

Form **990**

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

OMB No. 1545-0047

2021

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning **NOV 1, 2021** and ending **OCT 31, 2022**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization HUMANITIES COUNCIL OF WASHINGTON, DC Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1804 T STREET, NW City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20009 F Name and address of principal officer: REBECCA LEMOS-OTERO SAME AS C ABOVE	D Employer identification number 52-1166432 E Telephone number 202-770-3077 G Gross receipts \$ 3,308,620. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.WDCHUMANITIES.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1980 M State of legal domicile: DC

Part I Summary

1	Briefly describe the organization's mission or most significant activities: TO FUND AND CONDUCT HUMANITIES-BASED CULTURAL AND EDUCATIONAL PROGRAMS WITHIN D.C.		
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	11
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	11
5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	7
6	Total number of volunteers (estimate if necessary)	6	86
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
8	Contributions and grants (Part VIII, line 1h)	Prior Year 2,509,797.	Current Year 3,305,609.
9	Program service revenue (Part VIII, line 2g)	419.	0.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	14.	134.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	778.	2,877.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,511,008.	3,308,620.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,182,720.	2,044,852.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	595,227.	686,184.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	32,400.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 159,410.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	457,470.	431,113.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,235,417.	3,194,549.
19	Revenue less expenses. Subtract line 18 from line 12	275,591.	114,071.
20	Total assets (Part X, line 16)	Beginning of Current Year 481,615.	End of Year 741,220.
21	Total liabilities (Part X, line 26)	42,905.	167,403.
22	Net assets or fund balances. Subtract line 21 from line 20	438,710.	573,817.

Part II Signature Block

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

Sign Here	Signature of officer REBECCA LEMOS-OTERO, EXECUTIVE DIRECTOR Type or print name and title	Date _____			
Paid Preparer Use Only	Print/Type preparer's name TINA PEACHER	Preparer's signature 	Date 7/20/23	Check if self-employed <input type="checkbox"/>	PTIN P01608826
	Firm's name ▶ JM&M Firm's address ▶ 10500 LITTLE PATUXENT PARKWAY, SUITE 770 COLUMBIA, MD 21044	Firm's EIN ▶ 52-1853933	Phone no. 410-884-0220		

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: TO ENRICH THE QUALITY OF LIFE, FOSTER INTELLECTUAL STIMULATION, AND PROMOTE CROSS-CULTURAL UNDERSTANDING AND APPRECIATION OF LOCAL HISTORY AND CULTURE IN ALL NEIGHBORHOODS OF THE DISTRICT THROUGH HUMANITIES PROGRAMS AND GRANTS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

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

4a (Code:) (Expenses \$ 2,543,400. including grants of \$ 2,044,852.) (Revenue \$) EACH YEAR, HUMANITIES COUNCIL OF WASHINGTON D.C. (HUMANITIESDC) REACHES THOUSANDS OF PEOPLE, ACROSS ALL AGES AND A VARIETY OF DEMOGRAPHICS, THROUGH ORIGINAL PUBLIC PROGRAMMING, AND COMMUNITY GRANTMAKING THAT SUPPORTS OVER 70 PUBLIC HUMANITIES ORGANIZATIONS, PROGRAMS AND PROJECTS ACROSS WASHINGTON, DC. THESE PUBLIC HUMANITIES OFFERINGS ENGAGE PARTICIPANTS IN DISCUSSIONS ON COMMUNITY HISTORY, SOCIO-POLITICAL ISSUES, LITERATURE, ART HISTORY AND CRITICISM, AND MANY MORE TOPICS CONNECTED TO LIFE AND CULTURE IN THE CITY. THROUGH ITS WORK, HUMANITIESDC REACHES OUT TO ALL EIGHT WARDS.

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

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

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

4e Total program service expenses 2,543,400.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements, such as political activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
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 to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax filings, and organizational activities.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 11		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 11		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **REBECCA LEMOS-OTERO - 202-770-3077**
1804 T STREET, NW, WASHINGTON, DC 20009

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) REBECCA LEMOS-OTERO EXECUTIVE DIRECTOR	40.00			X				64,510.	0.	3,905.
(2) LEE MURPHY BOARD CHAIR UNTIL FEB. 2022	2.00	X		X				0.	0.	0.
(3) MACEO THOMAS, VICE CHAIR UNTIL FEB. 2022, THEN CHAIR	2.00	X		X				0.	0.	0.
(4) COLE FIALA SECRETARY	1.00	X		X				0.	0.	0.
(5) EVELYN BOYD SIMMONS TREASURER	1.00	X		X				0.	0.	0.
(6) CHINEDU FELIZ OSUCHUKWU DIRECTOR	1.00	X						0.	0.	0.
(7) HEATHER CLARK DIRECTOR	1.00	X						0.	0.	0.
(8) KEMRY HUGHES DIRECTOR	1.00	X						0.	0.	0.
(9) ALISON JOHNSON DIRECTOR	1.00	X						0.	0.	0.
(10) MJ RYMSZA-PAWLOWSKA DIRECTOR	1.00	X						0.	0.	0.
(11) RAMYA VIVEKANANDAN DIRECTOR	1.00	X						0.	0.	0.
(12) BRANDON HOGAN DIRECTOR UNTIL MARCH 2022	1.00	X						0.	0.	0.

Part VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions)	1e	3,283,303.					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	22,306.					
	g Noncash contributions included in lines 1a-1f	1g	\$					
	h Total. Add lines 1a-1f							3,305,609.
Program Service Revenue	2 a	Business Code						
	b							
	c							
	d							
	e							
	f All other program service revenue							
	g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			134.			134.	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6 a Gross rents	6a	(i) Real	(ii) Personal				
	b Less: rental expenses	6b						
	c Rental income or (loss)	6c						
	d Net rental income or (loss)							
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses	7b						
	c Gain or (loss)	7c						
	d Net gain or (loss)							
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a							
b Less: direct expenses	8b							
c Net income or (loss) from fundraising events								
9 a Gross income from gaming activities. See Part IV, line 19	9a							
b Less: direct expenses	9b							
c Net income or (loss) from gaming activities								
10 a Gross sales of inventory, less returns and allowances	10a							
b Less: cost of goods sold	10b							
c Net income or (loss) from sales of inventory								
Miscellaneous Revenue	11 a MISC. REFUNDS	Business Code		2,877.			2,877.	
	b	900099						
	c							
	d All other revenue							
	e Total. Add lines 11a-11d			2,877.				
12 Total revenue. See instructions			3,308,620.	0.	0.	3,011.		

Part IX Statement of Functional Expenses

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

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,889,978.	1,889,978.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	154,874.	154,874.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	150,321.	67,419.	78,123.	4,779.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	391,608.	175,636.	203,523.	12,449.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	6,071.	2,723.	3,155.	193.
9 Other employee benefits	85,849.	38,503.	44,617.	2,729.
10 Payroll taxes	52,335.	23,472.	27,199.	1,664.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	19,035.		19,035.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	32,400.			32,400.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	158,852.	81,525.	5,979.	71,348.
12 Advertising and promotion	63,004.	30,441.		32,563.
13 Office expenses	57,346.	22,306.	33,755.	1,285.
14 Information technology	14,828.	6,650.	8,178.	
15 Royalties				
16 Occupancy	48,545.	21,772.	26,773.	
17 Travel	2,237.	1,003.	1,234.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	13,021.	4,877.	8,144.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	4,528.	2,031.	2,497.	
23 Insurance	6,723.	3,015.	3,708.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a DUES AND SUBSCRIPTIONS	36,494.	16,368.	20,126.	
b PROFESSIONAL DEVELOPMENTS	5,693.		5,693.	
c MISCELLANEOUS	807.	807.		
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	3,194,549.	2,543,400.	491,739.	159,410.
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)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	67,114.	1	59,959.
	2 Savings and temporary cash investments	156,838.	2	343,185.
	3 Pledges and grants receivable, net	240,340.	3	121,156.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	10,511.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 56,012.		
	b Less: accumulated depreciation	10b 4,528.	0.	10c 51,484.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	17,323.	15	154,925.
16 Total assets. Add lines 1 through 15 (must equal line 33)	481,615.	16	741,220.	
Liabilities	17 Accounts payable and accrued expenses	42,905.	17	23,403.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0.	25	144,000.
	26 Total liabilities. Add lines 17 through 25	42,905.	26	167,403.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	438,710.	27	573,817.
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	438,710.	32	573,817.
33 Total liabilities and net assets/fund balances	481,615.	33	741,220.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,308,620.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,194,549.
3	Revenue less expenses. Subtract line 2 from line 1	3	114,071.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	438,710.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	21,036.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	573,817.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
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 on Schedule O and describe any steps taken to undergo such audits	X	

Form 990 (2021)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1017052.	1995019.	2318060.	2509797.	3305609.	11145537.
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	1017052.	1995019.	2318060.	2509797.	3305609.	11145537.
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 Public support. Subtract line 5 from line 4.						11145537.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	1017052.	1995019.	2318060.	2509797.	3305609.	11145537.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	23.	7.	29.	14.	134.	207.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)				778.	2,877.	3,655.
11 Total support. Add lines 7 through 10						11149399.
12 Gross receipts from related activities, etc. (see instructions)					12	309,116.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)).....	14	99.97 %
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	99.99 %
16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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 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						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
1		
2		

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
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 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
 (See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MISC. REFUNDS

2020 AMOUNT: \$ 778.

2021 AMOUNT: \$ 2,877.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2021

Name of the organization

HUMANITIES COUNCIL OF WASHINGTON, DC

Employer identification number

52-1166432

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

Name of organization HUMANITIES COUNCIL OF WASHINGTON, DC	Employer identification number 52-1166432
---	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	_____ _____ _____	\$ <u>200,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____ _____ _____	\$ <u>1,685,095.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____ _____ _____	\$ <u>1,398,208.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization HUMANITIES COUNCIL OF WASHINGTON, DC	Employer identification number 52-1166432
---	---

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization HUMANITIES COUNCIL OF WASHINGTON, DC	Employer identification number 52-1166432
---	---

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization **HUMANITIES COUNCIL OF WASHINGTON, DC** Employer identification number **52-1166432**

Part I 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 year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (for example, recreation or education) Preservation of a 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 Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 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)?

9 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.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its 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.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2021

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

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

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		23,287.	4,528.	18,759.
d Equipment				
e Other		32,725.		32,725.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				51,484.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) SECURITY DEPOSIT	15,000.
(2) RIGHT OF USE ASSET	139,925.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	154,925.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) OPERATING LEASE LIABILITY	144,000.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	144,000.

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

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	3,308,620.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	3,308,620.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	3,308,620.

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	3,173,513.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	3,173,513.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	21,036.	
c	Add lines 4a and 4b		4c	21,036.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	3,194,549.

Part XIII Supplemental Information.

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

PART X, LINE 2:

HUMANITIESDC BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS OR THAT WOULD HAVE AN EFFECT ON ITS TAX-EXEMPT STATUS. THERE ARE NO UNRECOGNIZED TAX BENEFITS OR LIABILITIES THAT NEED TO BE RECORDED.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

PRIOR YEAR SUB-GRANT REFUNDS 21,036.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1	Gross receipts			
	2	Less: Contributions			
	3	Gross income (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses			
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
	11	Net income summary. Subtract line 10 from line 3, column (d)			

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
Direct Expenses	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7	Direct expense summary. Add lines 2 through 5 in column (d)			
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)			

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility		13a	%
b An outside facility		13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

- 16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: BETH SANDLER/PURPOSE POSSIBLE, LLC

(I) ADDRESS OF FUNDRAISER: 581 GRANT STREET SE, ATLANTA, GA 30312

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization **HUMANITIES COUNCIL OF WASHINGTON, DC** Employer identification number **52-1166432**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
AFRICAN AMERICAN MUSIC ASSOCIATION 5067 SHERIFF ROAD NE WASHINGTON, DC 20019	52-1914497	501(C)(3)	36,690.	0.			NEH DOCUMENTARY PROJECT AND VISION
ASBURY UNITED METHODIST CHURCH 926 11TH STREET NW WASHINGTON, DC 20001	53-0229948	501(C)(3)	7,000.	0.			DC ORAL HISTORY COLLABORATIVE (DCOHC)
CAPITOL BOP, INC 2853 ONTARIO ROAD NW #501 WASHINGTON, DC 20009	45-5582734	501(C)(3)	50,000.	0.			VISION GRANT AND NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE
DC JAZZ FESTIVAL 515 M STREET, SE, SUITE 102-B WASHINGTON, DC 20003	20-1799842	501(C)(3)	30,000.	0.			HUMANITIES VISION PARTNERSHIP GRANT
DC PRESERVATION LEAGUE 641 S STREET NW, SUITE 300 WASHINGTON, DC 20001	52-1038849	501(C)(3)	25,000.	0.			HUMANITIES FESTIVAL & GATHERING GRANT
DISTRICT OF COLUMBIA ARTS CENTER 2438 18TH STREET NW WASHINGTON, DC 20009	52-1642494	501(C)(3)	35,000.	0.			DC DOCUMENTARY GRANT

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **66.**
- 3** Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2021

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDGEWOOD-BROOKLAND FAMILY SUPPORT COLLABORATIVE - 601 EDGEWOOD STREET, NE STE. 25 - WASHINGTON, DC 20017	52-2246995	501(C)(3)	7,000.	0.			DC ORAL HISTORY COLLABORATIVE (DCOHC)
DUMBARTON CONCERTS/INNER CITY-INNER CHILD, INC. - 3133 DUMBARTON STREET NW - WASHINGTON, DC 20007	52-1182326	501(C)(3)	30,000.	0.			NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN
HISTORICAL SOCIETY OF WASHINGTON, DC - 801 K STREET NW - WASHINGTON, DC 20001	53-0238800	501(C)(3)	80,000.	0.			NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN
HOLA CULTURA 1111 COLUMBIA ROAD NW #402 WASHINGTON, DC 20009	46-4621492	501(C)(3)	31,800.	0.			DC ORAL HISTORY COLLABORATIVE (DCOHC); NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING
LIVE IT LEARN IT 735 8TH SE WASHINGTON, DC 20003	35-2247059	501(C)(3)	55,000.	0.			CAPACITY BUILDING; NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH
NATIONAL HAND DANCE ASSOCIATION 1522 GOOD HOPE RD, SE WASHINGTON, DC 20024	52-1919391	501(C)(3)	7,000.	0.			DC ORAL HISTORY COLLABORATIVE (DCOHC)
ONE COMMON UNITY 2437 15TH STREET NW WASHINGTON, DC 20009	52-2270569	501(C)(3)	65,000.	0.			CAPACITY BUILDING; NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH
RHIZOME DC 6950 MAPLE STREET NW WASHINGTON, DC 20012	47-3844095	501(C)(3)	12,000.	0.			DC ORAL HISTORY COLLABORATIVE (DCOHC)
THE DANCE INSTITUTE OF WASHINGTON 3400 14TH STREET, NW WASHINGTON, DC 20010	52-1851373	501(C)(3)	30,000.	0.			HUMANITIES VISION PARTNERSHIP GRANT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE DC CENTER FOR THE LGBT COMMUNITY - 2000 14TH ST NW SUITE 105 - WASHINGTON, DC 20009	20-0118307	501(C)(3)	25,000.	0.			HUMANITIES FESTIVAL & GATHERING GRANT
WNDC EDUCATIONAL FOUNDATION 1526 NEW HAMPSHIRE AVENUE, NW WASHINGTON, DC 20036	52-1743808	501(C)(3)	45,000.	0.			CAPACITY BUILDING; NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH
YOUNG PLAYWRIGHTS' THEATER, INC. 6925 WILLOW STREET NW SUITE LL 230 WASHINGTON, DC 20012	52-2102391	501(C)(3)	25,000.	0.			CAPACITY BUILDING
1882 PROJECT FOUNDATION 508 I STREET NW, LOWER LEVEL WASHINGTON, DC 20001	46-1144885	501(C)(3)	12,000.	0.			DC ORAL HISTORY COLLABORATIVE
ADAMS MORGAN COMMUNITY ALLIANCE 2410 20TH STREET NW APT. 211 WASHINGTON, DC 20009	82-1834452	501(C)(3)	17,650.	0.			HUMANITIES FESTIVAL & GATHERING GRANT
ALL SOULS CHURCH UNITARIAN NON-PROFIT HOUSING CORPORATION - 1500 HARVARD STREET NW - WASHINGTON, DC 20009	23-7147991	501(C)(3)	31,492.	0.			DC ORAL HISTORY COLLABORATIVE; VISION
AMERICAN UNIVERSITY 4400 MASSACHUSETTS AVE NW WASHINGTON, DC 20016	53-0196549	501(C)(3)	25,000.	0.			HUMANITIES FESTIVAL & GATHERING GRANT
ARCHAEOLOGY IN THE COMMUNITY 2231 14TH STREET, NE WASHINGTON, DC 20018	30-0538831	501(C)(3)	25,000.	0.			CAPACITY BUILDING GRANT
ARTS FOR OUR CHILDREN, INC 6218 THIRD STREET, NW WASHINGTON, DC 20011	52-1962699	501(C)(3)	10,000.	0.			COMMUNITY HERITAGE PROJECT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC UNIVERSITY OF AMERICA 620 MICHIGAN AVE, NE WASHINGTON, DC 20064	53-0196583	501(C)(3)	29,592.	0.			HUMANITIES VISION PARTNERSHIP GRANT
CHARVIS V. CAMPBELL 1332 SHEPHERD STREET NW WASHINGTON, DC 20011	27-0387300	501(C)(3)	8,000.	0.			DC ORAL HISTORY COLLABORATIVE (DCOHC)
CRITICAL EXPOSURE 1816 12TH STREET, NW 3RD FLOOR WASHINGTON, DC 20009	26-2829875	501(C)(3)	30,000.	0.			NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN
CULTURAL TOURISM DC, INC. 700 12TH STREET NW, SUITE 700 WASHINGTON, DC 20005	52-2153746	501(C)(3)	25,000.	0.			HUMANITIES FESTIVAL & GATHERING GRANT
DACOR BACON HOUSE FOUNDATION 1801 F STREET NW WASHINGTON, DC 20006	52-6059096	501(C)(3)	25,000.	0.			CAPACITY BUILDING GRANT
DAY EIGHT 1366 SHERIDAN ST. NW WASHINGTON, DC 20011	38-3746016	501(C)(3)	45,000.	0.			NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN
DC ARTS & HUMANITIES EDUCATION COLLABORATIVE - 975 F STREET NW - WASHINGTON, DC 20004	52-2125047	501(C)(3)	30,000.	0.			NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN
DC GREENS 2000 P STREET NW, SUITE 200 WASHINGTON, DC 20036	26-4527988	501(C)(3)	8,000.	0.			DC ORAL HISTORY COLLABORATIVE (DCOHC)
DC MURALS 19 BATES STREET NW, APT. B WASHINGTON, DC 20001	82-1866308	501(C)(3)	10,000.	0.			COMMUNITY HERITAGE PROJECT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DC MUSIC SUMMIT 3119 G STREET, SE WASHINGTON, DC 20019	85-3691453	501(C)(3)	13,000.	0.			DC ORAL HISTORY COLLABORATIVE (DCOHC)
DC SCHOOL OF LAW FOUNDATION 4340 CONNECTICUT AVENUE NW WASHINGTON, DC 20008	52-1863674	501(C)(3)	10,000.	0.			COMMUNITY HERITAGE PROJECT
DC THEATRE ARTS COLLABORATIVE 2020 SHANNON PL, SE WASHINGTON, DC 20020	45-4681518	501(C)(3)	8,000.	0.			DC ORAL HISTORY COLLABORATIVE (DCOHC)
EMPOWER DC 1419 V STREET, NW WASHINGTON, DC 20009	27-2623232	501(C)(3)	30,000.	0.			HUMANITIES VISION PARTNERSHIP GRANT
ENVIRONMENTAL FILM FESTIVAL IN THE NATION'S CAPITAL - 1228 1/2 31ST STREET, NW - WASHINGTON, DC 20007	83-0469770	501(C)(3)	25,000.	0.			CAPACITY BUILDING
FDR MEMORIAL LEGACY COMMITTEE 1629 K STREET NW SUITE 300 WASHINGTON, DC 20006	46-1931507	501(C)(3)	25,000.	0.			CAPACITY BUILDING
HEURICH HOUSE FOUNDATION 1307 NEW HAMPSHIRE AVENUE NW WASHINGTON, DC 20036	80-0061139	501(C)(3)	55,000.	0.			CAPACITY BUILDING; NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH
HOME RULE MUSIC AND FILM PRESERVATION FOUNDATION INC. - 702 KENNEDY ST. NW - WASHINGTON, DC 20011	87-2188075	501(C)(3)	35,000.	0.			DC DOCUMENTARY GRANT
KAMA DC 331 U STREET NW WASHINGTON, DC 20001	83-0926485	501(C)(3)	24,964.	0.			CAPACITY BUILDING

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARSHALL HEIGHTS COMM. DEVELOP. ORGANIZATION - 3939 BENNING RD. NE - WASHINGTON, DC 20019	52-1165147	501(C)(3)	7,000.	0.			DC ORAL HISTORY COLLABORATIVE (DCOHC)
MIKVA CHALLENGE DC 1100 15TH ST. NW, STE. 400 WASHINGTON, DC 20005	52-2033353	501(C)(3)	25,000.	0.			CAPACITY BUILDING
MOSAIC THEATER COMPANY OF DC 1333 H STREET NE WASHINGTON, DC 20002	47-2641919	501(C)(3)	10,000.	0.			HUMANITIES FESTIVAL & GATHERING GRANT
MULTI-MEDIA TRAINING INSTITUTE 5327 EAST CAPITOL ST. SE WASHINGTON, DC 20019	52-1279861	501(C)(3)	25,000.	0.			HUMANITIES FESTIVAL & GATHERING GRANT
NEIGHBORHOOD ASSOCIATES CORPORATION - 1101 30TH ST NW, 4TH FLOOR - WASHINGTON, DC 20007	38-3654131	501(C)(3)	12,500.	0.			HUMANITIES FESTIVAL & GATHERING GRANT
ONE WORLD EDUCATION 1800 KENYAN ST, NW WASHINGTON, DC 20010	20-8624702	501(C)(3)	60,000.	0.			HUMANITIES VISION PARTNERSHIP GRANT; NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING
PEN/FAULKNER FOUNDATION 6218 GEORGIA AVENUE NW, UNIT #1062 WASHINGTON, DC 20011	52-1431622	501(C)(3)	8,290.	0.			HUMANITIES FESTIVAL & GATHERING GRANT
PICTURES ON SILENCE 5233 43RD ST. NW WASHINGTON, DC 20015	45-4990686	501(C)(3)	30,000.	0.			HUMANITIES VISION PARTNERSHIP GRANT
PRESIDENT LINCOLN'S COTTAGE AT THE SOLDIERS' HOME - 3700 NORTH CAPITOL ST. NW, AFRH-W 558 - WASHINGTON, DC 20011	47-1453864	501(C)(3)	40,000.	0.			NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PROJECT CREATE 2208 MARTIN LUTHER KING JR. AVE. SE WASHINGTON, DC 20020	42-1559894	501(C)(3)	30,000.	0.			NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN
READING PARTNERS 3939 BENNING ROAD NE WASHINGTON, DC 20019	77-0568469	501(C)(3)	65,000.	0.			CAPACITY BUILDING; NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH
SHOUT MOUSE PRESS 1638 R STREET, NW, STE 218 WASHINGTON, DC 20009	47-1324990	501(C)(3)	25,000.	0.			CAPACITY BUILDING
STREET SENSE INC. 1317 G STREET NW WASHINGTON, DC 20005	20-1297050	501(C)(3)	73,000.	0.			DC ORAL HISTORY COLLABORATIVE (DCOHC); DC DOCUMENTARY; NATIONAL ENDOWMENT FOR THE
STUDIO ACTING CONSERVATORY 3423 HOLMEAD PLACE, NW WASHINGTON, DC 20010	83-2635517	501(C)(3)	25,000.	0.			CAPACITY BUILDING
THE HIGH TEA SOCIETY 609 GIRARD STREET NE WASHINGTON, DC 20017	52-2044895	501(C)(3)	25,000.	0.			HUMANITIES FESTIVAL & GATHERING GRANT
THE MUSICIANSHIP 1704 GAINSVILLE STREET SE WASHINGTON, DC 20020	46-0557954	501(C)(3)	65,000.	0.			CAPACITY BUILDING; NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH
THE NATIONAL BUILDING MUSEUM 401 F STREET, NW WASHINGTON, DC 20001	52-1050999	501(C)(3)	25,000.	0.			CAPACITY BUILDING
THE W.I.R.E 1227 42ND ST, SE WASHINGTON, DC 20020	46-4587157	501(C)(3)	8,000.	0.			DC ORAL HISTORY COLLABORATIVE (DCOHC)

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIDEO ACTION INC. 1200 18TH STREET NW, SUITE 300 WASHINGTON, DC 20036	52-1678194	501(C)(3)	35,000.	0.			DC DOCUMENTARY
WASHINGTON ARTS ENSEMBLE 1919 S STREET NW WASHINGTON, DC 20009	87-1577518	501(C)(3)	25,000.	0.			CAPACITY BUILDING
WOMEN IN FILM AND VIDEO 1200 18TH STREET, NW SUITE 300 WASHINGTON, DC 20036	52-1175294	501(C)(3)	12,000.	0.			DC ORAL HISTORY COLLABORATIVE (DCOHC)
WORDS BEATS & LIFE, INC. 1525 NEWTOWN ST NW, UNIT 1 WASHINGTON, DC 20010	27-0062812	501(C)(3)	50,000.	0.			HUMANITIES FESTIVAL & GATHERING GRANT; CAPACITY BUILDING
ZORA NEALE HURSTON - RICHARD WRIGHT, FOUNDATION - 4012 19TH PLACE NE - WASHINGTON, DC 20018	52-1706969	501(C)(3)	20,000.	0.			NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN
CAPOEIRADC 2008 RHODE ISLAND AVE. NE WASHINGTON, DC 20018	33-1064033	501(C)(3)	25,000.	0.			CAPACITY BUILDING GRANT

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
GRANTS	19	154,874.	0.		

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

PART I, LINE 2:

THE GRANTS MANAGER CERTIFIES EACH INCOMING PROPOSAL FOR BASIC QUALIFICATIONS AND ASSIGNS THEM TO AN EXTERNAL PANEL OF REVIEWERS WITH DEMONSTRABLE BACKGROUND AND/OR INTEREST IN THE HUMANITIES AND WASHINGTON, DC'S HISTORY AND CULTURE. THESE REVIEWERS SCORE THE PROPOSALS, DISCUSS THEM, AND SUBMIT A SLATE OF FUNDING RECOMMENDATIONS TO HDC STAFF AND BOARD. THE BOARD REVIEWS AND APPROVES EACH GRANTMAKING PROCESS TO ENSURE PROCEDURES WERE FOLLOWED. THE GRANTS MANAGER SENDS AN AWARD LETTER TO REPRESENTATIVES FROM THE FUNDED PROJECTS. WHEN POSSIBLE, 100% OF THE GRANT

Part IV Supplemental Information

AWARD IS DISTRIBUTED TO NEW GRANTEES WITHIN A FEW MONTHS OF THE ORIGINAL APPLICATION SUBMISSION. THE GRANT IS MONITORED THROUGHOUT THE PERIOD, AND NON-COMPLIANT GRANTEES MAY BE REQUIRED TO RETURN THE FUNDS IN FULL OR MAY BE DEEMED INELIGIBLE FOR FUTURE FUNDING.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: CAPITOL BOP, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: VISION GRANT AND NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN. (NEH SHARP)

NAME OF ORGANIZATION OR GOVERNMENT:

DUMBARTON CONCERTS/INNER CITY-INNER CHILD, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN (NEH SHARP)

NAME OF ORGANIZATION OR GOVERNMENT: HISTORICAL SOCIETY OF WASHINGTON, DC

(H) PURPOSE OF GRANT OR ASSISTANCE: NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN (NEH SHARP); EVENT SPONSORSHIP

NAME OF ORGANIZATION OR GOVERNMENT: HOLA CULTURA

(H) PURPOSE OF GRANT OR ASSISTANCE: DC ORAL HISTORY COLLABORATIVE (DCOHC); NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN (NEH SHARP)

NAME OF ORGANIZATION OR GOVERNMENT: LIVE IT LEARN IT

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: CAPACITY BUILDING; NATIONAL
ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE
AMERICAN RESCUE PLAN (NEH SHARP)

NAME OF ORGANIZATION OR GOVERNMENT: ONE COMMON UNITY

(H) PURPOSE OF GRANT OR ASSISTANCE: CAPACITY BUILDING; NATIONAL
ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE
AMERICAN RESCUE PLAN (NEH SHARP)

NAME OF ORGANIZATION OR GOVERNMENT: WNDC EDUCATIONAL FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: CAPACITY BUILDING; NATIONAL
ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE
AMERICAN RESCUE PLAN (NEH SHARP)

NAME OF ORGANIZATION OR GOVERNMENT: CRITICAL EXPOSURE

(H) PURPOSE OF GRANT OR ASSISTANCE: NATIONAL ENDOWMENT FOR THE
HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN
(NEH SHARP)

NAME OF ORGANIZATION OR GOVERNMENT: DAY EIGHT

(H) PURPOSE OF GRANT OR ASSISTANCE: NATIONAL ENDOWMENT FOR THE
HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN
(NEH SHARP); FESTIVALS

NAME OF ORGANIZATION OR GOVERNMENT:

DC ARTS & HUMANITIES EDUCATION COLLABORATIVE

(H) PURPOSE OF GRANT OR ASSISTANCE: NATIONAL ENDOWMENT FOR THE
HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN

Part IV Supplemental Information

(NEH SHARP)

NAME OF ORGANIZATION OR GOVERNMENT: HEURICH HOUSE FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: CAPACITY BUILDING; NATIONAL

ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN (NEH SHARP)

NAME OF ORGANIZATION OR GOVERNMENT: ONE WORLD EDUCATION

(H) PURPOSE OF GRANT OR ASSISTANCE: HUMANITIES VISION PARTNERSHIP GRANT;

NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN (NEH SHARP)

NAME OF ORGANIZATION OR GOVERNMENT:

PRESIDENT LINCOLN'S COTTAGE AT THE SOLDIERS' HOME

(H) PURPOSE OF GRANT OR ASSISTANCE: NATIONAL ENDOWMENT FOR THE

HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN (NEH SHARP)

NAME OF ORGANIZATION OR GOVERNMENT: PROJECT CREATE

(H) PURPOSE OF GRANT OR ASSISTANCE: NATIONAL ENDOWMENT FOR THE

HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN (NEH SHARP)

NAME OF ORGANIZATION OR GOVERNMENT: READING PARTNERS

(H) PURPOSE OF GRANT OR ASSISTANCE: CAPACITY BUILDING; NATIONAL

ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN (NEH SHARP)

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: STREET SENSE INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: DC ORAL HISTORY COLLABORATIVE (DCOHC); DC DOCUMENTARY; NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN (NEH SHARP)

NAME OF ORGANIZATION OR GOVERNMENT: THE MUSICIANSHIP

(H) PURPOSE OF GRANT OR ASSISTANCE: CAPACITY BUILDING; NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN (NEH SHARP)

NAME OF ORGANIZATION OR GOVERNMENT:

ZORA NEALE HURSTON - RICHARD WRIGHT, FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: NATIONAL ENDOWMENT FOR THE HUMANITIES SUSTAINING THE HUMANITIES THROUGH THE AMERICAN RESCUE PLAN (NEH SHARP)

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

HUMANITIES COUNCIL OF WASHINGTON, DC

Employer identification number

52-1166432

FORM 990, PART VI, SECTION A, LINE 1A:

DURING THE INTERVALS BETWEEN MEETINGS OF THE BOARD OF DIRECTORS AND, EXCEPT AS LIMITED BY RESOLUTION OF THE BOARD OF DIRECTORS OR BY LAW, THE EXECUTIVE COMMITTEE SHALL HAVE AND MAY EXERCISE ALL OF THE AUTHORITY OF THE BOARD OF DIRECTORS IN THE MANAGEMENT OF THE AFFAIRS OF THE CORPORATION EXCEPT THE AUTHORITY TO MAKE GRANTS TO FUND HUMANITIES PROJECTS WHICH MUST BE VOTED AFFIRMATIVELY BY A MAJORITY OF ALL THE CORPORATION'S DIRECTORS PURSUANT TO ARTICLE V, SECTION 6.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT OF THE COUNCIL. IT IS THEN PROVIDED TO THE FULL BOARD FOR REVIEW BEFORE FILING WITH THE IRS.

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

THE CHAIR AND EXECUTIVE COMMITTEE SURVEY THE SALARIES OF EXECUTIVE DIRECTORS OF NON-PROFITS IN THE DC AREA AS WELL AS THE SALARIES OF HUMANITIES COUNCILS' EXECUTIVE DIRECTORS IN 56 STATES AND TERRITORIES. THE BOARD CHAIR THEN RECOMMENDS CONTRACT TERMS AND SALARY TO THE FULL BOARD FOR APPROVAL. IN JANUARY 2021, THE BOARD HIRED AN INDEPENDENT CONTRACTOR TO HIRE THE NEW EXECUTIVE DIRECTOR, IN WHICH A COMPENSATION REVIEW WAS PERFORMED TO SUPPORT THE RECRUITMENT PROCESS. A COMPENSATION SURVEY WAS NOT DONE DURING THIS FISCAL YEAR.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST

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

Schedule O (Form 990) 2021

132211 11-11-21

Name of the organization HUMANITIES COUNCIL OF WASHINGTON, DC	Employer identification number 52-1166432
--	--

POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

PRIOR YEAR SUB-GRANT REFUNDS	21,036.
------------------------------	---------

FORM 990, PART XII, LINE 2C:

THE ORGANIZATION HAS NOT CHANGED ITS AUDIT OVERSIGHT PROCESS OR INDEPENDENT AUDITOR SELECTION PROCESS DURING THE TAX YEAR.