ar		ppoint or elect a majo	rity of the direct	ors or trustees	of the supporting orga	nization You must
b		Type II. A manageme	supporting organization nt of the supporting org	n supe Janizat	ion vested in the san				
С		Type III fo	plete Part IV, Section unctionally integrated organization(s) (see inst	d. A su	ipporting organization				ited with, its
d		Type III n functionally	on-functionally integrated The organization  integrated The organization  i) You must complete	<b>rated</b> . zation	A supporting organi generally must satisf	zation operated y a distribution i	ın connection wi	th its supported organ	
e			box if the organization r		•	-	RS that it is a Ty	pe I, Type II, Type II	I functionally
f			or Type III non-function		ntegrated supporting	organization	·		
g			of supported organizati ing information about tl		norted organization(	-)			
		f supported o			(iii) Type of	) (i)	v)	(v)	(vi)
•					organization (described on lines 1- 10 above (see instructions))	Is the organiz your governir	ation listed in	Amount of monetary support (see instructions)	Amount of other support (see instructions)
						Yes	No		
				-+					
Γotal			tion Act Notice, see tl			Cat No 11285		 Schedule A (Form 9	<u> </u>

Sch	nedule A (Form 990 or 990-EZ) 2016						Page <b>2</b>
P	art II Support Schedule for	Organizations	Described in S	ections 170(b	)(1)(A)(iv) ar	d 170(b)(1)(A	(vi)
	(Complete only if you ch	ecked the box o	n line 5, 7, 8, o	r 9 of Part I or i	f the organization	on failed to quali	
	III. If the organization fa	ails to qualify un	der the tests lis	ted below, plea:	se complete Par	t III.)	
	Section A. Public Support		T	ı		1	
	Calendar year (or fiscal year beginning in) ▶	(a)2012	<b>(b)</b> 2013	(c)2014	(d)2015	<b>(e)</b> 2016	(f)Total
1	Gifts, grants, contributions, and						
-	membership fees received (Do not						
	include any "unusual grant ")						
2	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
_	shown on line 11, column (f)						
6	<b>Public support.</b> Subtract line 5 from line 4						
	Section B. Total Support	1	•		•	•	
	Calendar year	(a)2012	<b>(b)</b> 2013	(c)2014	(d)2015	(e)2016	(f)Total
_	(or fiscal year beginning in) ▶	(4)2012	(6)2013	(6)2014	(4)2013	(0)2010	(1)10tai
7							
8	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
9							
	activities, whether or not the						
10	business is regularly carried on Other income Do not include gain or						
10	loss from the sale of capital assets						
	(Explain in Part VI )						
11	<del>_</del> _						
4.5	10 Gross receipts from related activities,	etc (see instruction	l ns)			12	
13	First five years. If the Form 990 is for	=				-	anization,
	check this box and stop here				<u> </u>	<u> ▶ ∟</u>	
	Section C. Computation of Public	• •		(6)			
	Public support percentage for 2016 (III			column (f))		14	
	Public support percentage for 2015 Sc					15	
16	a <b>33 1/3% support test—2016.</b> If the	e organization did r	not check the box	on line 13, and lir	ne 14 is 33 1/3% o	r more, check this	
	and <b>stop here.</b> The organization qual						ightharpoons
b	<b>33 1/3% support test—2015.</b> If th	ie organization did	not check a box of	on line 13 or 16a,	and line 15 is 33 i	/3% or more, chec	k this
	box and <b>stop here.</b> The organization						▶□
<b>17</b> a	a 10%-facts-and-circumstances test						
	is 10% or more, and if the organization in Part VI how the organization meets						
		the racts-and-cire	cumstances test	rne organization	quaimes as a pubi	iciy supported	. □
	organization	rt_2015 If the	raanization did ===	t chack a hay as !	mo 12 165 164	or 17a and line	▶⊔
b	10%-facts-and-circumstances tes 15 is 10% or more, and if the organization						
	Explain in Part VI how the organization						
	supported organization			-	•	•	▶ □
18	B 1 1 6 1 11 7611	on did not check a	box on line 13, 1	6a, 16b, 17a, or 1	.7b, check this box	and see	· <b>—</b>
	instructions		, -	. , ,	,		►□
					Schodu	le A (Form 990 o	r 990-F7) 2016

(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.)

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

Section A. Public Support Calendar vear **/- 32012** /L30040 / - NOO4 4 (4)2045 1-12010 / CNT - 1 - 1

Part III

	(or fiscal year beginning in) ▶	(a)2012	( <b>b)</b> 2013	(C)2014	(a)2015	(e)2016	(T) I otal
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	442,331	366,256	329,996	715,481	319,073	2,173,137
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	3,358	4,144	51,056	48,419	72,835	179,812
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						

The value of services or facilities furnished by a governmental unit to

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

> assets (Explain in Part VI ) Total support. (Add lines 9, 10c,

check this box and stop here

Section C. Computation of Public Support Percentage

Public support percentage from 2015 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

Investment income percentage from 2015 Schedule A, Part III, line 17

11, and 12)

the organization without charge

445,689

370,400

381,052

459,860

836,898

456,070

Schedule A (Form 990 or 990-EZ) 2016

16

17

18

763,900

391,908

2,727,831

86 260 %

86 810 %

13 450 %

12 420 %

▶□

2,352,949

	\$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						0
8	<b>Public support.</b> (Subtract line 7c from line 6 )						2,352,949
Se	ection B. Total Support						_
	Calendar year (or fiscal year beginning in) ▶	(a)2012	<b>(b)</b> 2013	(c)2014	( <b>d)</b> 2015	(e)2016	<b>(f)</b> Total
9	Amounts from line 6	445,689	370,400	381,052	763,900	391,908	2,352,949
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	82,446	74,444	78,307	69,113	62,537	366,847
ь	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	82,446	74,444	78,307	69,113	62,537	366,847
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital	2,024		501	3,885	1,625	8,035

444,844

First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization.

19a 331/3% support tests—2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not

b 33 1/3% support tests—2015. 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

530,159

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))

Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))

14

15

16

17

18

20

Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete

amendment to the organizing document)

organization's organizing document?

provide detail in Part VI.

answer line 10b below

6

7

10a

Schedule A (Form 990 or 990-EZ) 2016

Sections A and D, and complete Part V ) Section A. All Supporting Organizations

Page 4

4c

5a

5b 5c

6

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

			res	MO
L	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1		
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 <b>Part VI</b> how the organization determined that the supported organization was described			
	ın section 509(a)(1) or (2)			

		1	1
	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 <b>Part VI</b> how the organization determined that the supported organization was described		
	ın section 509(a)(1) or (2)	2	Г
•	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	
1	Did the organization confirm that each supported organization qualified under section 501(c)(4) (5) or (6) and satisfied		Г

	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 (b) and (c)		
	below	3a	
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 <b>Part VI</b> when and how the organization made the		
	determination	3b	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		

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 <b>Part VI</b> when and how the organization made the			
	determination	3b		
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 <b>Part VI</b> 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 12a or 12b in Part I, answer (b) and (c) below			

	the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the			
	determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) 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 <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	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

Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) 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

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

than (1) its supported organizations. (11) 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

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's supported organizations? If "Yes," provide detail in Part VI.

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7			
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"				
	complete Part I of Schedule L (Form 990 or 990-EZ)				
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as				

Par	** 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 in (b) and (c) below, the						
	governing body of a supported organization?	11a					
b	A family member of a person described in (a) above?	11b					
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c					
C-	ection B. Type I Supporting Organizations						
se	ection B. Type I Supporting Organizations		Yes	No			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint of	ır 🗀	1.03	""			
	elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Pa						
	<b>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 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting						
	organization	2					
			•	•			
Se	ection C. Type II Supporting Organizations		Yes	N.			
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees	of [	res	No			
1	were a majority of the organization's directors of trustees during the tax year also a majority of the directors of trustees each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the	or					
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)						
		1					
				•			
Se	ection D. All Type III Supporting Organizations		T.				
	Did the appropriate provide to each of the growth of account to the last the cold of the cold of the	,	Yes	No			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of						
	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	-	<u> </u>			
2	West and the second of the second sec						
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 <b>Part VI</b> how the organization						
	maintained a close and continuous working relationship with the supported organization(s)						
_	Divinion of the valeting described in (2) did the surround of	2					
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in torganization's investment policies and in directing the use of the organization's income or assets at all times during the t						
	year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3					
			1				
	ection 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 instr	actions)					
a							
b							
С	The organization supported a governmental entity Describe in <b>Part VI</b> how you supported a government entity (	see instru	ictions)	)			
2	Activities Test Answer (a) and (b) below.	_	Yes	No			
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 <b>Part VI identify those supporte</b> organizations and explain how these activities directly furthered their exempt purposes, how the organization was	<b>3</b>					
	responsive to those supported organizations, and how the organization determined that these activities constituted	<u> </u>					
	substantially all of its activities	2a					
b	Did the activities described in (a) 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	2b					
3	Parent of Supported Organizations Answer (a) and (b) below.	_					
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each the supported organizations? Provide details in Part VI.	of <b>3a</b>					
h	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its	<u> </u>	1				
,	supported organizations? If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard	3b					
		,	1				

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		
	Section 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)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	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 1-1/2% 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 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		

2

4

Schedule A (Form 990 or 990-FZ) 2016

Enter 85% of line 1

Enter greater of line 2 or line 3

Minimum asset amount for prior year (from Section B, line 8, Column A)

Schedule A (Form 990 or 990-EZ) (2016)

e Excess from 2016. . . .



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## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

DLN: 93493072013598

**Employer identification number** 

☐ Yes

☐ Yes

□ No

52-0741602

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Proxy Tax) (see separate instructions), then

Name of the organization

Political expenditures Volunteer hours

Was a correction made?

If "Yes," describe in Part IV

THE ARC MARYLAND INC

Part I-A

Part I-B

1 2

3

h

1

2

3

5

• Section 501(c)(4), (5), or (6) organizations Complete Part III

EZ)

SCHEDULE C (Form 990 or 990-

> ▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

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), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

Provide a description of the organization's direct and indirect political campaign activities in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt

Enter the amount directly expended by the filing organization for section 527 exempt function activities

Complete if the organization is exempt under section 501(c)(3).

Enter the amount of any excise tax incurred by organization managers under section 4955

Enter the amount of any excise tax incurred by the organization under section 4955

If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

• Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization fileForm 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-

106,794

14,946

26,699

7,473

Lobbying nontaxable amount

(150% of line 2a, column(e)) Total lobbying expenditures

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Grassroots ceiling amount

Lobbying ceiling amount

2a

108,581

7,017

27,145

3,508

112,512

15,304

28,128

7,652

127,061

38,582

31,765

19,291

Schedule C (Form 990 or 990-EZ) 2016

454,948

682,422

75,849

113,737

170.606

37,924

Return Reference

activity

Volunteers?

1

(b)

Amount

(a)

Yes

No

#### 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 2a 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? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) Part III-A (6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 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). 2a Current year 2b Carryover from last year c Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information 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

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

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

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

As Filed Data -

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990,

OMB No 1545-0047

DLN: 93493072013598

(Form 990)

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. Open to Public Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service Name of the organization **Employer identification number** THE ARC MARYLAND INC 52-0741602 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during 3 Aggregate value of grants from (during year) 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's exclusive legal control? ☐ Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? □ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not 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, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (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 (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the 2 following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2016

Lol	41111	Organizations M	aintaining Coi	lections of Art	, HISTO	ricai i	reas	ures, o	r Otner	Similar A	<u>ssets (</u>	continued)
3		the organization's acq (check all that apply)	uisition, accession	n, and other record	ds, check	cany of	the f	ollowing t	that are a	sıgnıfıcant ı	use of it	s collection
а		Public exhibition			d		Loar	n or exch	ange prog	ırams		
b		Scholarly research			е		Oth	er				
c		Preservation for future	e generations									
4	Provi Part )	de a description of the	organızatıon's col	lections and expla	ın how tl	ney furt	her th	ne organiz	zation's ex	xempt purpo	se in	
5	Durin	ig the year, did the org is to be sold to raise fur								nılar	□ <b>Y</b>	es 🗆 No
Pa	rt IV	Escrow and Cust Complete if the or X, line 21.			orm 99	0, Part	: IV,	line 9, o	r reporte	ed an amou	unt on	Form 990, Part
1a		e organization an agent ded on Form 990, Part		an or other Interm	ediary fo	or contr	ibutio	ns or othe	er assets	not	□ <b>Y</b> €	es 🗆 No
ь	If "Ye	es," explain the arrange	ement in Part XIII	and complete the	followin	g table				A	mount	
c	Begir	nning balance							1c			
d	Addıt	ions during the year							1d			
е	Dıstrı	butions during the year	r						1e			
f	Endır	ng balance							1f			
<b>2</b> a	Dıd tl	he organization include	an amount on Fo	rm 990, Part X, lır	ne 21, fo	r escrov	v or c	ustodial a	account lia	ability?	□ Ye	es 🗆 No
b	If "Y∈	es," explain the arrange	ement in Part XIII	Check here if the	explana	ition ha	s beei	n provide	d in Part )	XIII		
Pa	rt V	Endowment Fun										
			<u> </u>	(a)Current year		Prior yea			ears back	(d)Three ye		(e)Four years back
1a	Beginn	ing of year balance .		60,81	.4	6	6,651		65,667		54,793	52,113
b	Contrib	outions										
c	Net inv	estment earnings, gair	ns, and losses	8,80	17	-	4,207		984		10,874	2,680
d	Grants	or scholarships										
е		expenditures for faciliting	es	3,13	13		1,630		0		0	0
f	Admını	strative expenses .										
g	End of	year balance		66,48	8	6	0,814		66,651		65,667	54,793
2	Provi	de the estimated perce	ntage of the curre	ent year end balan	ce (line	1g, colu	ımn (a	a)) held a	ıs			
а	Board	d designated or quasi-e	ndowment 🟲	0 %								
b	Perm	anent endowment 🕨	78 380 %									
С	Temp	orarily restricted endo	wment ► 21 6	520 %								
	The p	percentages on lines 2a	, 2b, and 2c shou	ld equal 100%								
3а		here endowment funds	not in the posses	sion of the organiz	zation th	at are h	neld a	nd admın	istered fo	r the		LV LN
	-	nization by nrelated organizations									<b>-</b>	Yes No
		elated organizations					•	• •				a(ii) No
b		es" on 3a(II), are the re		ns listed as require	d on Sch	· · nedule F	٠,	• •				3b
4		ribe in Part XIII the inte	-	·							L	
Pa	rt VI	Land, Buildings,	and Equipmen	nt.								
		Complete if the or	ganızatıon answ	vered 'Yes' on Fo	orm 990	), Part	IV, lı				rt X, lın	e 10.
	Descri	iption of property	(a) Cost or oth (Investme		st or othe	er basıs (	other)	(c)Acc	umulated d	lepreciation		(d)Book value
<b>1</b> a	Land					2	17,768	3				217,768
b	Buildin	gs				1	93,785	5		4,824		188,961
c	Leaseh	old improvements						1				
d	Equipn	nent					43,627	7		27,121		16,506
								1				
		lines 1a through 1e (Co	olumn (d) must e	gual Form 990 Pa	rt X coli	ımn (R	line	10(c) )				422 225

Part VIII Investments—Other Securities. Complete if the org See Form 990, Part X, line 12.	janization answer	ed 'Yes' on Form 990	, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b)Book value		d of valuation -year market value
(1)Financial derivatives			,
2)Closely-held equity interests     3)Other	_		
A)			
В)			
C)			
D)			
E)			
F)			
G)			
H)			
otal. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. Complete if the or See Form 990, Part X, line 13.	rganization answe	ered 'Yes' on Form 99	00, Part IV, line 11c.
(a) Description of investment	(b) Book value		d of valuation -year market value
1)			·
2)			
3)			
4)			
5)			
6)			
7)			
8)			
9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )			
Part IX Other Assets. Complete if the organization answered 'Yes'  (a) Description	on Form 990, Part I	V, line 11d See Form 9	90, Part X, line 15 (b) Book value
1)			
2)			
3)			
4)			
5)			
6)			
7)			
8)			
9)			
otal. (Column (b) must equal Form 990, Part X, col (B) line 15 )		000 D- 17/ 1 11	<b>b</b>
Other Liabilities. Complete if the organization answe See Form 990, Part X, line 25.			e or III.
(a) Description of liability  1) Federal income taxes	(b) Book	value	
MARYLAND CONFERENCE OF EXECUTIVE FUNDS		73,312	
APITAL IEASE 3)		13,283	
4)	İ		
5)			
5) 6)			
5) 6) 7)			
<ul><li>4)</li><li>5)</li><li>6)</li><li>7)</li><li>8)</li></ul>			
5) 6) 7)			

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

2a

2b

2c 2d

4b

Explanation

366

28,667

2e

3

4c

5

Page 4

28,667

596,001

652,107

366

651.741

28,667

680,408

Schedule D (Form 990) 2015

Investment expenses not included on Form 990, Part VIII, line 7b. 28,667 4a

Other (Describe in Part XIII ) . . . . . 4b b Add lines 4a and 4b . . . 4c c

5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . .

Part XII

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . . .

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

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses and losses per audited financial statements .

Donated services and use of facilities .

Prior year adjustments . . .

Other (Describe in Part XIII ) . Add lines 2a through 2d .

Subtract line 2e from line 1 .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Other losses .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Other (Describe in Part XIII ) . . . . .

Supplemental Information

Investment expenses not included on Form 990, Part VIII, line 7b .

Schedule D (Form 990) 2016

Part XI

1

2

а b

d

е 3

а

b

C

Part XIII

5

4

Page <b>5</b>	Schedule D (Form 990) 2015
inued)	Part XIII Supplemental Information (co
Explanation	Return Reference

Schedule D (Form 990) 2016

### **Additional Data**

Software ID: Software Version:

**EIN:** 52-0741602

NEFIT INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES

Name: THE ARC MARYLAND INC

INCOME ON THE ENDOWMENT FUNDS ARE TO BE USED TO SUPPORT SPECIFIC PROGRAMS THAT DIRECTLY BE

Part V, Line 4

Return Reference Explanation

**Supplemental Information** 

applemental information							
Return Reference	Explanation						
Part X, Line 2	THE ASSOCIATION FOLLOWS THE GUIDANCE OF ASC 740-10, "ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES" WHICH CLARIFIES THE ACCOUNTING FOR THE RECOGNITION AND MEASUREMENT OF THE BENEFITS OF INDIVIDUAL TAX POSITIONS IN THE FINANCIAL STATEMENTS, INCLUDING THOSE OF NON-PROFIT ORG ANIZATIONS TAX POSITIONS MUST MEET A RECOGNITION THRESHOLD OF MORE-LIKELY-THAN-NOT IN ORD ER FOR THE BENEFIT OF THOSE TAX POSITIONS TO BE RECOGNIZED IN THE ORGANIZATION'S FINANCIAL STATEMENTS THE ASSOCIATION ANALYZES TAX POSITIONS TAKEN, INCLUDING THOSE RELATED TO THE REQUIREMENTS SET FORTH IN IRS SEC 501(C) TO QUALIFY AS A TAX EXEMPT ORGANIZATION, ACTIVIT IES PERFORMED BY VOLUNTEERS AND BOARD MEMBERS, THE REPORTING OF UNRELATED BUSINESS INCOME, AND ITS STATUS AS A TAX-EXEMPT ORGANIZATION UNDER MARYLAND STATE STATUTE THE ORGANIZATIO N DOES NOT KNOW OF ANY TAX BENEFITS ARISING FROM UNCERTAIN TAX POSITIONS AND THERE WAS NO EFFECT ON THE ASSOCIATION'S FINANCIAL POSITION OR CHANGES IN NET ASSETS AS A RESULT OF ANA LYZING ITS TAX POSITIONS FISCAL YEARS ENDING ON OR AFTER JUNE 30, 2014 REMAIN SUBJECT TO EXAMINATION BY FEDERAL AND STATE AUTHORITIES						

Supplemental Information

DLN: 93493072013598

OMB No 1545-0047

2015

## Schedule J

(Form 990)

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.qov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

THE ARC MARYLAND INC

Name of the organization

**Employer identification number** 

			52-0741602			
Pa	rt I Questions Regarding Compensation					
					Yes	No
<b>1</b> a	Check the appropiate box(es) if the organization provi- 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel		Housing allowance or residence for personal use			
	☐ Travel for companions	•	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	· 				
	Discretionary spending account		Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the orgarembursement or provision of all of the expenses desc			1b		
2	Did the organization require substantiation prior to rei directors, trustees, officers, including the CEO/Execu					
	uncetors, trustees, officers, merading the elo/execu		recess, regarding the items effected in fine 14.	2		
3	Indicate which, if any, of the following the filing organize organization's CEO/Executive Director Check all that used by a related organization to establish compensat	t appl	y Do not check any boxes for methods			
	□ Compensation committee	Ľ	Written employment contract			
	Independent compensation consultant		Compensation survey or study			
	Form 990 of other organizations	Ľ	Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Pa or a related organization	art V I	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pa	ymer	nt?	4a		Νo
b	Participate in, or receive payment from, a supplement	al nor	nqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-bas	ed co	impensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and prov	ıde th	ne applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organization	ons m	ust complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, I compensation contingent on the revenues of	ine 1	a, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		No
	If "Yes," on line 5a or 5b, describe in Part III					
6	For persons listed on Form 990, Part VII, Section A, I compensation contingent on the net earnings of	ine 1	a, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," on line 6a or 6b, describe in Part III					
7	For persons listed on Form 990, Part VII, Section A, I payments not described in lines 5 and 6? If "Yes," des	ine 1. scribe	a, did the organization provide any non-fixed e in Part III	7		No
8	Were any amounts reported on Form 990, Part VII, pa					
	subject to the initial contract exception described in R					
	ın Part III			8		Νo
9	If "Yes" on line 8, did the organization also follow the is section 53 4958-6(c)?	rebuti	table presumption procedure described in Regulations	9		

Page 2

Schedule J (Form 990) 2015

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	<b>(F)</b> Compensation in
		Base (1) compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
1 CRISTINE MARCHAND	/:\	139.048	0	0	7 212	0.720	155.000	0

7.212

9.729

155.989

EXECUTIVE DIRECTOR THROUGH 7-31-17

Schedule J (Form 990) 2015

Return Reference	Explanation						
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 III Supplemental Information							
Schedule J (Form 990) 2015	Page <b>3</b>						

Schedule J (Form 990) 2015

efile GRAPH	IC print	- DO NOT PROCESS	As Filed Data -		DLN:	93493072013598	
SCHEDUL (Form 990 or EZ)	990-	Complete to prov Form 990 o	vide information fo r 990-EZ or to prov ▶ Attach to Forn Schedule O (Form	on to Form 990 or S r responses to specific quest ide any additional information n 990 or 990-EZ, 990 or 990-EZ) and its instruct ov/form990.	ions on on.	2016 Open to Public Inspection	
Name of the org	Employer identif	fication number					
Return Reference	e O, Supp	olemental Information	1	Explanation			
Form 990, Part VI, Section A, line 6	990, Classes of Members are as follows Individual Membershipobtained by those individuals wh o are members in good standing of a local member chapter in accordance with membership sta						

Return Explanation
Reference

line 7a

Form 990, SEE EXPLANATION FOR LINE 6 REGARDING VOTING RIGHTS OF MEMBERS
Part VI,
Section A.

Return Explanation
Reference

Form 990, Part VI, Section B, Inne 11b

Return Explanation
Reference

Form 990,
Part VI,
Section B,
Inne 12c

BOARD MEMBERS MUST SUBMIT ANNUALLY A WRITTEN STATEMENT TO THE EXECUTIVE COMMITTEE ACKNOWLE
ACKNOWLE
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# 990 Schedule O, Supplemental Information Return Explanation

Reference

Form 990,	THE BOARD PRESIDENT COMPLETES A PERFORMANCE REVIEW OF EXECUTIVE DIRECTOR AND MEETS WITH EX
Part VI,	ECUTIVE COMMITTEE THE EXECUTIVE COMMITTEE REVIEWS COMPARABILITY DATA OF OTHER EXECUTIVE D
Section B,	IRECTORS OF NOT FOR PROFIT ORGANIZATIONS REPORTED ON THE GUIDESTAR WEBSITE AND ON MARYLAND
line 15	ASSOCIATION OF NONPROFIT ORGANIZATIONS THE EXECUTIVE COMMITTEE'S COMPENSATION RECOMMENDA
	TION IS PRESENTED TO THE BOARD OF DIRECTORS FOR FINAL APPROVAL

Return Explanation

Form 990,
Part VI,
Section C,
Inne 18

Return Explanation
Reference

Form 990, GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST
Part VI,
Section C,
Inne 19

# 990 Schedule O, Supplemental Information Return Explanation

Reference

FORM 990,	THE BOARD OF DIRECTORS ARE RESPONSIBLE FOR THE SELECTION OF THE INDEPENDENT AUDITOR ON AN
PART XII,	ANNUAL BASIS THE FINANCE COMMITTEE IS RESPONSIBLE FOR THE OVERSIGHT OF THE AUDIT OF THE F
LINE 2C	INANCIAL STATEMENTS THE FINANCE COMMITTEE PRESENTS THE AUDIT REPORT AND FINANCIAL STATEME
FINANCIAL	NTS TO THE BOARD OF DIRECTORS
STATEMENTS	
AND	
REPORTING	

Return Reference	Explanation
PART I LINE 6 VOLUNTEERS	THE ARC OF MARYLAND HAS ACTIVE VOLUNTEER INVOLVEMENT IN ITS GOVERNANCE AND THROUGHOUT THE ORGANIZATION THE ARC IS GOVERNED BY A VOLUNTEER BOARD OF DIRECTORS, WITH WORKING COMMITTE ES AND TASK FORCES COMPRISED OF VOLUNTEERS THE ORGANIZATION CONDUCTS ANNUAL BOARD ORIENTA TION THAT INCLUDES THE SCOPE AND ROLE OF BOARD MEMBERS AND COMMITTEES/TASK FORCES ATTENDE ES RECEIVE BOARD POLICIES AND A BOARD MANUAL AT THIS TIME ALL BOARD MEMBERS, COMMITTEE ME MBERS AND ANY OTHERS PERIODICALLY ASKED TO REPRESENT THE ARC OF MARYLAND ARE INCLUDED IN THIS RETREAT THE ORGANIZATION MAINTAINS OFFICERS AND DIRECTORS LIABILITY INSURANCE COVERAGE TO ENSURE THAT VOLUNTEERS INVOLVED WITH THE LEADERSHIP OF THE ORGANIZATION ARE PROTECTED THE ORGANIZATION UTILIZES VOLUNTEERS AS SPOKESPEOPLE WITH THE MEDIA AND LEGISLATURE TO SHARE THEIR DIRECT EXPERIENCES REGARDING THE IMPACT OF PROPOSED LEGISLATION OR POLICIES ON PEOPLE WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES AND THEIR FAMILIES THESE VOLUNTEERS ARE SUPPORTED BY THE EXECUTIVE DIRECTOR TO ENSURE THEY UNDERSTAND THE ISSUES AND ARE PREPARED TO SPEAK AND TESTIFY THE EXECUTIVE DIRECTOR APPROVES ANY TESTIMONY WRITTEN BY SAID VOLUNTEERS THAT IS MADE ON BEHALF OF THE ORGANIZATION VOLUNTEERS ALSO MAY SERVE AS THE ARC'S REPRESENTATIVE ON VARIOUS STATEWIDE COALITIONS AND COMMITTEES THESE VOLUNTEERS FIRST MUST SERVE ON A COMMITTEE OF THE ARC OF MARYLAND AND ARE ASSISTED BY STAFF TO ENSURE THAT THEY HAVE THE INFORMATION AND SUPPORT TO TAKE POSITIONS ON BEHALF OF THE ORGANIZATION