

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

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

OMB No. 1545-0047

2021Open to Public
InspectionA For the 2021 calendar year, or tax year beginning **OCT 1, 2021** and ending **SEP 30, 2022**

B Check if applicable: Address change Name change Initial return Final return/terminated Amended return Application pending	C Name of organization LUPUS FOUNDATION OF AMERICA, INC.		D Employer identification number 43-1131436
	Doing business as		E Telephone number (202) 349-1155
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 17,368,419.
	2121 K STREET, NW	200	H(a) Is this a group return for subordinates? Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20037		H(b) Are all subordinates included? Yes No
F Name and address of principal officer: JULIE TUNE SAME AS C ABOVE		H(c) Group exemption number ▶	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527			
J Website: ▶ WWW.LUPUS.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other ▶		L Year of formation: 1977 M State of legal domicile: DC	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: IMPROVE THE QUALITY OF LIFE FOR PEOPLE WITH LUPUS THROUGH RESEARCH, EDUCATION, SUPPORT AND ADVOCACY.		
	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	14
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	14
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	66
	6 Total number of volunteers (estimate if necessary)	6	3085
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	12,393,471.	15,265,716.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,592,352.	1,211,689.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,634.	18,304.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	34,086.	768,256.
	15,023,543.	17,263,965.	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,528,584.	1,735,150.
	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)	6,614,574.	7,046,431.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	64,550.	158,660.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,293,823.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	6,519,460.	6,478,166.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	14,727,168.	15,418,407.	
19 Revenue less expenses. Subtract line 18 from line 12	296,375.	1,845,558.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	8,838,757.	9,829,433.
	22 Net assets or fund balances. Subtract line 21 from line 20	4,862,366.	4,078,827.
		3,976,391.	5,750,606.

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 <i>Julie Tune</i>	Date 8/7/2023
	JULIE TUNE, CHIEF FINANCIAL OFFICER Type or print name and title	
Paid Preparer Use Only	Print/Type preparer's name AARON M. FOX	Preparer's signature AARON M. FOX
	Date 08/07/23	Check if self-employed <input type="checkbox"/> PTIN P01365820
	Firm's name ▶ MARCUM LLP	Firm's EIN ▶ 11-1986323
	Firm's address ▶ 1899 L STREET, NW, SUITE 850 WASHINGTON, DC 20036	Phone no. (202) 227-4000

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No**COPY**

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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F Name and address of principal officer: JULIE TUNE SAME AS C ABOVE		H(a) Is this a group return for subordinates? Yes <input checked="" type="checkbox"/> No	
		H(b) Are all subordinates included? Yes No	
		If "No," attach a list. See instructions	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527		H(c) Group exemption number ▶	
J Website: ▶ WWW.LUPUS.ORG			
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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	Date			
	JULIE TUNE, CHIEF FINANCIAL OFFICER Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name AARON M. FOX	Preparer's signature AARON M. FOX	Date 08/07/23	Check if self-employed <input type="checkbox"/>	PTIN P01365820
	Firm's name ▶ MARCUM LLP	Firm's EIN ▶ 11-1986323			
	Firm's address ▶ 1899 L STREET, NW, SUITE 850 WASHINGTON, DC 20036	Phone no. (202) 227-4000			

May the IRS discuss this return with the preparer shown above? See instructions

☒ Yes ☐ No**COPY**

Part III Statement of Program Service Accomplishments

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

☒ X

1 Briefly describe the organization's mission:

LUPUS FOUNDATION OF AMERICA, INC. (THE FOUNDATION) IS DEDICATED TO IMPROVING THE QUALITY OF LIFE FOR ALL PEOPLE AFFECTED BY LUPUS THROUGH PROGRAMS OF RESEARCH, EDUCATION, SUPPORT, AND ADVOCACY.

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

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **5,423,434.** including grants of \$) (Revenue \$ **308,996.**)
PUBLIC INFORMATION AND EDUCATION:

THE LUPUS FOUNDATION OF AMERICA (FOUNDATION) CONDUCTS PROGRAMS TO INCREASE AWARENESS AND UNDERSTANDING OF LUPUS AND ITS CONSEQUENCES TO IMPROVE EARLY DIAGNOSIS AND TREATMENT. IN 2022, THE FOUNDATION CONTINUED TO EXPAND ITS REACH THROUGH ITS WEBSITE, ONLINE EDUCATION PROGRAMS, AWARENESS CAMPAIGNS, SOCIAL MEDIA MARKETING, CELEBRITY ENGAGEMENT, AND COMMUNITY PARTNERSHIPS. OUR WEBSITE IS THE LEADING SOURCE FOR LUPUS-RELATED INFORMATION, WITH AN ONLINE AUDIENCE OF MORE THAN 11 MILLION VISITS ANNUALLY. OUR SOCIAL MEDIA CHANNELS HAVE 414,000 COMBINED FOLLOWERS ACROSS THE SIX MOST-POPULAR SOCIAL PLATFORMS CHANNELS.

4b (Code:) (Expenses \$ **3,417,709.** including grants of \$ **72,500.**) (Revenue \$ **182,206.**)
NETWORK SUPPORT AND SERVICES:

THE FOUNDATION'S NATIONAL NETWORK INCLUDES CHAPTERS, REGIONAL OFFICES, AMBASSADORS, AND SUPPORT GROUPS ACROSS THE UNITED STATES. NETWORK AFFILIATES CONDUCT EDUCATION PROGRAMS, SUPPORT RESEARCH, AND PROVIDE INFORMATION, SUPPORT AND ADVOCACY TO IMPROVE THE QUALITY OF LIFE FOR THOSE AFFECTED BY LUPUS AND LESSEN THE IMPACT OF LUPUS. THE FOUNDATION PROVIDES NETWORK AFFILIATES WITH CAPACITY-BUILDING SERVICES, ORGANIZATIONAL DEVELOPMENT, STRATEGIC SUPPORT, TRAINING, AND CONSULTATION. OUR AMBASSADOR PROGRAM CONTINUES TO GROW, AND PLAYS A VITAL ROLE IN SUPPORTING THE FOUNDATION'S MISSION. WE HAVE OVER 170 TRAINED AMBASSADORS WHO PROVIDE COMMUNITY-BASED PEER-TO-PEER EDUCATION

4c (Code:) (Expenses \$ **3,292,132.** including grants of \$ **1,662,650.**) (Revenue \$ **710,487.**)
RESEARCH:

OUR NATIONAL RESEARCH PROGRAM SEEKS TO SOLVE SCIENTIFIC PROBLEMS THAT FOR DECADES HAVE STALLED PROGRESS IN LUPUS RESEARCH, TREATMENT DEVELOPMENT AND ACCESS, AND PATIENT CARE. THROUGHOUT THE YEAR, WE AGGRESSIVELY PURSUED STRATEGIES TO INCREASE FEDERAL, STATE, AND INDUSTRY SUPPORT FOR LUPUS RESEARCH, FACILITATED STRATEGIC COLLABORATIONS, LED GLOBAL ALLIANCES TO DRIVE CONSENSUS, AND PROVIDED DIRECT FINANCIAL SUPPORT TO RESEARCHERS THROUGH THE FOUNDATION'S PEER-REVIEWED RESEARCH GRANT PROGRAMS. THESE EFFORTS LAY THE GROUNDWORK FOR LUPUS RESEARCH LEADING TO SIGNIFICANT TREATMENT BREAKTHROUGHS.

4d Other program services (Describe on Schedule O.)

(Expenses \$ **490,470.** including grants of \$) (Revenue \$ **10,000.**)4e Total program service expenses **12,623,745.**

Form 990 (2021)

Part IV Checklist of Required Schedules

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

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? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," complete Schedule J	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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III		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? If "Yes," complete Schedule L, Part IV		X
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		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? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	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)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		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 ComplianceCheck 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	32	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	0	
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)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	66
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8866-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

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**

	1a	1b	14	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year			14		
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.					
b Enter the number of voting members included on line 1a, above, who are independent			14		
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?	X	
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	
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?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS**

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 **JULIE TUNE - (202) 349-1155**
2121 K STREET, NW, 200, WASHINGTON, DC 20037

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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) STEVAN W. GIBSON PRESIDENT & CHIEF EXECUTIVE OFFICER	40.00			X				358,156.	0.	24,880.
(2) MARY T. CRIMMINGS VP, MARKETING & COMMUNICATIONS	40.00				X			236,662.	0.	29,088.
(3) JEANINE SMITH VP, NETWORK DEVELOPMENT	40.00			X				209,777.	0.	25,006.
(4) PATRICK WILDMAN VP, ADVOCACY & GOVERNMENT	40.00				X			201,502.	0.	18,681.
(5) JULIE TUNE CHIEF FINANCIAL OFFICER	40.00 1.00			X				193,056.	0.	20,645.
(6) LEIGH ANN CARDENAS VP, INDIVIDUAL GIVING	40.00				X			187,491.	0.	16,851.
(7) MICHAEL DONNELLY VICE PRESIDENT, COMMUNICATIONS	40.00					X		177,818.	0.	14,465.
(8) SUSAN J. GLOOR REGIONAL DIRECTOR, NE	40.00				X			170,261.	0.	21,627.
(9) MATT DEGOOYER SENIOR REGIONAL DIRECTOR, PNW	40.00				X			145,431.	0.	16,443.
(10) DESIREE WIENAND DIRECTOR, CORPORATE ENGAGEMENT	40.00				X			146,839.	0.	13,926.
(11) JAMES DOSSINGER DIRECTOR OF DIGITAL STRATEGY	40.00				X			142,576.	0.	14,410.
(12) ANDREW BROPHY CHAIR	5.00	X		X				0.	0.	0.
(13) JOSEPH A. ARNOLD, ESQ. VICE CHAIR	5.00	X		X				0.	0.	0.
(14) CHRISTINE SMITH TREASURER	1.00	X		X				0.	0.	0.
(15) BARBARA POLK SECRETARY	5.00	X		X				0.	0.	0.
(16) JANINE ALLEN DIRECTOR	1.00	X						0.	0.	0.
(17) JUDY BARLIN DIRECTOR	1.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(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			
(18) LYNN BLANDFORD DIRECTOR	1.00	X						0.	0.	0.
(19) LINDSAY CAFRITZ DIRECTOR	1.00	X						0.	0.	0.
(20) KAREN COSTENBADER, MD, MPH DIRECTOR	1.00	X						0.	0.	0.
(21) CONRAD GEHRMAN DIRECTOR	1.00	X						0.	0.	0.
(22) JANE HAWLEY DIRECTOR	1.00	X						0.	0.	0.
(23) CINDY MESSERLY DIRECTOR	1.00	X						0.	0.	0.
(24) PHONG NGUYEN DIRECTOR	1.00	X						0.	0.	0.
(25) TIM NOLAN DIRECTOR	1.00	X						0.	0.	0.
(26) CHERI PERRON DIRECTOR	1.00	X						0.	0.	0.
1b Subtotal								2,169,569.	0.	216,022.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								2,169,569.	0.	216,022.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **19**

- 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual **3**
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual **4**
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person **5**

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
INTERACTIVE STRATEGIES LLC, 1133 CONNECTICUT AVENUE, NW, WASHINGTON, DC	WEBSITE/ONLINE RELATED SERVICES	246,922.
FAEGRE DRINKER BIDDLE & REATH LLP 75 REMITTANCE DRIVE, CHICAGO, IL 60675	CONSULTING	210,500.
AISLE 518 STRATEGIES LLC 2108 MILITARY ROAD, ARLINGTON, VA 22207	CONSULTING	157,078.
NVG, LLC, 1640 RHODE ISLAND AVENUE, NW, WASHINGTON, DC 20036	CONSULTING	120,000.
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization		4

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2021)

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a	104,672.			
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d	600,000.			
	e	Government grants (contributions)	1e	3,008,499.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	11552545.			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 78,279.			
	h	Total. Add lines 1a-1f		15265716.			
Program Service Revenue	2 a	PROG. EVENTS/OTHER	Business Code	900099	1,024,211.	1,024,211.	
	b	MEMBERSHIP DUES	900099	182,206.	182,206.		
	c	PUBLICATIONS	900099	5,272.	5,272.		
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		1,211,689.			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		17,467.		
4		Income from investment of tax-exempt bond proceeds					
5		Royalties		54,399.			54,399.
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)		837.			837.
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	CONSOL. OF FL CHAPTER	Business Code	900099	713,837.		713,837.
	b	REFUNDS	900099	20.			20.
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d		713,857.			
12	Total revenue. See instructions		17263965.	1,211,689.	0.	786,560.	

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

☒

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,561,150.	1,561,150.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	34,000.	34,000.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	140,000.	140,000.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,567,093.	1,253,332.	230,929.	82,832.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	4,394,336.	3,687,009.	393,240.	314,087.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	224,790.	183,409.	24,248.	17,133.
9 Other employee benefits	86,367.	67,308.	15,556.	3,503.
10 Payroll taxes	773,845.	563,715.	163,911.	46,219.
11 Fees for services (nonemployees):				
a Management				
b Legal	49,944.	42,623.	3,392.	3,929.
c Accounting	67,910.	1,175.	66,735.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	158,660.			158,660.
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.)	2,050,212.	1,922,877.	102,432.	24,903.
12 Advertising and promotion	440,375.	440,266.		109.
13 Office expenses	204,874.	103,432.	95,586.	5,856.
14 Information technology	746,018.	609,648.	88,063.	48,307.
15 Royalties				
16 Occupancy	608,735.	518,841.	54,394.	35,500.
17 Travel	65,855.	50,012.	10,110.	5,733.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	879,065.	683,393.	4,426.	191,246.
20 Interest				
21 Payments to affiliates	1,930.	1,930.		
22 Depreciation, depletion, and amortization	163,830.	148,879.	9,047.	5,904.
23 Insurance	61,412.	51,850.	5,768.	3,794.
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 POSTAGE & MAILHOUSE	627,801.	197,353.	127,678.	302,770.
b PRINTING & PUBLICATIONS	261,982.	227,392.	6,261.	28,329.
c RECRUITMENT	105,831.	77,312.	22,604.	5,915.
d BAD DEBT EXPENSE	64,757.		64,757.	
e All other expenses	77,635.	56,839.	11,702.	9,094.
25 Total functional expenses. Add lines 1 through 24e	15,418,407.	12,623,745.	1,500,839.	1,293,823.
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 <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	1,816,229.	1,085,782.	603,773.	126,674.

Part X Balance SheetCheck 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	2,069,009.	1	3,294,747.
	2 Savings and temporary cash investments	3,015,805.	2	2,969,929.
	3 Pledges and grants receivable, net	1,441,401.	3	1,357,526.
	4 Accounts receivable, net	229,875.	4	105,606.
	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	510,043.	9	248,349.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,996,858.		
	b Less: accumulated depreciation	10b 1,422,054.	10c	574,804.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	385,555.	12	325,321.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	454,654.	15	953,151.
16 Total assets. Add lines 1 through 15 (must equal line 33)	8,838,757.	16	9,829,433.	
Liabilities	17 Accounts payable and accrued expenses	976,092.	17	1,084,499.
	18 Grants payable	1,094,672.	18	1,423,601.
	19 Deferred revenue	406,995.	19	308,941.
	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	1,008,591.	24	0.
	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	1,376,016.	25	1,261,786.
	26 Total liabilities. Add lines 17 through 25	4,862,366.	26	4,078,827.
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	2,094,401.	27	3,639,066.
	28 Net assets with donor restrictions	1,881,990.	28	2,111,540.
	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	3,976,391.	32	5,750,606.
	33 Total liabilities and net assets/fund balances	8,838,757.	33	9,829,433.

Form 990 (2021)

Part XI Reconciliation of Net AssetsCheck 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	17,263,965.
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,418,407.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,845,558.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,976,391.
5	Net unrealized gains (losses) on investments	5	-71,343.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	5,750,606.

Part XII Financial Statements and ReportingCheck 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? _____ 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	X	
b Were the organization's financial statements audited by an independent accountant? _____ 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	X	
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? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
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)

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

LUPUS FOUNDATION OF AMERICA, INC.

Employer identification number

43-1131436

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).

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

Schedule B (Form 990) (2021)

SCHEDULE C
(Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2021

Open to Public
Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

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

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

LUPUS FOUNDATION OF AMERICA, INC.

Employer identification number

43-1131436

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

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

2 Political campaign activity expenditures ▶ \$

3 Volunteer hours for political campaign activities

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$

4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

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

Schedule C (Form 990) 2021

LHA

132041 11-03-21

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)		0.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		53,293.													
c Total lobbying expenditures (add lines 1a and 1b)		53,293.													
d Other exempt purpose expenditures		16,204,223.													
e Total exempt purpose expenditures (add lines 1c and 1d)		16,257,516.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		962,876.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)		240,719.													
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount	988,962.	833,501.	883,533.	962,876.	3,668,872.
b Lobbying ceiling amount (150% of line 2a, column(e))					5,503,308.
c Total lobbying expenditures	61,406.	47,306.	69,211.	53,293.	231,216.
d Grassroots nontaxable amount	247,241.	208,375.	220,883.	240,719.	917,218.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,375,827.
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2021

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

2021Open to Public
Inspection

Name of the organization

LUPUS FOUNDATION OF AMERICA, INC.

Employer identification number

43-1131436**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).

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> 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?

☐ Yes ☐ No

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)?

☐ Yes ☐ No

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

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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
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

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	458,100.	404,842.	379,279.	377,127.	359,750.
b Contributions					
c Net investment earnings, gains, and losses	-56,419.	56,936.	30,200.	4,745.	21,234.
d Grants or scholarships					
e Other expenditures for facilities and programs	1,806.	3,678.	4,637.	2,593.	3,857.
f Administrative expenses					
g End of year balance	399,875.	458,100.	404,842.	379,279.	377,127.

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 ☒ 100 %
 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:

- (i) Unrelated organizations _____
 (ii) Related organizations _____

	Yes	No
3a(i)	X	
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? _____

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		1,061,513.	495,300.	566,213.
d Equipment		471,124.	462,533.	8,591.
e Other		464,221.	464,221.	0.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				574,804.

Schedule D (Form 990) 2021

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) DUE FROM LAC	600,000.
(2) FLORIDA CHAPTER RECEIVABLES	115,174.
(3) OTHER RECEIVABLES	209,424.
(4) DEPOSITS	28,553.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	953,151.

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)	DEFERRED RENT	715,293.
(3)	DEFERRED LEASE INCENTIVE	546,493.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)		1,261,786.

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 ☒

Schedule D (Form 990) 2021

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	18,190,394.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-71,343.
b	Donated services and use of facilities	2b	1,122,342.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	1,050,999.
3	Subtract line 2e from line 1	3	17,139,395.
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	124,570.
c	Add lines 4a and 4b	4c	124,570.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	17,263,965.

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	16,416,179.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	1,122,342.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	1,122,342.
3	Subtract line 2e from line 1	3	15,293,837.
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	124,570.
c	Add lines 4a and 4b	4c	124,570.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	15,418,407.

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 V, LINE 4:

THE EARNINGS ON THE DONOR-RESTRICTED ENDOWMENT ARE FOR GENERAL OPERATIONS AND RESEARCH. THE FOUNDATION'S BOARD APPROVES THE SPENDING OF THE EARNINGS ON THE ENDOWMENT FUND ON AN ANNUAL BASIS WHEN IT APPROVES THE ANNUAL BUDGET.

PART X, LINE 2:

THE FOUNDATION PERFORMED AN EVALUATION OF UNCERTAINTY IN TAXES FOR THE YEARS ENDED SEPTEMBER 30, 2022 AND 2021, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS.

Part XIII	Supplemental Information <i>(continued)</i>
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PART XI, LINE 4B - OTHER ADJUSTMENTS:

NON-FUNDRAISING EVENT EXPENSES

124,570.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

NON-FUNDRAISING EVENT EXPENSES

124,570.

**SCHEDULE F
(Form 990)**Department of the Treasury
Internal Revenue Service**Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021Open to Public
Inspection

Name of the organization

Employer identification number

LUPUS FOUNDATION OF AMERICA, INC.

43-1131436

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	0	0	GRANTMAKING		140,000.
3 a Subtotal	0	0			140,000.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			140,000.

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

Schedule F (Form 990) 2021

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	RESEARCH GRANT	140,000. CHECK		0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

10

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2021

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) ☒ Yes ☐ No
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990) ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471) ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865) ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990) ☐ Yes ☒ No

Schedule F (Form 990) 2021

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

ALL GRANT RECIPIENTS ARE REQUIRED TO SIGN THE FOUNDATION'S GRANT AWARD AGREEMENT AND MEET THE FOLLOWING CONDITIONS:

- MEET ALL APPLICABLE AND RELEVANT GUIDELINES REGARDING THE USE OF ANIMAL AND HUMAN SUBJECTS.

- MEET ALL INSTITUTIONAL POLICIES AND LOCAL, STATE, AND FEDERAL REGULATIONS GOVERNING THE CONDUCT OF RESEARCH.

- SUBMIT INTERNAL REVIEW BOARD AND INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE (IF APPLICABLE) APPROVAL FROM THE GRANT RECIPIENT'S INSTITUTION.

- COMPLETE AND SUBMIT THE "PROPOSED BUDGET".

- ADHERE TO THE FOUNDATION'S POLICY ON INVENTIONS AND DISCOVERIES.

- NOTIFY THE FOUNDATION OF ANY PUBLICATION OR PROFESSIONAL PRESENTATION BASED ON FOUNDATION-FUNDED RESEARCH PROJECT AND PROVIDE THE FOUNDATION WITH ELECTRONIC COPIES OF ANY PUBLICATION OR PROFESSIONAL PRESENTATION MADE POSSIBLE, FACILITATED, EXPEDITED, OR SUPPORTED IN ANY WAY BY THE AWARD, EVEN IF DEVELOPED, INITIATED, OR FINALIZED AFTER THE AWARD PERIOD HAS EXPIRED, WITHIN 30 DAYS OF FINAL PRODUCTION.

- ACKNOWLEDGE THE FOUNDATION IN ANY AND ALL PUBLICATIONS OR PRESENTATIONS BASED, PARTIALLY OR WHOLLY, ON OR DEVELOPED UNDER THE AWARD MUST, UNLESS OTHERWISE REQUESTED BY THE FOUNDATION, WITH THE FOLLOWING STATEMENT:

"THIS RESEARCH WAS SUPPORTED BY THE LUPUS FOUNDATION OF AMERICA, INC."

- ALL FUNDS ARE USED EXCLUSIVELY TOWARD EXPENDITURES FOR THE SAID RESEARCH, AND NO AMOUNT OF THE RESEARCH GRANT FUNDS CAN BE USED TO FINANCE INDIRECT COSTS.

- KEEP COMPLETE AND ACCURATE RECORDS ON THE RECEIPT AND DISBURSEMENT OF ALL AWARD FUNDS, AND MAY NOT CO-MINGLE ANY FUNDS FROM OTHER SOURCES. MUST

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

RETAIN ALL SUCH RECORDS FOR A PERIOD OF AT LEAST TWO YEARS AFTER THE EXPIRATION DATE OF THE AGREEMENT AND THE FOUNDATION HAS THE RIGHT TO REVIEW SUCH RECORDS UPON REQUEST.

IN ADDITION, ALL GRANT RECIPIENTS ARE REQUIRED TO SUBMIT INTERIM AND FINAL REPORTS WITH A GRANT INSTALLMENT PAYMENT TIED TO REPORT SUBMISSION. THE FOUNDATION'S EDUCATION & RESEARCH TEAM REVIEWS THE INTERIM AND FINAL REPORTS TO CONFIRM THAT THE INVESTIGATOR ACHIEVED THE ORIGINAL STUDY OBJECTIVE.

- AGREE THAT EITHER PARTY MAY TERMINATE THE AGREEMENT FOR CONVENIENCE UPON THIRTY (30) DAYS PRIOR WRITTEN NOTICE TO THE OTHER PARTY. THE FOUNDATION RESERVES THE RIGHT TO TERMINATE THE AGREEMENT EFFECTIVE IMMEDIATELY, UPON WRITTEN NOTICE, IF THE GRANT RECIPIENT (I) IS UNABLE TO COMPLETE THE STUDY; (II) MATERIALLY ALTER THE STUDY; (III) USES THE AWARD GRANT FOR PROHIBITED EXPENSES OR; (IV) BREACHES OF THE AGREEMENT AND FAILS TO CURE SUCH BREACH WITHIN TEN (10) DAYS FOLLOWING RECIPIENT'S OR INSTITUTION'S RECEIPT OF WRITTEN NOTICE THEREOF.

- ACKNOWLEDGE THAT NEITHER THE FOUNDATION, THE INSTITUTION, NOR INVESTIGATOR SHALL BE LIABLE FOR ANY FAILURE TO PERFORM ANY OBLIGATIONS UNDER THE AGREEMENT IF SUCH FAILURE RESULTS FROM CAUSES BEYOND ITS REASONABLE CONTROL.

- ACKNOWLEDGE THAT THE AGREEMENT SHALL BE GOVERNED BY THE LAWS OF THE DISTRICT OF COLUMBIA, WITHOUT REGARD TO ITS CONFLICT OF LAW RULES.

- ACKNOWLEDGE THAT THE AGREEMENT MAY NOT BE ASSIGNED OR TRANSFERRED WITHOUT THE FOUNDATION'S PRIOR WRITTEN CONSENT.

PART I, LINE 3:

THE FOUNDATION REPORTED THE EXPENDITURES BASED ON THE ACCOUNTING METHOD

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

USED IN ITS AUDITED FINANCIAL STATEMENTS (ACCRUAL BASIS).

Blank lines for supplemental information.

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ **Attach to Form 990 or Form 990-EZ.**

► 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

LUPUS FOUNDATION OF AMERICA, INC.

Employer identification number

43-1131436

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☒ Mail solicitations
- b ☒ Internet and email solicitations
- c ☒ Phone solicitations
- d ☒ In-person solicitations
- e ☒ Solicitation of non-government grants
- f ☒ Solicitation of government grants
- g ☒ Special fundraising events

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes

☐ No

- b. If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NV, NH, NJ, NM, NY
NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

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

Schedule G (Form 990) 2021

SEE PART IV FOR CONTINUATIONS

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43

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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.

		(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.

		(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				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other 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: DAVINCI DIRECT INC.

(I) ADDRESS OF FUNDRAISER:

3 VILLAGE GREEN N, SUITE 311, PLYMOUTH, MA 02360

(I) NAME OF FUNDRAISER: THE WEBSTER GROUP

(I) ADDRESS OF FUNDRAISER: 5185 MACARTHUR BLVD, NW, WASHINGTON, DC 20016

Part IV	Supplemental Information <i>(continued)</i>
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SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

2021

Open to Public Inspection

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.

Name of the organization

LUPUS FOUNDATION OF AMERICA, INC.

Employer identification number

43-1131436

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
MEDICAL UNIVERSITY OF SOUTH CAROLINA - 171 ASHLEY AVENUE - CHARLESTON, SC 29425	57-6007222	IRC 115	756,000.	0.			RESEARCH
SYSTEMIC LUPUS INTERNATIONAL COLLABORATING CLINICS - 4800 FRIENDSHIP AVENUE - PITTSBURG, PA 15224	80-0481892	501(C)(3)	180,863.	0.			RESEARCH
DUKE UNIVERSITY 2200 W. MAIN STREET, SUITE 820 DURHAM, NC 27705	56-0532129	501(C)(3)	140,000.	0.			RESEARCH
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, SAN FRANCISCO - 490 ILLINOIS STREET, 4TH FLOOR - SAN FRANCISCO, CA 94143	94-6036493	501(C)(3)	140,000.	0.			RESEARCH
COLUMBIA UNIVERSITY IRVING MEDICAL CENTER - 630 WEST 168TH STREET - NEW YORK, NY 10031	13-5598093	501(C)(3)	140,000.	0.			RESEARCH
HOSPITAL FOR SPECIAL SURGERY 535 E. 70TH STREET NEW YORK, NY 10021	13-1624135	501(C)(3)	100,000.	0.			RESEARCH

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

7.

3

Enter total number of other organizations listed in the line 1 table

0.

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
RESEARCH AWARD	2	10,000.	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:

ALL GRANT RECIPIENTS ARE REQUIRED TO SIGN THE FOUNDATION'S GRANT AWARD

AGREEMENT AND MEET THE FOLLOWING CONDITIONS:

- MEET ALL APPLICABLE AND RELEVANT GUIDELINES REGARDING THE USE OF ANIMAL AND HUMAN SUBJECTS.
- MEET ALL INSTITUTIONAL POLICIES AND LOCAL, STATE, AND FEDERAL REGULATIONS GOVERNING THE CONDUCT OF RESEARCH.
- SUBMIT INTERNAL REVIEW BOARD AND INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE (IF APPLICABLE) APPROVAL FROM THE GRANT RECIPIENT'S INSTITUTION.

Part IV Supplemental Information

- COMPLETE AND SUBMIT THE "PROPOSED BUDGET".
 - ADHERE TO THE FOUNDATION'S POLICY ON INVENTIONS AND DISCOVERIES.
 - NOTIFY THE FOUNDATION OF ANY PUBLICATION OR PROFESSIONAL PRESENTATION BASED ON FOUNDATION-FUNDED RESEARCH PROJECT AND PROVIDE THE FOUNDATION WITH ELECTRONIC COPIES OF ANY PUBLICATION OR PROFESSIONAL PRESENTATION MADE POSSIBLE, FACILITATED, EXPEDITED, OR SUPPORTED IN ANY WAY BY THE AWARD, EVEN IF DEVELOPED, INITIATED, OR FINALIZED AFTER THE AWARD PERIOD HAS EXPIRED, WITHIN 30 DAYS OF FINAL PRODUCTION.
 - ACKNOWLEDGE THE FOUNDATION IN ANY AND ALL PUBLICATIONS OR PRESENTATIONS BASED, PARTIALLY OR WHOLLY, ON OR DEVELOPED UNDER THE AWARD MUST, UNLESS OTHERWISE REQUESTED BY THE FOUNDATION, WITH THE FOLLOWING STATEMENT: "THIS RESEARCH WAS SUPPORTED BY THE LUPUS FOUNDATION OF AMERICA, INC."
 - ALL FUNDS ARE USED EXCLUSIVELY TOWARD EXPENDITURES FOR THE SAID RESEARCH, AND NO AMOUNT OF THE RESEARCH GRANT FUNDS CAN BE USED TO FINANCE INDIRECT COSTS.
 - KEEP COMPLETE AND ACCURATE RECORDS ON THE RECEIPT AND DISBURSEMENT OF ALL AWARD FUNDS, AND MAY NOT CO-MINGLE ANY FUNDS FROM OTHER SOURCES. MUST RETAIN ALL SUCH RECORDS FOR A PERIOD OF AT LEAST TWO YEARS AFTER THE EXPIRATION DATE OF THE AGREEMENT AND THE FOUNDATION HAS THE RIGHT TO REVIEW SUCH RECORDS UPON REQUEST.
- IN ADDITION, ALL GRANT RECIPIENTS ARE REQUIRED TO SUBMIT INTERIM AND FINAL REPORTS WITH A GRANT INSTALLMENT PAYMENT TIED TO REPORT SUBMISSION. THE FOUNDATION'S EDUCATION & RESEARCH TEAM REVIEWS THE INTERIM AND FINAL REPORTS TO CONFIRM THAT THE INVESTIGATOR ACHIEVED THE ORIGINAL STUDY OBJECTIVE.
- AGREE THAT EITHER PARTY MAY TERMINATE THE AGREEMENT FOR CONVENIENCE UPON THIRTY (30) DAYS PRIOR WRITTEN NOTICE TO THE OTHER PARTY. THE FOUNDATION RESERVES THE RIGHT TO TERMINATE THE AGREEMENT EFFECTIVE IMMEDIATELY, UPON

Part IV Supplemental Information

WRITTEN NOTICE, IF THE GRANT RECIPIENT (I) IS UNABLE TO COMPLETE THE STUDY;
(II) MATERIALLY ALTER THE STUDY; (III) USES THE AWARD GRANT FOR PROHIBITED
EXPENSES OR; (IV) BREACHES OF THE AGREEMENT AND FAILS TO CURE SUCH BREACH
WITHIN TEN (10) DAYS FOLLOWING RECIPIENT'S OR INSTITUTION'S RECEIPT OF
WRITTEN NOTICE THEREOF.

- ACKNOWLEDGE THAT NEITHER THE FOUNDATION, THE INSTITUTION, NOR
INVESTIGATOR SHALL BE LIABLE FOR ANY FAILURE TO PERFORM ANY OBLIGATIONS
UNDER THE AGREEMENT IF SUCH FAILURE RESULTS FROM CAUSES BEYOND ITS
REASONABLE CONTROL.

- ACKNOWLEDGE THAT THE AGREEMENT SHALL BE GOVERNED BY THE LAWS OF THE
DISTRICT OF COLUMBIA, WITHOUT REGARD TO ITS CONFLICT OF LAW RULES.

- ACKNOWLEDGE THAT THE AGREEMENT MAY NOT BE ASSIGNED OR TRANSFERRED WITHOUT
THE FOUNDATION'S PRIOR WRITTEN CONSENT.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

- For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
- ▶ Attach to Form 990.
- ▶ 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

LUPUS FOUNDATION OF AMERICA, INC.

Employer identification number

43-1131436

Part I Questions Regarding Compensation

	Yes	No
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross up payments <input type="checkbox"/> Discretionary spending account </div> <div> <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) </div> </div>		
<p>b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b	
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?</p>	2	
<p>3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations </div> <div> <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee </div> </div>		
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p>		
<p>a Receive a severance payment or change-of-control payment?</p>	4a	X
<p>b Participate in or receive payment from a supplemental nonqualified retirement plan?</p>	4b	X
<p>c Participate in or receive payment from an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4c	X
<p>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p>		
<p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p>		
<p>a The organization?</p>	5a	X
<p>b Any related organization?</p> <p>If "Yes" on line 5a or 5b, describe in Part III.</p>	5b	X
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p>		
<p>a The organization?</p>	6a	X
<p>b Any related organization?</p> <p>If "Yes" on line 6a or 6b, describe in Part III.</p>	6b	X
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III</p>	7	X
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	8	X
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9	

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

Schedule J (Form 990) 2021

Part III Supplemental Information

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

PART I, LINE 7:

THE PRESIDENT & CEO'S BONUS IS AWARDED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS BASED ON A PERFORMANCE EVALUATION. OTHER OFFICERS, KEY EMPLOYEES, AND HIGHEST COMPENSATED EMPLOYEES' BONUSES ARE AWARDED AT THE DISCRETION OF THE PRESIDENT & CEO.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2021

Open to Public
Inspection

- ▶ **Complete** if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ **Attach** to Form 990.
▶ **Go to** www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

LUPUS FOUNDATION OF AMERICA, INC.

Employer identification number

43-1131436

Part I **Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles	X	27	22,373.	FAIR MARKET VALUE
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	7	55,906.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (.....				
26 Other ▶ (.....				
27 Other ▶ (.....				
28 Other ▶ (.....				

29 Number of Forms 8283 received by the organization during the tax year for contributions
for which the organization completed Form 8283, Part V, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it
must hold for at least three years from the date of the initial contribution, and which isn't required to be used for
exempt purposes for the entire holding period?

	Yes	No
30a		X
31	X	
32a		X
33		

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,
describe in Part II.

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

Schedule M (Form 990) 2021

Part II

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

SCHEDULE 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

LUPUS FOUNDATION OF AMERICA, INC.

Employer identification number
43-1131436

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

WE CREATED AND EXECUTED MULTIPLE SOCIAL MEDIA CAMPAIGNS AS PART OF OUR
"SPOTLIGHT SERIES" TO CALL ATTENTION TO THE UNIQUE IMPACT OF LUPUS
AMONG DIFFERENT POPULATIONS AND AUDIENCES, SHARING IMPORTANT RESOURCES
AND CALLING ATTENTION TO HEALTH DISPARITIES.

DURING LUPUS AWARENESS MONTH IN MAY THE FOUNDATION HIGHLIGHTED MANY OF
THE OFTEN-INVISIBLE WAYS LUPUS IMPACTS EVERYDAY LIFE. OUR EFFORTS TO
RAISE AWARENESS SPANNED SOCIAL MEDIA, EMAIL AND WE EVEN SECURED
NATIONAL TV SEGMENTS ON NBC'S TODAY SHOW AND TELEMUNDO'S HOY DA. THE
FOUNDATION ALSO SPEARHEADED THE ANNUAL GLOBAL OBSERVANCE OF WORLD LUPUS
DAY ON MAY 10. WE DEVELOPED AND EXECUTED A WORLD-WIDE "MAKE LUPUS
VISIBLE" SOCIAL MEDIA CAMPAIGN TO SHARE IMPORTANT LUPUS EDUCATION
FACTS, LEVERAGED THROUGH THE SHARING OF VARIOUS TOOLS, MESSAGES AND
IMAGES TO SUCCESSFULLY RAISE AWARENESS OF LUPUS AND ITS IMPACT ON A
GLOBAL SCALE.

MORE THAN 110 CONTENT CREATORS JOINED US FOR GAME ON! TO END LUPUS, OUR
THREE DAY LIVE STREAM EVENT WHERE STREAMERS FROM AROUND THE WORLD RAISE
AWARENESS OF LUPUS AND FUNDS FOR LUPUS RESEARCH.

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

THE FOUNDATION ALSO PROVIDES OVERSIGHT AND RESOURCES TO MORE THAN 55

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

Schedule O (Form 990) 2021

132211 11-11-21

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NATIONAL SUPPORT GROUPS AND 75 TRAINED SUPPORT GROUP FACILITATORS WHO SERVE CONSTITUENTS NATIONWIDE. IN 2022, THE FOUNDATION EXPANDED ITS SUPPORT GROUPS TO SERVE KEY POPULATIONS IMPACTED BY LUPUS. THESE GROUPS INCLUDE: MALES WHO ARE LIVING WITH LUPUS, A YOUTH GROUP FOR INDIVIDUALS UNDER AGE 25, A HISPANIC SUPPORT GROUP WHICH OFFERS HELP IN ENGLISH AND SPANISH, AN ASIAN SUPPORT GROUP THAT PROVIDES HELP THROUGHOUT THE COUNTRY AS WELL AS INTERNATIONALLY, CAREGIVERS AND CARE PARTNERS FOR LUPUS PATIENTS, AND A GROUP FOR BLACK WOMEN WHO ARE LIVING WITH LUPUS. DUE TO THE PANDEMIC, WE CONVERTED ALL SUPPORT GROUPS TO VIRTUAL GATHERINGS, ALLOWING GREATER ACCESS TO THIS VALUABLE RESOURCE NEEDED NOW MORE THAN EVER.

THE FOUNDATION CONTINUES ITS LEADERSHIP ROLE OF THE WORLD LUPUS FEDERATION, A GLOBAL COALITION OF ROUGHLY 250 LUPUS PATIENT ADVOCACY GROUPS FROM 75 COUNTRIES. THE FEDERATION'S MISSION IS TO ADVANCE LUPUS AWARENESS AND ADVOCACY INITIATIVES THAT BRING GREATER ATTENTION AND RESOURCES TO THE FIGHT TO END LUPUS WORLDWIDE. IN 2022, THE WORLD LUPUS FEDERATION CONDUCTED A GLOBAL SURVEY TO UNDERSTAND THE IMPACT OF LUPUS ON THE BODY'S ORGANS. MORE THAN 6,700 PEOPLE WITH LUPUS FROM OVER 100 COUNTRIES PARTICIPATED IN THE SURVEY. AMONG THE FINDINGS, 87% REPORTED LUPUS HAS IMPACTED ONE OR MORE MAJOR ORGANS OR ORGAN SYSTEMS, AND NEARLY THREE QUARTERS OF RESPONDENTS REPORTED AN AVERAGE OF THREE ORGANS AFFECTED.

THE FOUNDATION ALSO ENGAGED WITH VOLUNTEERS AND SUPPORTERS THROUGHOUT THE UNITED STATES. FOR THE FIRST TIME SINCE 2019, THE WALK TO END LUPUS NOW EVENTS WERE HELD IN-PERSON IN OVER 19 MARKETS ACROSS THE COUNTRY. BEING BACK IN-PERSON ALLOWED FOR IMPORTANT CONNECTION AND ENGAGEMENT

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AMONG WALK PARTICIPANTS, SPONSORS AND VOLUNTEERS, AS WELL AS THE OPPORTUNITY TO RAISE AWARENESS AND FUNDS VITAL TO IMPROVING THE QUALITY OF LIFE FOR ALL PEOPLE AFFECTED BY LUPUS. IN ADDITION, A VIRTUAL 'CELEBRATION' WAS HELD TO ALLOW FOR PARTICIPATION FROM ACROSS THE COUNTRY, INCLUDING THOSE NOT COMFORTABLE PARTICIPATING IN-PERSON, OR THOSE WITHOUT A WALK IN THEIR LOCAL COMMUNITY.

THE "VIRTUAL 6 CHALLENGE," 6 DAYS TO COMPLETE 6 MILES, REPLACED THE FOUNDATION'S IN-PERSON ENDURANCE PROGRAM, "TEAM MAKE YOUR MARK" AND CONTINUES TO PROVIDE A UNIQUE OPPORTUNITY FOR PARTICIPANTS FROM ALL ACROSS THE COUNTRY TO PARTICIPATE IN A WAY THAT BEST MATCHES THEIR AREA OF INTEREST.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
THROUGH OUR DIRECT FUNDING SUPPORT AND VARIOUS FOUNDATION INITIATIVES, WE INVESTED OVER \$1.0 MILLION TO FUND PEER-REVIEWED RESEARCH GRANTS, AWARDS TO INVESTIGATORS, RESEARCH PARTNERSHIPS, AND COLLABORATIVE PROJECTS.

AS PART OF OUR RESEARCH FUNDING EFFORTS, THE FOUNDATION ALSO WORKED WITH CONGRESS TO SECURE MORE THAN \$22 MILLION IN PUBLIC FUNDING FOR LUPUS RESEARCH AND EDUCATION PROGRAMS. THE FOUNDATION ALSO HELPED SECURE A \$2.5 BILLION INCREASE IN FUNDING FOR THE NATIONAL INSTITUTES OF HEALTH, THE WORLD'S LARGEST PUBLIC FUNDER OF LUPUS RESEARCH.

THE FOUNDATION CONTINUES TO LEAD INITIATIVES TO OVERCOME BARRIERS THAT INHIBIT PROGRESS IN DEVELOPING AND APPROVING NEW, EFFECTIVE AND TOLERABLE TREATMENTS FOR PEOPLE WITH LUPUS, INCLUDING:

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- RECRUITING MORE THAN 500 NEW PEOPLE WITH LUPUS AND CAREGIVERS TO PARTICIPATE IN RESEARCH ACCELERATED BY YOU (RAY), A LUPUS DATA PLATFORM FOR PEOPLE WITH LUPUS AND CAREGIVERS TO SHARE ANONYMOUS INFORMATION ABOUT THEIR LUPUS EXPERIENCE. WE ALSO WORKED TO INCREASE DIVERSE REPRESENTATION WITHIN RAY BY USING EVIDENCE-BASED APPROACHES TO RECRUITMENT. THE RAY DATA PLATFORM WAS UPGRADED IN 2022 TO COLLECT DATA OVER THE LIFESPAN OF THE PARTICIPANT WHICH WILL ENHANCE OUR CAPABILITIES TO ASSESS THE NATURAL HISTORY OF DISEASE AND ASCERTAIN ADDITIONAL INSIGHTS ABOUT A PERSON'S JOURNEY WHILE LIVING WITH LUPUS. THE DATA PLATFORM SERVES AS A CONDUIT TO HELP RESEARCHERS ACCELERATE THE DEVELOPMENT OF NEW TREATMENTS AND IMPROVE DISEASE OUTCOMES USING PATIENT-FIRST AND PATIENT-CENTRIC APPROACHES.

- SUPPORTING A MULTI-YEAR STUDY OF MESENCHYMAL STROMAL CELLS AS A POTENTIAL TREATMENT FOR LUPUS. THE MEDICAL UNIVERSITY OF SOUTH CAROLINA LEADS THE STUDY IN PARTNERSHIP WITH THE NATIONAL INSTITUTE FOR ALLERGY AND INFECTIOUS DISEASES (NIAID). ALL CLINICAL SITES CONTINUE TO ENROLL PARTICIPANTS, AND INVESTIGATORS EXPECT TO FINISH THE STUDY ON TIME.

- LEADING THE ADDRESSING LUPUS PILLARS FOR HEALTH ADVANCEMENT (ALPHA) PROJECT, A GLOBAL MULTI-PHASE INITIATIVE TO IDENTIFY AND ADDRESS TOP URGENT AND UNMET ISSUES THAT WILL IMPROVE LUPUS OUTCOMES. IN 2022, THE PROJECT WORK GROUPS FOCUSED ON THREE PILLARS OF NEED: ACCESS TO CARE, DRUG DEVELOPMENT, AND CLINICAL CARE. THIS YEAR, THE TEAMS ADDRESSED CRITICAL ISSUES RELATED TO TIME TO DIAGNOSIS AND EXPLORED THE BENEFITS AND NEGATIVE CONSEQUENCES OF DEFINING LUPUS AS A SPECTRUM DISEASE. THE DRUG DEVELOPMENT WORKING GROUP CONVENED A MEETING ON CLINICAL TRIAL OUTCOME MEASURES IN LUPUS THAT HIGHLIGHTED CHALLENGES IN ACCURATELY ACCOUNTING FOR LUPUS HETEROGENEITY ACROSS THE AGE CONTINUUM AND THE

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IMPORTANCE OF MEASURING OUTCOMES IMPORTANT TO PEOPLE LIVING WITH LUPUS.

THIS WORK HAS RESULTED IN SECURING TWO TIMELY JOURNAL PUBLICATIONS THAT

WILL BE PUBLISHED IN EARLY 2023.

- FUNDING GRADUATE AND UNDERGRADUATE STUDENT FELLOWSHIPS AND EARLY

CAREER DEVELOPMENT GRANTS TO SUPPORT A NEW GENERATION OF LUPUS

CLINICIAN-SCIENTISTS. THESE AWARDS ADDRESS A SEVERE LOSS OF CURRENT AND

FUTURE LUPUS INVESTIGATORS DUE TO A DECLINE IN FEDERAL TRAINING

SUPPORT. THE FOUNDATION ALSO EXPANDED AND LAUNCHED NEW STRATEGIC

PARTNERSHIPS WITH ORGANIZATIONS THAT PLAY A CENTRAL ROLE IN ADVANCING

LUPUS SCIENCE. PART OF THE FOUNDATION'S EFFORTS AND SUPPORT FOR THESE

STRATEGIC PARTNERSHIPS INCLUDED:

-- FUNDING THE NEXT TWO YEARS OF THE IMPACT (IMPROVE PREGNANCY IN APS

WITH CERTOLIZUMAB THERAPY) PHASE II TRIAL OF A BIOLOGIC THERAPY TO

PREVENT ADVERSE OUTCOMES IN HIGH-RISK PREGNANCIES AMONG PATIENTS WITH

ANTIPHOSPHOLIPID SYNDROME (APS), WITH OR WITHOUT SLE.

-- FUNDING FOR SYSTEMIC LUPUS ERYTHEMATOSUS COLLABORATING CLINICS

(SLICC), A GLOBAL BODY OF LUPUS EXPERTS, TO UPDATE THE SLICC DAMAGE

INDEX, THE ONLY FDA-ACCEPTED OUTCOME MEASURE FOR LUPUS CLINICAL TRIALS.

-- PARTNERING WITH LUPUS CANADA FOR A THIRD YEAR TO MANAGE THEIR

CATALYST GRANT, WHICH PROVIDES ONE-YEAR FUNDING TO CANADIAN RESEARCHERS

AT ANY STAGE IN THEIR CAREERS.

THROUGH OUR ADVOCACY EFFORTS IN 2022, WE SUPPORTED LUPUS RESEARCH BY:

- HOSTING THE 2022 DIGITAL ADVOCACY SUMMIT, BRINGING TOGETHER NEARLY

3,000 LUPUS ADVOCATES TO ADVOCATE FOR INCREASED RESEARCH FUNDING AND

POLICIES TO IMPROVE THE LIVES OF ALL PEOPLE WITH LUPUS. DURING THE

TWO-DAY PROGRAM, ADVOCATES LEARNED ABOUT THE TOP ISSUES IN LUPUS

RESEARCH AND ON THE FINAL DAY OF THE SUMMIT, CONDUCTED OVER 180 DIGITAL

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MEETINGS WITH THEIR MEMBERS OF CONGRESS.

- ADVOCATING TO SECURE \$22 MILLION IN FUNDING FOR LUPUS-SPECIFIC RESEARCH AND EDUCATION PROGRAMS FOR FISCAL YEAR 2023, THE MOST FUNDING CONGRESS HAS EVER APPROVED FOR LUPUS-SPECIFIC PROGRAMS IN A SINGLE YEAR, INCLUDING AN OMNIBUS PASSED IN DECEMBER 2022 THAT INCLUDED:

-- \$10 MILLION TO SUPPORT THE NATIONAL LUPUS PATIENT REGISTRY PROGRAM AT THE US CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC), A \$500,000 INCREASE OVER FISCAL YEAR 2022 WHICH BRINGS TOTAL FUNDING FOR THE PROGRAM TO MORE THAN \$101 MILLION SINCE ITS CREATION IN 2003;

-- \$10 MILLION FOR THE LUPUS RESEARCH PROGRAM AT THE DEPARTMENT OF DEFENSE, BRINGING TOTAL FUNDING FOR THE PROGRAM TO OVER \$76 MILLION SINCE IT WAS FIRST FUNDED IN FISCAL YEAR 2017;

-- \$2 MILLION FOR THE OFFICE OF MINORITY HEALTH AND THEIR NATIONAL LUPUS TRAINING, OUTREACH, AND CLINICAL TRIAL EDUCATION PROGRAM, AS WELL AS SPECIFIC LANGUAGE DIRECTING THE AGENCY TO CONTINUE EFFORTS TO INCREASE MINORITY PARTICIPATION IN LUPUS CLINICAL TRIALS;

-- \$47.5 BILLION FOR THE NATIONAL INSTITUTES OF HEALTH, THE WORLD'S LARGEST PUBLIC FUNDER OF LUPUS RESEARCH, AN INCREASE OF \$2.5 BILLION OVER THE PREVIOUS FISCAL YEAR;

- LEADING A TRAINING OF THE LUPUS RESEARCH ACTION NETWORK, A GROUP OF PEOPLE WITH LUPUS WHO ARE TRAINED IN PEER-TO-PEER EDUCATION RELATED TO LUPUS CLINICAL TRIALS AND RESEARCH, WITH A SPECIFIC GOAL TO INCREASE PARTICIPATION OF MINORITIES IN LUPUS RESEARCH. THE TRAINING WAS CONDUCTED AS A KEY COMPONENT OF THE FOUNDATION'S IMPACT+ (INCREASING MINORITY PARTICIPATION AND AWARENESS IN CLINICAL TRIALS) GRANT WITH THE HHS OFFICE OF MINORITY HEALTH.

- PARTNERING WITH TOP NATIONAL PATIENT ORGANIZATIONS TO LEAD THE PROTECTING THE IMMUNOCOMPROMISED COLLABORATIVE. THE COLLABORATIVE

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ADVOCATES FOR STATE AND FEDERAL POLICIES THAT RECOGNIZE THE UNIQUE NEEDS OF PEOPLE LIVING WITH LUPUS DURING THE COVID-19 PANDEMIC, INCLUDING VACCINES, THERAPIES, REOPENING, ACCESS TO HEALTH CARE, AND OTHER PUBLIC HEALTH INITIATIVES AND GUIDELINES.

- CONTINUING TO ELEVATE THE PATIENT VOICE IN DRUG DEVELOPMENT AND REGULATORY DECISION-MAKING, PROVIDING THE LUPUS PATIENT PERSPECTIVE TO CONGRESS AND THE FDA, INCLUDING ADVOCATING FOR LEGISLATION, ENACTED IN DECEMBER 2022, TO REAUTHORIZE THE PRESCRIPTION DRUG USER FEE ACT (PDUFA), WHICH INCLUDED PROVISIONS TO INCREASE MINORITY PARTICIPATION IN CLINICAL TRIALS.

- LEADING THE MARKET ACCESS WORKING GROUP, COMPRISING PEOPLE WITH LUPUS AND KEY OPINION LEADERS WORKING TO INCREASE ACCESS AND REDUCE BARRIERS TO QUALITY CARE. AS PART OF THIS EFFORT, THE FOUNDATION ENGAGED IN FEDERAL AND STATE ADVOCACY INITIATIVES, INCLUDING THOSE TO ELIMINATE HEALTH PLAN STEP THERAPY POLICIES, CO-PAY ACCUMULATORS AND OTHER POLICIES THAT RESTRICT, DELAY AND DENY PEOPLE WITH LUPUS ACCESS TO THE CARE THEY NEED, WHEN THEY NEED IT.

- CONTINUING TO LEAD THE MAPRX COALITION, A GROUP OF MORE THAN 60 NATIONAL PATIENT ADVOCACY ORGANIZATIONS DEDICATED TO PROTECTING AND STRENGTHENING THE MEDICARE PART D PRESCRIPTION DRUG BENEFIT FOR 44 MILLION AMERICANS WITH DISABILITIES. NOTABLY, THE COALITION ADVOCATED FOR KEY ELEMENTS OF THE INFLATION REDUCTION ACT, ENACTED IN 2022, WHICH INCLUDED SEVERAL COALITION PRIORITIES, SPECIFICALLY:

- A \$2,000 OUT-OF-POCKET CAP TO LIMIT COSTS FOR THOSE ON MEDICARE PART D;
- A "SMOOTHING MECHANISM" THAT WILL ALLOW PART D BENEFICIARIES TO SPREAD HIGH-DRUG COSTS THROUGHOUT THE PLAN YEAR;
- EXPANDED ELIGIBILITY FOR THE LOW-INCOME SUBSIDY IN PART D TO

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INCREASE AFFORDABILITY;

-- REMOVAL OF COST-SHARING FOR VACCINES IN MEDICARE PART D, A MAJOR

PUBLIC HEALTH VICTORY.

- SUPPORTING PROVISIONS INCLUDED IN THE INFLATION REDUCTION ACT THAT

EXTENDED AFFORDABLE CARE ACT SUBSIDIES TO HELP PEOPLE WITH LUPUS ACCESS

HEALTH INSURANCE.

- LEADING A NETWORK OF NEARLY 40,000 GRASSROOTS ADVOCATES FROM EVERY

STATE AND 435 CONGRESSIONAL DISTRICTS WHO HELPED ADVANCE LUPUS PUBLIC

POLICY PRIORITIES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

PATIENT EDUCATION AND SUPPORT:

THE FOUNDATION REMAINS THE LEADER IN LUPUS EDUCATION, AND ONCE AGAIN

PROVIDED EDUCATION, SUPPORT, AND OTHER ASSISTANCE TO INDIVIDUALS WITH

LUPUS, THEIR FAMILIES, AND CAREGIVERS.

THE COVID-19 PANDEMIC CONTINUES TO AFFECT PEOPLE LIVING WITH CHRONIC

ILLNESSES AND THOSE WHO ARE IMMUNOCOMPROMISED. WE CONTINUED TO UTILIZE

OUR WEBSITE, INCLUDING THE NATIONAL RESOURCE CENTER ON LUPUS (RESOURCE

CENTER) AND OTHER RESOURCES TO PROVIDE ESSENTIAL ANSWERS TO QUESTIONS

FROM PEOPLE WITH LUPUS AND ADDRESS THEIR CONCERNS ABOUT THE FUTURE, THE

IMPACT OF COVID ON THEIR HEALTH, AND HOW TO HANDLE EVERYDAY LIFE.

THROUGHOUT THE YEAR, WE PROVIDED CLEAR, MEDICALLY-ACCURATE INFORMATION

FOR PEOPLE AFFECTED BY LUPUS ON CHANGING RECOMMENDATIONS RELATED TO THE

COVID-19 VACCINE, BOOSTERS AND PUBLIC HEALTH MEASURES. THIS GUIDANCE

HELPS PEOPLE WITH LUPUS NAVIGATE THE PANDEMIC BY CONTINUOUSLY ADAPTING

TO THEIR CURRENT NEEDS AND EVOLVING SITUATION.

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WE CONTINUED TO GENERATE EDUCATIONAL CONTENT IN VARIOUS FORMATS, LANGUAGES, AND TOPICS IMPORTANT TO PEOPLE WITH LUPUS. WE DEVELOPED MORE THAN 120 INFORMATION RESOURCES IN ENGLISH AND SPANISH IN THE PAST YEAR. WE PRODUCED NEW EPISODES OF OUR MONTHLY PATIENT EDUCATION PODCAST, THE EXPERT SERIES, FEATURING LUPUS EXPERTS WHO OFFER INSIGHT ON VARIOUS ESSENTIAL TOPICS. THE PODCASTS ARE ACCESSIBLE THROUGH LUPUS.ORG, YOUTUBE, ITUNES, AND SPOTIFY. THE EXPERT SERIES CONTINUED TO GROW IN 2022 WITH MORE THAN 19,000 PLAYS ACROSS ALL EPISODES. WE ALSO ENROLLED MORE THAN 1,700 PEOPLE IN TAKE CHARGE, OUR 12-WEEK EMAIL SERIES AIMED AT PROVIDING NEWLY DIAGNOSED PEOPLE WITH LUPUS WITH THE KNOWLEDGE THEY NEED TO BETTER MANAGE THEIR HEALTH.

DUE TO THE PANDEMIC, EDUCATIONAL PROGRAMS, INCLUDING LUPUS AND YOU: ANSWERS, ADVOCACY, ACTION (LUPUS & YOU), AND OUR SUPPORT GROUPS, CONTINUED TO BE OFFERED ONLINE. WE CONDUCTED MORE THAN 40 VIRTUAL LUPUS & YOU EDUCATIONAL EVENTS FOCUSING ON REACHING PEOPLE IN SPECIFIC MARKETS. ALSO, IN 2022, WE INTRODUCED A NEW NATIONAL LUPUS & YOU QUARTERLY SERIES TO PROVIDE CONSTITUENTS NATIONWIDE OPPORTUNITIES TO PARTICIPATE IN THIS INFORMATIVE AND HELPFUL PROGRAM. THIS UNIQUE PROGRAM REACHED NEARLY 6,000 PARTICIPANTS.

ONE OF THE MANY HIGHLIGHTS OF THE YEAR WAS THE LAUNCH OF OUR FIRST-OF-ITS-KIND ONLINE LUPUS SELF-MANAGEMENT PROGRAM CALLED STRATEGIES TO EMBRACE LIVING WITH LUPUS FEARLESSLY (SELF). SELF IS A FREE, ONLINE, EVIDENCE-BASED SELF-MANAGEMENT PROGRAM DESIGNED TO HELP PEOPLE WITH LUPUS BUILD AND ENHANCE SKILLS IN FOUR PILLARS OF LUPUS SELF-MANAGEMENT: MANAGING SYMPTOMS, MANAGING STRESS, MANAGING

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MEDICATIONS AND WORKING WITH THEIR HEALTHCARE TEAM. SELF WAS LAUNCHED IN JANUARY 2022 AND MORE THAN 1,600 PARTICIPANTS HAD ENROLLED THROUGH THE END OF FY 2022.

OUR NATIONAL HEALTH EDUCATION SPECIALISTS RESPONDED TO 2,411 INQUIRIES VIA TELEPHONE, EMAIL, AND HANDWRITTEN INQUIRIES IN ENGLISH AND SPANISH AND DIRECTED CONSTITUENTS TO THE NATIONAL RESOURCE CENTER ON LUPUS FOR FURTHER INFORMATION TO MANAGE LUPUS. THE RESOURCE CENTER IS BEING UTILIZED CONTINUALLY AS THE FIRST STOP FOR PEOPLE SEARCHING FOR BASIC INFORMATION ON LUPUS AND LOCAL RESOURCES. ADDITIONALLY, THE LUPUS INFORMATIONAL PACKET, A DIGITAL DOCUMENT AVAILABLE IN ENGLISH AND SPANISH, HAS BEEN DOWNLOADED 6,067 TIMES.

EXPENSES \$ 471,771. INCLUDING GRANTS OF \$ 0. REVENUE \$ 10,000.

PROFESSIONAL RELATIONS AND EDUCATION:

OUR PROFESSIONAL EDUCATION PROGRAMS ARE DESIGNED TO DEVELOP AND INCREASE KNOWLEDGE, SKILLS, AND PROFESSIONAL PERFORMANCE OF ALL HEALTH CARE PROVIDERS WHO TREAT PEOPLE WITH LUPUS, AND WE WORK TO TRANSLATE RESEARCH FINDINGS INTO PUBLIC HEALTH RECOMMENDATIONS FOR PHYSICIANS, OTHER HEALTHCARE PROFESSIONALS, AND THEIR RESPECTIVE ORGANIZATIONS.

IN 2022, WE CONTINUED TO FOCUS ON EXPANDING PARTNERSHIPS WITH ORGANIZATIONS THAT SERVE MEDICAL AND OTHER HEALTH CARE PROFESSIONALS.

IN PARTICULAR, THE FOUNDATION IN PARTNERSHIP WITH THE RHEUMATOLOGY NURSES SOCIETY AND THE OFFICE OF MINORITY HEALTH (OMH) IN THE U.S.

DEPARTMENT OF HEALTH AND HUMAN SERVICES HAS DEVELOPED AN EDUCATIONAL

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PROGRAM FOR NURSES, LUPUS CONVERSATIONS: LET'S TALK ABOUT LUPUS, CLINICAL TRIALS, AND RACE PROGRAM, TO ADDRESS DISPARITIES IN LUPUS CLINICAL TRIAL PARTICIPATION. CLINICAL TRIALS WITH A DIVERSE ARRAY OF PARTICIPANTS ARE ESSENTIAL FOR THE DEVELOPMENT OF NEW AND EFFECTIVE LUPUS THERAPIES, BUT RACIAL AND ETHNIC MINORITY POPULATIONS HAVE BEEN AND CONTINUE TO BE UNDERREPRESENTED IN LUPUS CLINICAL TRIALS. THE EVIDENCE-BASED EDUCATIONAL PROGRAM INCLUDES A FREE CNE ACCREDITED SESSION AND ROLE-PLAY VIDEO DISCUSSING THE BARRIERS AND FACILITATORS TO CLINICAL TRIAL PARTICIPATION AMONG BLACK/AFRICAN AMERICANS. THE COURSE IS DESIGNED TO MEET THE EDUCATIONAL NEEDS OF RHEUMATOLOGY NURSES, NURSE PRACTITIONERS, AND PHYSICIAN ASSISTANTS. OTHER HEALTHCARE PROVIDERS MAY ALSO PARTICIPATE.

THIS YEAR WE SAW A RECORD NUMBER OF MANUSCRIPTS SUBMITTED TO THE FOUNDATION'S PEER-REVIEWED, OPEN-ACCESS JOURNAL, LUPUS SCIENCE & MEDICINE (LS&M), WHICH PUBLISHES DATA FROM IMPORTANT AND PIVOTAL STUDIES OF ALL ASPECTS OF LUPUS AND RELATED DISEASES. IN 2022, LS&M FURTHER IMPROVED ITS IMPACT FACTOR WITH A 4.687 SCORE, WHICH IS THE HIGHEST FOR ANY LUPUS-SPECIFIC JOURNAL AND RANKS CLOSELY AMONG THE MOST PROMINENT JOURNALS IN RHEUMATOLOGY. THE IMPACT FACTOR WILL FURTHER INCREASE AUTHOR INTEREST IN SUBMITTING MANUSCRIPTS TO LS&M AND EXPAND THE FOUNDATION'S ABILITY TO SHARE MORE GROUNDBREAKING STUDIES IN THIS BARRIER-FREE FORMAT. TO FURTHER PROMOTE LS&M AND THE RESEARCH SHARED, AUTHORS OF KEY RESEARCH FINDINGS ARE INTERVIEWED DURING A MONTHLY PODCAST SERIES PRODUCED BY THE FOUNDATION.

EXPENSES \$ 18,699. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 7A:

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THE CHAPTERS HAVE THE AUTHORITY TO ELECT THE MEMBERS OF THE NATIONAL COUNCIL REPRESENTATIVES OF THE BOARD OF THE DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 7B:

THE CHAPTERS HAVE THE AUTHORITY TO VOTE ON ANY PROPOSED CHANGES BY THE BOARD OF THE DIRECTORS TO THE FOUNDATION'S BYLAWS.

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

THE FOUNDATION HIRES AN INDEPENDENT ACCOUNTING FIRM TO PREPARE THE FORM 990. A COPY OF THE FINAL DRAFT OF THE FORM 990 IS REVIEWED AND APPROVED BY THE FINANCE COMMITTEE VIA A TELEPHONE CONFERENCE. ONCE APPROVED BY THE FINANCE COMMITTEE, A COMPLETE COPY OF THE FORM 990 IS DISTRIBUTED TO ALL MEMBERS OF THE BOARD OF DIRECTORS BEFORE FILING THE FORM WITH THE INTERNAL REVENUE SERVICE.

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

AT THE FOUNDATION'S BOARD MEETING IN THE FALL, THE CONFLICT OF INTEREST STATEMENT AND QUESTIONNAIRE ARE COMPLETED AND SIGNED BY EACH OFFICER, DIRECTOR, COMMITTEE MEMBER AND KEY EMPLOYEE. ALL CONFLICT OF INTEREST STATEMENTS AND QUESTIONNAIRES ARE REVIEWED BY THE PRESIDENT & CEO AND CHIEF FINANCIAL OFFICER WHO NOTE ANY ACTUAL OR POTENTIAL CONFLICTS. WHEN THERE IS A DOUBT AS TO WHETHER A CONFLICT OF INTEREST EXISTS, THE MATTER SHALL BE RESOLVED BY A VOTE OF THE BOARD OF DIRECTORS (OR ITS COMMITTEE), EXCLUDING THE PERSON CONCERNING WHOSE SITUATION THE DOUBT HAS ARISEN. THERE HAVE BEEN NO CONFLICTS NOTED DURING THE YEAR.

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

THE EXECUTIVE COMMITTEE OF THE BOARD (EC) CONDUCTS AN ANNUAL PERFORMANCE

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EVALUATION OF THE PRESIDENT & CEO AND RECOMMENDS SALARY LEVEL CHANGES TO THE BOARD OF DIRECTORS FOR APPROVAL. THE RECOMMENDED CHANGES ARE BASED ON THE MOST CURRENTLY AVAILABLE COMPARABILITY DATA FROM THE MANAGEMENT COMPENSATION SURVEY STUDY PUBLISHED JOINTLY BY THE NATIONAL HEALTH COUNCIL AND THE NATIONAL HUMAN SERVICES ASSEMBLY. ONCE APPROVED, ONE OF THE MEMBERS OF THE EC, GENERALLY THE CHAIRMAN OR THE TREASURER, NOTIFIES THE CHIEF FINANCIAL OFFICER OF THE NEW APPROVED COMPENSATION ARRANGEMENT FOR THE PRESIDENT & CEO. ALL OTHER KEY EMPLOYEES' ANNUAL PERFORMANCE EVALUATIONS ARE CONDUCTED BY THE PRESIDENT & CEO AND THEIR APPROVED ANNUAL SALARY INCREASES ARE DOCUMENTED ON THEIR ANNUAL PERFORMANCE EVALUATION FORM.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AK,AL,AR,CA,CO,CT,DC,FL,GA,HI,IL,KS,KY,LA,MA,MD,ME,MI,MN,MS,NC,ND,NH,NJ,NM
NV,NY,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WI,WV

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

THE FOUNDATION MAKES ITS FINANCIAL STATEMENTS, FEDERAL FORM 990, AND ANNUAL REPORT AVAILABLE TO THE PUBLIC UPON REQUEST AND BY POSTING THEM ON ITS WEBSITE. ALL OTHER GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

FULFILLMENT SERVICES:

PROGRAM SERVICE EXPENSES	43,152.
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MANAGEMENT AND GENERAL EXPENSES	1,807.
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FUNDRAISING EXPENSES	429.
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TOTAL EXPENSES	45,388.
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PAYROLL SERVICES:

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PROGRAM SERVICE EXPENSES	14,656.
MANAGEMENT AND GENERAL EXPENSES	614.
FUNDRAISING EXPENSES	145.
TOTAL EXPENSES	15,415.

OTHER CONTRACTUAL SERVICES:

PROGRAM SERVICE EXPENSES	55,186.
MANAGEMENT AND GENERAL EXPENSES	2,311.
FUNDRAISING EXPENSES	549.
TOTAL EXPENSES	58,046.

CONSULTING:

PROGRAM SERVICE EXPENSES	1,707,059.
MANAGEMENT AND GENERAL EXPENSES	72,615.
FUNDRAISING EXPENSES	17,235.
TOTAL EXPENSES	1,796,909.

PUBLIC AND MEDIA RELATIONS:

PROGRAM SERVICE EXPENSES	19,870.
MANAGEMENT AND GENERAL EXPENSES	832.
FUNDRAISING EXPENSES	198.
TOTAL EXPENSES	20,900.

TEMPORARY SERVICES:

PROGRAM SERVICE EXPENSES	82,954.
MANAGEMENT AND GENERAL EXPENSES	24,253.
FUNDRAISING EXPENSES	6,347.
TOTAL EXPENSES	113,554.

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TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A

2,050,212.

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Notes:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)	X	
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part VII	Supplemental Information
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Provide additional information for responses to questions on Schedule R. See instructions.

[illegible]