Form	9	9	0
Departm	nent o	f the	Treasury

### **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.

**Open to Public** 

OMB No. 1545-0047

Inter	nal Reve	nue Servi	ice	Information	about Form 9	990 and its	instructions	s is at www.	irs.gov/f	orm990.		Ir	nspecti	on	
A F	or th	e 2020	0 caler	ndar year, or tax year begi	nning		, 2020	, and endi	ng			, 20	)		
<b>B</b> c	heck if ap	oplicable:		e of organization E AMERICAN BOARD OF		IV FOIM				D Employer i	dentifi	ication num	ber		
	Addre			g Business As	IADIOLOG	31 FOON.	DAIION			20-135	:137	З			
_	chang			ber and street (or P.O. box if mail is	not delivered to	street address	s)	Room/suite		20-1354373 E Telephone number					
	-	change		41 E. WILLIAMS CIRC			5)	100m/June		(520) 7					
	-	return		or town, state or province, country,		in nostal code				(320) /		2,500			
	Termi Amen		-	CSON, AZ 85711		in postal code				G Gross rece	inte ¢		379	,844.	
	return Applio	1 I		e and address of principal officer:	BDENT	J WAGNE	מא קי			H(a) Is this a gr		urn for	Yes	X No	
	pendi	ng		41 E. WILLIAMS CIRC						subordinate	es?		Yes	No	
	Tay_ay	empt sta		X 501(c)(3) 501(c) (		ert no.)		or E	27	H(b) Are all subo		st. (see instru	_		
		te: ►			) 🗨 (Ilise		4947(a)(1)	01 5		H(c) Group exe		•	,10110)		
		of organi		X Corporation Trust	Association	Other 🕨		I Vear		on: 2004 N	· ·		micile:	DC	
	art I	<u> </u>	nmary	••••••••••••••••••••••••••••••••••••••	Association	Ouler			orionnau			e or legal ut	micile.		
<b>- Г</b>				be the organization's mission c		ont optivition	. TO DEN	IONSTRA	1 <u>.</u>	JHANCE	AND				
đ	'			DUSLY IMPROVE ACCOU											
ance				IMAGING AND RADIAT											
erná	2			x ▶  if the organization o			e or dispose			of its not asso					
Activities & Governance				oting members of the governing		•	•				3			9.	
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	4	Numbe	er of in	dependent voting members of	the governing	body (Part \	/L line 1h)							9.	
ties				of individuals employed in cal							5			0.	
ivit				of volunteers (estimate if neces							6			9.	
Act	7a	Total	inrelate	ed business revenue from Part V	/III. column (C)	) line 12					7a			0	
				d business taxable income from							7b			0	
									<u>,</u>	Prior Year	1	Cur	rent Ye	ear	
	8	Contri	butions	and grants (Part VIII, line 1h)					, <u> </u>		0.			0	
nue	9	Progra	am serv	vice revenue (Part VIII, line 2g)				Y FOR			0.			0	
Revenue	10			ncome (Part VIII, column (A), lin			PUBLIC IN	SPECTION		30,4	56.		30	),452	
Ř	11			ie (Part VIII, column (A), lines 5					'		0.			0	
	12			e - add lines 8 through 11 (mus						30,4	56.		30	,452	
	13			imilar amounts paid (Part IX, col						149,7	67.		7	7,731	
	14			l to or for members (Part IX, colu							0.			0	
ŝ	15			other compensation, employee benefits (Part IX, column (A), lines 5-10)							0.			0	
Expenses	16a			fundraising fees (Part IX, colum							0		0		
xpe	b	Total f	undrais	sing expenses (Part IX, column (											
ш	17	Other	expens	ses (Part IX, column (A), lines 11	1a-11d, 11f-24	e)				6,9	903.		5	5 <b>,</b> 945	
	18	Total e	expense	penses. Add lines 13-17 (must equal Part IX, column (A), line 25)							570.			3,676	
	19			s expenses. Subtract line 18 fror						-126,2	14.		16	5 <b>,</b> 776	
s or ces										ning of Current			l of Yea		
Net Assets or Fund Balances	20	Total a	assets (	Part X, line 16)						1,636,5		1	,684	1,363	
tAs	21									14,4				0	
Pure	22	Net as	sets or	r fund balances. Subtract line 2	1 from line 20.		<u></u>			1,622,1	10.	1	,684	1,363	
Pa	art II	Sig	gnatur	e Block											
Un	der per	nalties o	f perjury	y, I declare that I have examined the e. Declaration of preparer (other tha	nis return, incluc	ding accompand	anying schedu	les and state	ements, ar as any kn	nd to the best	of my	knowledge	and be	elief, it is	
	.,							on proparor n	ue ung nu						
Sig	ın		0:	re of officer						Data					
He			Signatu	re of officer						Date					
				print name and title											
					Dura conde si co			Data			<del></del>	DTIN			
Paid	ł			eparer's name	Preparer's sign		00.	Date	15/202			PTIN	0 6 0 1		
	- parer	-	VETTE		Cland	the Vene	lli	11/	15/202		-	P0074			
	Only	Firm's		▶ BKD, LLP	$\mathcal{Q}$					Firm's EIN 🕨		-016020			
N 4 -	/ +la = 11			▶ 14241 DALLAS PARKWAY, S						Phone no.	9/2	2-702-8			
				is return with the preparer show							<u> </u>		es		
ror	Paper	rworkl	Reduct	tion Act Notice, see the separa	te instructions	ō.						For	m ສອເ	<b>)</b> (2020)	

For Paperwork Reduction Act Notice, see the separate instructions.

THE	AMERICAN	BOARD	OF	RADIOLOGY	FOUNDATION

20-1354373

For	m 990 (2020	))			Page <b>2</b>
Pa		Statement of Program Service			
4				art III	X
	-	escribe the organization's mission	N HE SCIENTIFIC, EDUCATION	AT. AND	
			SSION OF THE AMERICAN BO		
2	Did the (	organization undertake any signi	ficant program services during the	year which were not listed on the	
					Yes X No
	If "Yes," o	describe these new services on S	chedule O.		
3			, or make significant changes in		
					X Yes No
		lescribe these changes on Sche		f it. there have a feature to be a set of the set of th	
4				f its three largest program services eport the amount of grants and allo	
			r each program service reported.	eport the amount of grants and and	
12	(Code:	) (Evnenses \$	o 110 including grants of \$	7,731. ) (Revenue \$	)
			EDUCATION, EXAMINATION A		/
			DIOLOGY, CONDUCT SYMPOSI		
		TO PUBLICIZE RESEARCH			
4b	(Code: _	) (Expenses \$	including grants of \$	) (Revenue \$	)
4c	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$	)
	(0000	) (Expenses +		)(noverade \$	/
4d	-	ogram services (Describe on Sch	-		
	(Expense			nue \$ )	
	Total pro	gram service expenses 🕨	9,119.		
JSA 0E1	020 1.000				Form <b>990</b> (2020)
	6693	NQ B47D 8/17/2021 9:	49:1/ AM V 20-6.3F	138-1176611-1176296	PAGE 4

THE AMERICAN BOARD OF RADIOLOGY FOUNDATION

1	90 (2020)		F	Page 3
Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Х	
2	complete Schedule A	1 2	Λ	X
2 3	Did the organization required to complete Schedule B, Schedule of Contributors See Instructions?			
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	5		
-	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues,	-		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			v
40	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
ŭ	complete Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			3.7
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-		x
h	Schedule D, Parts XI and XII. Was the organization included in consolidated, independent audited financial statements for the tax year? If	12a		
D	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	120	21	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			17
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			v
20 -	If "Yes," complete Schedule G, Part III	19 202		XX
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
	domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Х	
16.4				

Two         No.           22         Dd the organization report more than \$5,000 of grants or other assistance to or for domestic individual on Part X, column (A), line 27 H "Yes," complete Schedule /, Parts i and H.         22         X           23         Dd the organization areaver "Yes" to Part VI. Section A. Inte 3, 4, or 5 about componsation of 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 H "Yes" answer lines 24b through 24d and complexes Schedule A.         23           24a         Did the organization maintain an escore account other than a refunding principal amount of more than to to defause any trace-sempt bonds.         24d         25         25d         25d         25d         25d         25d         25d         25d         25d         26d         2d         2dd		90 (2020)		P	age <b>4</b>
22       Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on PartiX, column (A), line 27 if Yes," complete Schedule I, Part VI, Section A, line 3, 4, or 5 about compensation of the organization's current and former officent, directors, invalues, key employee, and highest compensation 23 × 24 Did the organization have as tax-exampl bond issue with an outstanding principal amount of more than \$100,000 or 16 heat at you be assessed after Docember 31, 2007 If Yes," complete Schedule J, and Yu, and Status and Yu, and	Part	V Checklist of Required Schedules (continued)		Vac	No
Part IX, column (A), line 27 If Yes, 'complete Schedule, I, Parts I and III,	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Tes	NO
23       Did the organization answer "Ves" to Part VII. Section A. line 3. 4, or 5 about compensation of the organization former officer, director, trustes, key employees, and highest compensation and employees? If "Ves" complete Schedule J.       23       X         24       Did the organization haves and 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 "Ves" carser (ines 24e through 24 and complete Schedule J. And "of the time 3 and the morany period exception".       24a         2       Did the organization maintain an escrow account other than a refunding escrow at any time during the year?       24a         2       Did the organization maintain an escrow account other than a refunding escrow at any time during the year?       24d         2       Section 501(c)(3), 601(c)(4), and 501(c)(2) organizations. Did the organization regage in an excess benefit transaction with a disqualified person that it engaged in an excess benefit transaction with a disqualified person that it engaged in an excess benefit transaction with a disqualified person they of the organization proved at any times during the year?       24d         25       Did the organization proved tary at massitume to an organization proved at any time during the year?       24e       ×         26       Did the organization proved as grant or they reployee, creator or founder, assistantic to antivotary or they organization proved as grant or they reployee.       22a       ×         27       Did the organization provide astry (including an employee) thereof) or substantial con	~~		22		Х
acquitization's current and former officers, trustees, key employees, and highest compensate 2       X         24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more tithan 3100,000 as of the last dyot (H vex), that was issued after December 31, 2002 H*Vst* answer fines 24b through 24d and complete Schedule K H*No* go to line 25a.       Z4a         b Did the organization maintain an escrow account other than a refunding escrow at any time during the year?       Z4a       Z4a         c Did the organization excess an 'On behalt O' issuer for bonds buydta a temporary pericel asception?       Z4a       Z4a         25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Dub the organization engage in an excess benefit transactions with a disqualified person in a pictor year, and that the transaction has not been terported on any or the organization's prior Forms 500 or 900-227       Z4b         25a Did the organization organization reported nany or the organization's prior Forms 500 or 900-227       Z4b       X         25 Did the organization reported nany these complove thereof, agrant selection committee member, or to a 25% controlled ontity of mile these persons? If "Yes," complete Schedule L, Part I.       Z5a       X         27 Did the organization reported many these persons? If "Yes," complete Schedule L, Part I.       Z5a       X         28 Was the organization reported second thy these persons? If "Yes," complete Schedule L, Part I.	23				
24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day that was issued fathe Docember 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No." go to line 25s.       24a       X         24 Did the organization maintain an escrow account other than a refunding escrow at any time during the year?       24c       24d         25 Did the organization act as an "on behalf of" issue for bonds outstanding at any time during the year?       24d       24d         25 Section 601 (c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in an proof any any of the organization proof base proof of the organization proof any any anount on Part X. Line 5 or 22, for feeekable L. Part I.       28d       X         25 Did the organization reports any any out on Part X. Line 5 or 22, for feeekable L. Part I.       28d       X         26 Did the organization provide a grant or other assistance to any current or former officer, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of anilly member of any of these persons." If "Ass", complete Schedule L, Part I.       28d       X         27 Did the organization provide a grant or other assistance to any current or former officer, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of anilly member of any of these persons." If "Ass", complete Schedule L, Part I.       27d       X         28 Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part					
\$100.000 as of the last day of the year, that was issued after Decomber 31, 2002? If "Yes" enswer lines 240       X         b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       24a       X         c Did the organization maintain an escrow account other than a refunding escrow at any time during the year?       24a       X         d Did the organization act as an "obbahl of" issuer for bonds outstanding at any time during the year?       24a       X         d Did the organization act as an "obbahl of" issuer for bonds outstanding at any time during the year?       24a       X         d Did the organization act as an "obbahl of" issuer for bonds outstanding at any time during the year?       24a       X         d Did the organization act as an "obbahl of" issuer for bonds outstanding at any time during the year?       24a       X         d Did the organization avera the lit lengaged in an excess benefit transaction with a disqualified person in a prory year, and that the transaction has not been reported on any of the organization avera the lit lengaged to any current or former officer, director, trustes, 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.       25       X         27       Did the organization avera the substants and on yournet or former officer, director, trustes, key employee, creator or founder, substantial contributors, and yourpets is a substantial contributors?       27       X         28       A c		employees? If "Yes," complete Schedule J.	23	Х	
through 24d and complete Schedule // If No.* go to line 25a.       24a       24b         b Did the organization maintain an escrow account other than a refunding escrow at any time during the year?       24d         c Did the organization maintain an escrow account other than a refunding escrow at any time during the year?       24d         25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization ended person during the year?       24d         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 in an prory year, and that the transaction has not been reported on any of the organization spore 50m 590 or 990-E27       25b         2 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 35% controlled entity controlled entity (Including an employee thereof, a grant selection committee member, or to a 33% controlled entity (Including an employee thereof, a grant selection committee member, or to a 33% controlled entity (Including an employee thereof, a grant selection committee member, or to a 33% controlled entity (Including an employee thereof) or family member of any of the seganization selectibe. Jean IV.       27       X         28 Was the organization receive contributions of the sessions.       27       X       28b       X         27 U Did the organization startibe keys (Phypeys, conditions, and exceptions):       27       X         29 U Ti Viss. "complete Schedule L, Part II       28b       X	24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
b Did the organization mixed any proceeds of tax-exempt bonds beyond a temporary period exception?.       240         c Did the organization antian an escrow account other than a refunding scrow at any time during the year?.       244         258 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization anguai in an excess benchmark that the nagadizations. Did the organization anguai in a mixed schedule L, Part 1.       256         258 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization and schedule L, Part 1.       256         250 Did the organization anguai that it engaged in an excess benchmark that a disqualified person in a prior year, and that the transaction has not been reported on any of the organization of worth and yourcent or former officer, director, trustes, key employee, creator or founder, substantial contributor, or 35%, controlled entity or famity member of any of these persons? If Yes, "complete Schedule L, Part II.       26         270 Did the organization approximation provide a grant or other assistance to any current or former officer, director, trustes, key employee, creator or founder, substantial contributor, or 35%, controlled entity (including an employee thereal) or famity member of any of these persons? If Yes, "complete Schedule L, Part II.         280 Was the organization approximation approximation or more individual accortinations, and exceptions);       A current or former officer, director, trustes, key employee, creator or founder, or substantial contributor? If Yes," complete Schedule L, Part II.         280 Did the organization approximation approximation approximations and exceptions);       A current or officer, director, trustee, key employee, crea					
c       Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exemptodes.       24d         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?       25a         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 in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 902-72       26b       X         25       Did the organization provide a grant or other assittance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes".complete Schedule L, Part II.       26       X         27       Was the organization reported on any anount on Part X, line S 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 (including an employee thereof) or family member of any of these persons? If "Yes".complete Schedule L, Part II.       27       X         28       Was the organization power of any of these schedule L, Part II.       28a       X         29       Did the organization power of any dividual described in line 28a? If "Yes".complete Schedule L, Part II.       28a       X         29       Did the organization recelve more than \$25,000 in n					X
bit defease any tax-exempt bonds?,       24d         d Dit dre organization at as m`on behalf of lisuer for bonds outstanding at any time during the year?.       24d         25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization angage in an excess benefit transaction with a disqualified person during the year? If "Yes." complete Schedule L, Part I.       25a         25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 900 or 900-E27       25b         25D Id the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction near of the erganization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction near to Part N.       25b       ×         26       Did the organization aware that it engaged in an excess benefit transaction with a final contributor, or 35%, controlled entity of family member of any of these persons? If 'Yes." complete Schedule L, Part I.       26       ×         27       Did the organization aware that set persons? If 'Yes." complete Schedule L, Part I.       27       ×         28       Was the organization aware or four derivers transaction with one of the following parties (see Schedule L, Part I).       28       ×         29       Main truthershols, conditions, and exceptions?       A current or former officer, director, trustee, key employee, creator or founder, substantial contr			24b		
d Did the organization act as an "on behalf of issuer for bords outstanding at any time during the year?.       244         253 Section 501(c)(3, 501(c)(4), and 501(c)(29) organizations. Did the organization approximation approximateximatio approximation approximation approximation app	С				
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 lin a prior year, and that the transaction has not been reported on any of the organization's prior Forms 930 or 980-E27       25a       x         25a Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, circlect, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or farmity member of any of these persons? If "%s", complete Schedule L, Part II.       26       X         27 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 farmity member of any of these persons? If "%s", complete Schedule L, Part II.       26       X         28 Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part II.       27       X         28 Was the organization reported the organizations ad excerptions;       a Acurrent or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "%s", complete Schedule L, Part IV.       28b       X         29 Did the organization repeive than \$25,000 In non-cash contributions? If "%s", complete Schedule M.       20       X         29 Did the organization releve more than \$25,000 In non-cash contributions? If "%s", complete Schedule M.       30       X         30 Did the organization negave endve contributions of art, hi					
transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.       25a       X         b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a priv year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.       25b       X         25 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) or family member of any of these persons? If "Yes," complete Schedule L, Part II.       26       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) or family member of any of these persons? If "Yes," complete Schedule L, Part II.       27       X         28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):       27       X         28 A surfact or founder, director, trustee, key employee, creator or substantial contributor? If "%s," complete Schedule L, Part IV.       28       X         29 Did the organization receive more than \$25.000 in non-cash contributions? If "Yes," complete Schedule N, Part I.       28       X         30 Did the organization oneible schedule A       71       30       X       31       X         31 Did the organi			240		
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-E27       25         11" Yes," complete Schedule L, Part I.       26.5         27       Did the organization report any amount on Part X, line S or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes," complete Schedule L, Part II.       26       X         27       Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part II).       27       X         28       Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV).       28       28       X         29       Did the organization receive contributions or and exceptions):       a current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes," complete Schedule L, Part IV.       28       28       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes," complete Schedule N, Part I       30       X         30       Did the organization flow of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-39. If 'Yes," complete Schedule R, Part I.       30       X       31       X <tr< td=""><td>20 a</td><td></td><td>252</td><td></td><td>х</td></tr<>	20 a		252		х
year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27     25     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 of miny member of any of these persons? If 'Yes, 'complete Schedule L, Part II.     26     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 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes, 'complete Schedule L, Part III.     26     X       28     Was the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part III.     27     X       29     Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV.     28a     X       29     Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule N, Part I     30     X       30     Did the organization neceive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule R, Part I     33     X       31     Did the organization on 100% of an entity disregarded as separate from the organization wi	h		23a		
If "Yes," complete Schedule L, Part I.       265       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,,, 26       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 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II,,, 27       27       X         28       Was the organization papticable filling thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV,, 28       28       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II       29       X         30       Did the organization receive contributions of an thistorical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part II       31       X         31       Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule N, Part II,,,,,,,,					
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.       26       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.       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV.       28       X         29       Nat the organization one individual described in line 22a? If "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M, Part I       29a       X         30       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets, or qualified conservation contributions? If "Yes," complete Schedule R, Part I,			25b		Х
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II.       26       X         27       Did the organization provide a grant or other assistance to any current or former officer, director, truste, key employee, creator or founder, substantial contributor or employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II.       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part II.       28       X         28       Was the organization or officer, director, trustee, key employee, creator or founder, or substantial contributor? II "Yes," complete Schedule L, Part IV.       28a       X         29       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? II "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive more than \$25,000 in non-cash contributions? II "Yes," complete Schedule M.       29       X         30       Did the organization receive more than \$25,000 in non-cash contributions? II "Yes," complete Schedule M.       30       X         31       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? II "Yes," complete Schedule M.       31       X         32       Did the organization have a controlled entity within the meaning of section \$12(b)(13)?       32       X         33       Did the organizati	26				
27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III       27       X         28       Was the organization a party to a business transaction with one of the following parties (see 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       28a       X         28       b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets. or qualified conservation contributions? If "Yes," complete Schedule M, Part II.       30       X         31       Did the organization receive contributions of an entity disregarded as separate from the organization under Regulations sections 501.770:1-23.71 ("Yes," complete Schedule R, Part I, III, III, Organization new endor so 112(b)(13)? If "Yes," complete Schedule R, Part I, III, III, III, IIII, IIII, IIIIIIII		or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV.       28       X         29       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "yes," complete Schedule L, Part IV.       28       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "yes," complete Schedule M.       29       X         30       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part I.       31       X         31       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part II.       33       X         34       Was the organization sell ex controlled entity within the meaning of section 512(b)(13)?       35a       X         35a       Did the organization nove tondy within the meaning of section 512(b)(13)?       35a       X         35a       Did the organization sell exchange dispose of its autisens transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       X         35a       Did the organization sell exchange		controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
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.       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filling thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       Z8a       X         c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV.       Z8b       X         29       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions of art, historical treasures, or other similar assets, or qualified conservation contributions of art, historical treasures, or other similar assets, or qualified conservation sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       X         31       Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule N, Part II, III, or IV, and Part V, line 1.       33       X         33       Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part V, line 2.       35a       X         34       Was the organization. Roduc entity within the meaning of section 512(b)(13)?       35a       X         35a       Did the o	27				
persons? If "Yes," complete Schedule L, Part IV       27       X         28       Was the organization a party to a business transaction with one of the following parties (see 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.       28a       X         28. b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N       29       X         31       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I       30       X         32       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I       30       X         33       Did the organization iseli, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"       31       X         34       Was the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       X<					
28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions): <ul> <li>A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.</li> <li>A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.</li> <li>A 36% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV.</li> <li>Did the organization receive contributions of ant, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.</li> <li>Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"</li> <li>Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"</li> <li>Did the organization nealty of an entity disregarded as separate from the organization under Regulations sections 301.7701-37 If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1.</li> <li>Did the organization nealed to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1.</li> <li>So the organization conduct more than 35% of its activities through an entity that ins a exempt non-charitable related organization. Complete Schedule R, Part I, III, or IV, and Part V, line 1.</li> <li>So 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 purpose? If "Yes," complete Schedule R, Part I V, line 2.</li> <li>So the organization comple</li></ul>					37
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 V			27		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If       28a       X         b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28b       X         c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If       "Yes," complete Schedule L, Part IV.       28c       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.       29       X         30       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.       30       X         31       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N. Part II.       30       X         32       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N. Part II.       30       X         33       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part II.       31       X         34       Was the organization nown 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R. Part I.       33       X         35a       Did the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       X </td <td>28</td> <td></td> <td></td> <td></td> <td></td>	28				
"Yes," complete Schedule L, Part IV       28a       ×         b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28b       ×         c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV.       28c       ×         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.       29       ×         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N. Part I.       30       ×         31       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part II,	2				
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28b       ×         c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV.       28c       ×         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       ×         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       ×         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I.       31       ×         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.       33       ×         34       Was the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       ×         35a       Did the organizations. Did the organization make any transfers to an exempt non-charitable       36       ×         35b       Did the organizations. Did the organization make any transfers to an exempt non-charitable       36       ×         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable       36       ×	a		28a		Х
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV. 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 30 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 Did the organization netation sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 X 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1. 34 X 35a Did the organization nealed to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1. 35a Z 35b Ji the organization nealed to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part V, line 2. 35b Ji the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2. 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V, line 2. 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. 38 X  Part V Statements Regarding Other IRS Filings and Tax Compliable	b				
"Yes," complete Schedule L, Part IV.       28c       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N.       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1.       34       X         33       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1.       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.       35b       35c         37       Did the organization complete Schedule R, Part V, line 2.       35c					
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       X         31       Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       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.       32       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.       33       X         34       Was the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         35a       Did the organization. Note than 5% of its activities through an entity that is not a related organization.       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization complete Schedule R, Part V, line 2       37       X         35       Did the organization complete Schedule R, Part V, line 2       37       X       37       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization complete Schedule R, Part V, line 2       37       X         37       Did the organization com			28c		Х
conservation contributions? If "Yes," complete Schedule M       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net asset? If "Yes,"       32       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.       33       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       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2       36       X         37       Did the organization complete Schedule R, Part V, line 2       36       X       37         38       Did the organization complete Schedule R, Part V, line 2       36       X       37         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule O.       37       36       X <t< td=""><td>29</td><td>Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M</td><td>29</td><td></td><td>Х</td></t<>	29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       32       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       33       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       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 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, line 2       36       X         37       Did the organization complete Schedule O.       T       38       X         38       Did the organization complete Schedule R. Part V, line 2       37       37       X         36       Exection 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization complete Schedule Q. Part VI, line 1       37 <td>30</td> <td>-</td> <td></td> <td></td> <td></td>	30	-			
32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.       32       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.       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II.       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.       35b         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule C and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule C.       38       X         39       Vatements Regarding Other IRS Filings and Tax Compliance       14       1       1         38       X       12       16       1       1       1			30		
complete Schedule N, Part II.       32       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.       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II. III.       34       X         35a       Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II. III.       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization complete Schedule R, Part V, line 2       35b       36         37       Did the organization complete Schedule R, Part V, line 2       37       37       X         38       Did the organization complete Schedule Q and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.       38       X         9       Part V       Statements Regarding Other IRS Filings and Tax Compliance       38       X         19       Note: All Form 990 filers are required to complete Schedule O.       14       1       1         19       Enter the number reported in Box 3 of Form 1096. Ent			31		
33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.       33       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.       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         35b       Did the organization.       A       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       36a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 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, line 2       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V       1a       1       1         b       Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .       1       1	32				v
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	22		32		
<ul> <li>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</li></ul>	33		33		Х
or IV, and Part V, line 1.       34       X         35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 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.       36       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V       Yes       No         1a       Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .       1a       1       1       1         15       O       O       O       O       0       0       0       0         1a       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .       1a       1       1       0       0       0       0<	34				
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a X         b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.       35b         36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 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       36       X         37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.       37       X         38 X       X       Yes       Yes       No         1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			34	Х	
controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35 a		35a		X
36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.       36       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       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.       38       X         Yest Statements Regarding Other IRS Filings and Tax Compliance         Check if Schedule O contains a response or note to any line in this Part V       1a       1         b Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable       1a       1       1         b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1a       1       1       1         c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       Form 990 (2020)	b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
related organization? If "Yes," complete Schedule R, Part V, line 2			35b		
<ul> <li>37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i></li></ul>	36				
and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable In the number of Forms W-2G included in line 1a. Enter -0- if not applicable In the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			36		X
38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V       Yes       No         1a       1       1       1       1       1       1         b       Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable       1a       1       1       0       1         b       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1       1       0       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1	37				3.7
19? Note: All Form 990 filers are required to complete Schedule O.       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V       Image: Check if Schedule O contains a response or note to any line in this Part V         1a       1       1       Image: Check if Schedule O contains a response or note to any line in this Part V       Yes       No         1a       1a       1       1       Image: Check if Schedule O contains a response or note to any line in this Part V       Yes       No         1a       Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable       Image: Check III       Image: Check IIII       Image: Check IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII			37		
Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V       Yes       No         1a       Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable       1a       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1	38		20	v	
Check if Schedule O contains a response or note to any line in this Part V         Yes No         1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable       1a       1         b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1a       0       0         c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       1c	Dart		38	Δ	
Yes       No         1a       1         b       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       1c	rari				
1a       1         b       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1a       1         b       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1b       0.         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       1c			•••		No
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?					
JSA 0E1030 1.000 Form <b>990</b> (2020)					
0E1030 1.000 Form 350 (2020)					
			Form		

Form 990 (2020)

Page 5

Par	t 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 0.			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?.	4a		Х
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		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	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			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
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		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			1
	sponsoring organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.	0-		1
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
a	Initiation fees and capital contributions included on Part VIII, line 12			
D	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
D	against amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans 13b			
с	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	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?	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			

Form **990** (2020)

Form	aan	(2020)
FOIIII	990	(2020)

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 instruction	ons.
	Check if Schedule O contains a response or note to any line in this Part VI	Х
Section A	Governing Body and Management	

Sect	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
b	committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
2	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
5	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
	Did the organization make any significant changes to its governing documents since the prorision was med?	5		X
5		6	X	
6 7-	Did the organization have members or stockholders?	-		<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	7a	Х	
	one or more members of the governing body?	7 a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7b		Х
-	stockholders, or persons other than the governing body?	70		21
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:	0.0	Х	
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Λ	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			v
0 4	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.	9		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Coae	.) Yes	No
			res	
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	57	<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .	11a	Х	
b			57	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Х	<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	X	<u> </u>
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in 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?	16a		Х
b				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Sect	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	16b		
	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? ion C. Disclosure	16b		
17	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?		tion 5	601(c)
<u>Sect</u> 17 18	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? ion C. Disclosure		tion 5	501(c)

**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 ► BRENT J WAGNER, MD 5441 E. WILLIAMS CIRCLE TUCSON, AZ 85711 520-790-2900

Part VII	Compensation Independent Co			Directors,	Trustees,	Key	Employees,	Highest	Compensate	d Emj	oloyees,	and
	Check if Schedule O contains a response or note to any line in this Part VII											
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees												
1a Comple	ete this table for	all i	persons red	quired to be	listed. Rep	ort co	mpensation fo	r the cale	ndar year endi	ng with	or withi	n the

organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of

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

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, 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 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 dotted line)	box,	unles	Pos heck ss pe	rson	e than o is both or/trust Highest compensated	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
			e			ated				
(1)VALERIE P JACKSON, MD EXECUTIVE DIRECTOR END:07/2020	1.00			X				0.	596,086.	38,851.
(2) BRENT J WAGNER, MD	1.00									
EXECUTIVE DIRECTOR BEG:07/2020	50.00			Х				0.	305,842.	4,633.
(3) KELLY CRANDALL	1.00			3.7				0	100 000	10.020
FINANCE DIRECTOR BEG: 07/2020	50.00			Х				0.	120,292.	19,039.
(4) MARK HOOVER FINANCE DIRECTOR END: 02/2020	1.00			Х				0.	38,065.	1,171.
(5) VINCENT P MATHEWS, MD	.25							0.		±, ±/±.
PRESIDENT BEG: 06/2020	10.00	Х		х				0.	0.	0.
(6) ROBERT M BARR, MD	.25			- 23			<u> </u>	0.		·
PRESIDENT ELECT	3.00	X		Х				0.	0.	0.
(7) JOHN A KAUFMAN, MD	.25									·
SECRETARY/TREASURER	3.00	Х		Х				0.	0.	0.
(8) DONALD J FLEMMING, MD	.25									
CHAIR OF TRUSTEES	3.00	Х						0.	0.	0.
(9) CHERI L CANON, MD	.25									
GOVERNOR	3.00	X						0.	0.	0.
(10) J ANTHONY SEIBERT, PHD	.25									
GOVERNOR	3.00	Х						0.	0.	0.
(11) KALED M ALEKTIAR, MD	.25									
GOVERNOR	3.00	Х						0.	0.	0.
(12) TOBY A GORDON, SCD	.25									
GOVERNOR	3.00	Х						0.	0.	0.
(13) MARY S NEWELL, MD	.25									
GOVERNOR BEG: 10/2020	3.00	Х						0.	0.	0.
(14)										

Form **990** (2020)

Form 990 (2020)

Page **8** 

Ра	rt VII	Section A. Officers, Directors, Tr	ustees, Ke	y En	nplo	bye	es,	and H	ligl	hest Compensat	ed Employe	es (co	ntinued	1)
		( <b>A</b> ) Name and title	(B) Average hours per week (list any hours for	box,	unle er an	Pos heck ss pe d a c	erson direct	e than o is both or/trust	an ee)	<b>(D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation related organization	from	Esti amo o	( <b>F)</b> mated ount of ther ensation
			related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-M		orga and	n the nization related nizations
				_										
				-										
	Sub-to Total f	tal rom continuation sheets to Part VII, S	ection A		•••	•••	•••			0.	1,060,2	0.		63,694.
		add lines 1b and 1c)								0.	1,060,2	85.		63,694.
		ble compensation from the organizatio		0		u a		5) WIIC			\$100,000 OI			
3		e organization list any <b>former</b> offic												Yes No
4	For an	ee on line 1a? If "Yes," complete Sched y individual listed on line 1a, is the	sum of rep	oortab	ole d	com	per	satior	n ar	nd other compens	sation from tl	he	3	A
_	individ	ation and related organizations gr ual				• •	• •		• •				4	X
	for ser	y person listed on line 1a receive or vices rendered to the organization? If "Y											5	X
	Compl	Independent Contractors ete this table for your five highest com nsation from the organization. Report of												
		(A) Name and business add	dress							<b>(B)</b> Description of se	rvices	Co	<b>(C)</b> ompensa	ation
2		umber of independent contractors (in the second sec				nite		thos	e li	isted above) who	received			
JSA	55 1 000		324					-					Form S	<b>90</b> (2020)

#### Form 990 (2020)

Pa	rt VII					<u>_</u>
		Check if Schedule O contains a response or no	(A) Total revenue	/III (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	1a b c d e f	Federated campaigns1aMembership dues1bFundraising events1cRelated organizations1dGovernment grants (contributions)1eAll other contributions, gifts, grants, and similar amounts not included above1fNoncash contributions included in lines 1a-1f1g \$				
ອັບັ	h	Total. Add lines 1a-1f	▶ 0. ss Code			
Program Service Revenue	2a b c d					
Pro	e f	All other program service revenue				
	g 3	Total. Add lines 2a-2f Investment income (including dividends, interest, other similar amounts).	and			17,560.
	4 5	Income from investment of tax-exempt bond proceed Royalties	s • 0.			
	6a b c	Gross rents     6a       Less: rental expenses     6b       Rental income or (loss)     6c				
	d 7a	Net rental income or (loss)       (i) Securities         Gross amount from sales of assets other than inventory       7a	Dther 0.			
evenue	b	Less: cost or other basis and sales expenses     7b     349,392.       Gain or (loss)     7c     12,892.				
Other Rev	d	Net gain or (loss)	12,892.			12,892
Oth	8a	Gross income from fundraising events (not including \$	0.			
	b c	Net income or (loss) from fundraising events				
	9a	Gross income from gaming activities. See Part IV, line 19 9a	0.			
	b c	Less: direct expenses 9b Net income or (loss) from gaming activities.	0. ▶ 0.			
	10a	Gross sales of inventory, less returns and allowances	0.			
S	b C	Net income or (loss) from sales of inventory				
Miscellaneous Revenue	11a b					
isce Re	c d	All other revenue				
Σ		Total. Add lines 11a-11d				
16.4	12	Total revenue. See instructions	> 30,452.			30,452.
JSA	4 4 000					Form 990 (2020

PAGE 11

Section 501(c)(3) and 501(c)(4) organizations must			· · · · · · · · · · · · · · · · · · ·	
Check if Schedule O contains a respo				
Do not include amounts reported on lines 6b, 7b, Bb, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1 Grants and other assistance to domestic organizations				
and domestic governments. See Part IV, line 21	7,731.	7,731.		
<b>2</b> Grants and other assistance to domestic				
individuals. See Part IV, line 22	0.			
<b>3</b> Grants and other assistance to foreign				
organizations, foreign governments, and				
foreign individuals. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors,				
trustees, and key employees	0.			
6 Compensation not included above to disqualified				
persons (as defined under section $4958(f)(1)$ ) and	0.			
persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	U .			
8 Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)	0.			
9 Other employee benefits	0.			
<b>0</b> Payroll taxes	0.			
1 Fees for services (nonemployees):				
a Management	0.			
b Legal	0.			
c Accounting	3,940.		3,940.	
d Lobbying	0.			
e Professional fundraising services. See Part IV, line 17	0.			
	0.			
f Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column	0.			
(A) amount, list line 11g expenses on Schedule O.)	0.			
2 Advertising and promotion	617.		617.	
13 Office expenses			. 110	
14 Information technology	0.			
I5 Royalties	0.			
I6 Occupancy	0.			
7 Travel	1,388.	1,388.		
8 Payments of travel or entertainment expenses				
for any federal, state, or local public officials	0.			
9 Conferences, conventions, and meetings	0.			
20 Interest	0.			
Payments to affiliates	0.			
2 Depreciation, depletion, and amortization	0.			
	0.			
4 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				
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	13,676.	9,119.	4,557.	
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 $\blacktriangleright$ if				
following SOD 09 2 (ASC 059 720)				

0.

JSA 0E1052 1.000

following SOP 98-2 (ASC 958-720)

Form **990** (2020)

Form 990 (2020)

Page	1	1
i ago		

	Check if Schedule O contains a response or note to any line in this Pa	art X	<u></u>	<u> </u>
		<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	Cash - non-interest-bearing	43,228.	1	15,143.
2	Savings and temporary cash investments.	337,974.	2	721,864.
3	Pledges and grants receivable, net	0.	3	0.
4	Accounts receivable, net.	3,284.	4	1,846.
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	0.	5	0
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)	0.	6	0.
<u>ආ</u> 7	Notes and loans receivable, net	0.	7	0
Assets	Inventories for sale or use	0.	8	0.
∛  9	Prepaid expenses and deferred charges	0.	9	0
10	a Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a			
	b Less: accumulated depreciation	0.	10c	0.
11	Investments - publicly traded securities	1,252,033.		945,510.
12	Investments - other securities. See Part IV, line 11	0.	12	0.
13	Investments - program-related. See Part IV, line 11	0.	13	0.
14	Intangible assets	0.	14	0.
15	Other assets. See Part IV, line 11	0.	15	0 .
16	Total assets. Add lines 1 through 15 (must equal line 33)	1,636,519.	-	1,684,363.
17	Accounts payable and accrued expenses	14,409.	17	0.
18	Grants payable	0.	18	0 .
19	Deferred revenue	0.		0
20	Tax-exempt bond liabilities	0.	20	0
21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0.		0
	Loans and other payables to any current or former officer, director,			
litie	trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities	controlled entity or family member of any of these persons	0.	22	0.
<sub>23</sub> ا	Secured mortgages and notes payable to unrelated third parties	0.	23	0.
24	Unsecured notes and loans payable to unrelated third parties	0.		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	0.	25	0.
26	Total liabilities. Add lines 17 through 25	14,409.	26	0.
ces	Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.			
1 27	Net assets without donor restrictions	1,622,110.	27	1,684,363.
m <sup>28</sup>	Net assets with donor restrictions	0.	28	0.
Net Assets or Fund Balances 5 5 6 5 6 5 6 5 6 5 6 5 6 5 6 5 6 5 6 5	Organizations that do not follow FASB ASC 958, check here ► and complete lines 29 through 33.			
ັ <sub>29</sub>	Capital stock or trust principal, or current funds		29	
s 20	Paid-in or capital surplus, or land, building, or equipment fund		30	
SS 31	Retained earnings, endowment, accumulated income, or other funds		31	
マロン 11 32	Total net assets or fund balances	1,622,110.	32	1,684,363.
ž 33	Total liabilities and net assets/fund balances	1,636,519.	33	1,684,363.
		-,000,010.	55	Form <b>990</b> (2020

JSA

THE AMERICAN BOARD OF RADIOLOGY FOUNDATION

Form 99	0 (2020)				Pa	ge <b>12</b>
Part 2	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1			30,4	152.
2	Total expenses (must equal Part IX, column (A), line 25)	2			13,6	576.
3	Revenue less expenses. Subtract line 2 from line 1	3			16,7	776.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4				10.
5	Net unrealized gains (losses) on investments	5			45,4	175.
6	Donated services and use of facilities	6				0.
7	Investment expenses	7				0.
8	Prior period adjustments	8				2.
9	Other changes in net assets or fund balances (explain on Schedule O).	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10		1,6	84,3	363.
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," ex	kplair	n in			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled	lor			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit					
	separate basis, consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	rsiah	tof			
	the audit, review, or compilation of its financial statements and selection of an independent accounta	-		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, ex					
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in	the			
	Single Audit Act and OMB Circular A-133?			3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	ergo	the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au	•		3b		

Form **990** (2020)

SCHE	DU	LE	Α
(Form	990	or	990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 2

		nt of the Treasury evenue Service	1	Go to www.irs.gov	//Form990 for instructio	ons and t	he latest i	nformation.	Inspection			
Nam	e of t	he organization	•					Employer identif	ication number			
THE	e Al	MERICAN BO	ARD OF RAI	DIOLOGY FOUND	ATION			20-13543	73			
Ра	rt I	Reason for	r Public Cha	rity Status. (All o	organizations must o	complet	te this p	art.) See instruction	S.			
The	org	anization is not	a private fou	ndation because it	is: (For lines 1 throug	gh 12, ch	eck only	one box.)				
1		A church, con	vention of chu	urches, or associat	tion of churches desci	ibed in <b>s</b>	ection 1	70(b)(1)(A)(i).				
2		A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E (Form 990 or 990-EZ).)										
3		-	-	-	rganization described							
4			-		conjunction with a hos	spital de	scribed ir	n section 170(b)(1)(A)	(iii). Enter the			
		hospital's nam										
5		-	-		a college or universit	y owneo	d or ope	rated by a governme	ental unit described in			
				complete Part II.)								
6					nmental unit describe							
7		-		-		pport fro	om a go	vernmental unit or tro	om the general public			
0		1	• • •	(1)(A)(vi). (Complete displayed in a section 170/h	,	Dort II.)						
8 9		-			)(1)(A)(vi). (Complete ed in section 170(b)(1			in conjunction with a	land grant college			
5		-	-	-	riculture (see instruct		-	-				
		university:		grant conege of ag		юпэ). с		name, ony, and state o	The conege of			
10 11		An organization receipts from support from acquired by the	activities rela gross investm ne organizatio	ted to its exempt f lent income and u n after June 30, 19	re than 331/3 % of its unctions, subject to c nrelated business tax 975. See <b>section 509</b> usively to test for publi	ertain ex able inco ( <b>a)(2).</b> (0	ceptions ome (less Complete	s; and (2) no more that s section 511 tax) from Part III.)	n 331/3 % of its			
12	Х	An organizatio	on organized a	and operated exclu	sively for the benefit	of, to pe	erform th	e functions of, or to o	carry out the purposes			
									See section 509(a)(3).			
				-					nes 12e, 12f, and 12g.			
а					, supervised, or contr							
			-		regularly appoint or e		ajority of	the directors or truste	ees of the			
			-	-	e Part IV, Sections A							
b					n supervised or controlled in connection with its supported organization(s), by having opporting organization vested in the same persons that control or manage the supported							
			-		-	the sam	e persor	is that control of mar	lage the supported			
~	Г			-	, Sections A and C. ng organization opera	tod in a	onnoctio	n with and functions	lly integrated with			
С					s). You must comple				ny megrateu with,			
d	Γ		•	. , .	porting organization of				ted organization(s)			
ŭ			•	-	nization generally mus				• • • • •			
				• •	mplete Part IV, Sect							
е				,	a written determinatio				II, Type III			
		functionally	integrated, or	Type III non-funct	ionally integrated sup	porting o	organizat	ion.				
f	En	ter the number	of supported	organizations					1			
g	Pro	ovide the follow	ving informatio	on about the suppo	orted organization(s).	1						
7	.,	lame of supported o	organization	<b>(ii)</b> EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	listed in yo	organization ur governing ment?	(v) Amount of monetary support (see instructions)	<b>(vi)</b> Amount of other support (see instructions)			
	.T.T.F	ACHMENT 1				Yes	No					
(A)												
(P)												
(B)												
(C)												
(D)												
(E)												
. 7												
Tota	al							7,731.				
For F	ape	rwork Reduction A	ct Notice, see the	e Instructions for Form	990 or 990-EZ.			Schedule A	(Form 990 or 990-EZ) 2020			

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6	Public support. Subtract line 5 from line 4						
	tion B. Total Support	(-) 0040	(1-) 0047	(-) 0040	(-1) 0040	(-) 0000	(0 T-t-l
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (	,					
13	<b>First 5 years.</b> If the Form 990 is for organization, check this box and <b>stop here</b>	<u></u>					
Sec	tion C. Computation of Public Sup						
14	Public support percentage for 2020 (li					14	%
15	Public support percentage from 2019					15	%
16a	331/3% support test - 2020. If the or	•					
	box and <b>stop here.</b> The organization q						
b	331/3% support test - 2019. If the org						
47-	this box and <b>stop here</b> . The organizati			•			
17a	10%-facts-and-circumstances test - 2	-					
	10% or more, and if the organization Part VI how the organization meets					•	•
	•			•			
h	organization						
a	<b>10%-facts-and-circumstances test</b> - 2						
	15 is 10% or more, and if the organi in Part VI how the organization meet					•	
	-			-	-		
18	organization						
10	•						
	instructions	<u></u>					· · · · · · · · · · · · · · · · · · ·

Schedule A (Form 990 or 990-EZ) 2020

#### Schedule A (Form 990 or 990-EZ) 2020

Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
, a	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified	l l					
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is fo		on's first. secon	d. third. fourth.	or fifth tax ve	ar as a section	501(c)(3)
	organization, check this box and <b>stop here</b>	0					
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2020 (line 8			mn (f))		15	%
16	Public support percentage from 2019 Sche					16	%
Sec	tion D. Computation of Investmen						
17	Investment income percentage for 2020 (li			13, column (f))		17	%
18	Investment income percentage from 2019					18	%
	331/3% support tests - 2020. If the or						
	17 is not more than 331/3%, check thi						
b	331/3% support tests - 2019. If the org	-	-				
	line 18 is not more than 331/3%, check						
20	Private foundation. If the organization		•				
JSA						Schedule A (Form 9	
UE122	<sup>1 1.000</sup> 6693NQ B47D 8/17/2021 9	:49:17 AM	V 20-6.3F	1	38-1176611	-1176296	PAGE 1

Yes No

Х

Х

Х

Х

Х

Х

Х

Х

Х

Х

Х

Х

Х

Х

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

20-1354373

#### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

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

JSA 0E1229 1.010 10b Schedule A (Form 990 or 990-EZ) 2020

Yes No

Х

2

Schedule A (Form	n 990 or 990-EZ) 2020
------------------	-----------------------

Part	V Supporting Organizations (continued)						
			Yes	No			
11	Has the organization accepted a gift or contribution from any of the following persons?						
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and						
	11c below, the governing body of a supported organization?	11a		Х			
b	A family member of a person described in line 11a above?	11b		Х			
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide						
	detail in <b>Part VI.</b>	11c		Х			
Section B. Type I Supporting Organizations							

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

2	Did the organization operate for the benefit of any supported organization other than the supported
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part
	<b>W</b> how providing such benefit carried out the purposes of the supported organization(s) that operated,
	supervised, or controlled the supporting organization.

#### Section C. Type II Supporting Organizations

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

#### Section D. All Type III Supporting Organizations

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

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

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructi	ons).				
а	The organization satisfied the Activities Test. Complete line 2 below.					
b	The organization is the parent of each of its supported organizations. Complete line 3 below.					
С	c The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).					
		Yes	No			
2	Activities Test. Answer lines 2a and 2b below.					
~	Did substantially all of the organization's activities during the tay year directly further the event nurnesses of					

а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify
	those supported organizations and explain how these activities directly furthered their exempt purposes,
	how the organization was responsive to those supported organizations, and how the organization determined
	that these activities constituted substantially all of its activities.

- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. *Answer lines 3a and 3b below.*
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

2a

2b

3a

s regard. 3b Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

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

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

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

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

Schedule A (Form 990 or 990-EZ) 2020

JSA

-	le A (Form 990 or 990-EZ) 2020				Page <b>7</b>
Part	V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	ions (continued)		
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish ex			1	
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organi	zations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p		5		
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in <b>Part VI</b> ). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	s	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020				
	(reasonable cause required - <i>explain in <b>Part VI</b>)</i> . See				
	instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
<u> </u>	From 2017				
d	From 2018				
e	From 2019				
f	Total of lines 3a through 3e				
<u>g</u>	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2020 distributable amount				
	Carryover from 2015 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2020 from				
4					
a	Section D, line 7: \$ Applied to underdistributions of prior years				
 b	Applied to 2020 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
Ŭ	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
•	and 4b from line 1. For result greater than zero, <i>explain in</i>				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2016				
b	Excess from 2017				
С	Excess from 2018				
d	Excess from 2019				
е	Excess from 2020				
-			Sahad	lul a	A (Form 990 or 990 E7) 2020

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

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

SCHEDULE A, PART IV, SECTION A, LINE 3B

DETERMINATION OF QUALIFYING ORGANIZATION:

THE AMERICAN BOARD OF RADIOLOGY FOUNDATION IS A SUPPORTING ORGANIZATION FOR THE AMERICAN BOARD OF RADIOLOGY WITHIN THE MEANING OF THE INTERNAL REVENUE CODE SECTIONS 170(C), 501(C)(3), 509(A)(3), AND 2055(A). AS SUCH, THE AMERICAN BOARD OF RADIOLOGY PERIODICALLY REVIEWS ITS FUNDING SOURCES FOR CLASSIFICATION PURSUANT TO INTERNAL REVENUE CODE SECTION 509(A)(2). THE AMERICAN BOARD OF RADIOLOGY QUALIFICATION IS BASED ON CONTRIBUTIONS FROM APPROXIMATELY 30,585 CANDIDATES AND DIPLOMATES. THE ORIGINAL DETERMINATION FOR INTERNAL REVENUE CODE SECTION 509(A)(2) WAS MADE WHEN THE AMERICAN BOARD OF RADIOLOGY FOUNDATION WAS FORMED.

SCHEDULE A, PART IV, SECTION A, LINE 3C

ENSURING USE OF SUPPORT:

THE AMERICAN BOARD OF RADIOLOGY FOUNDATION IS ORGANIZED EXCLUSIVELY TO SUPPORT AND CARRY OUT THE CHARITABLE, SCIENTIFIC AND EDUCATIONAL PURPOSES OF THE AMERICAN BOARD OF RADIOLOGY. COMMON BOARD MEMBERSHIP ENSURES THE OBJECTIVES OF THE ORGANIZATION ARE ADHERED TO.

				ATTACHMENT	1
SCHEDULE A, PART I - INFORMATION ABOUT	SUPPORTED C	DRGANIZATIO	NS		
		(III) TYPE OF	(IV)	(V) AMOUNT OF	(VI) OTHER
(I) NAME OF SUPPORTED ORGANIZATION	(II) EIN	ORGANIZATION	YES NO	SUPPORT	SUPPORT AMOUNT
THE AMERICAN BOARD OF RADIOLOGY	41-0773787	10	Х	7,731.	0.
TOTAL AMOUNT OF SUPPORT				7,731.	0.

SCHEDULE I (Form 990)		Grants ar overnmei	-	OMB No. 1545-0047 ົ້າ <b>2</b> ີ ຄ <b>ົ</b>					
	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.								
Department of the Treasury				ttach to Form 990				Open to Public	
Internal Revenue Service		► Go t	to www.irs.gov	/Form990 for the I	atest information	l.		Inspection	
Name of the organization							Employer identific		
	ARD OF RADIOLOGY FO						20-13543	373	
	nformation on Grants an		-						
	zation maintain records to s								
	eria used to award the gran							X Yes No	
2 Describe in Part	IV the organization's proce	dures for mor	nitoring the use	of grant funds in the	e United States.				
Part II Grants an	nd Other Assistance to D	omestic Org	ganizations ar	nd Domestic Gov	/ernments. Com	plete if the organiz	ation answered "	Yes" on Form 990,	
Part IV, lir	ne 21, for any recipient t	hat received	more than \$5	,000. Part II can b	be duplicated if a	additional space is r	needed.		
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
(1) THE AMERICAN BOAR	D OF RADIOLOGY							CERTIFICATION	
	CIRCLE TUCSON, AZ 85711	41-0773787	501(C)(6)	7,731.				OUTREACH SYMPOSIA	
(2)		_							
_(3)		_							
(4)		_							
(5)		_							
(6)		_							
(7)									
(8)		_							
(9)									
(10)									
(11)									
(12)									
	er of section 501(c)(3) and	government	 prganizations lis	ted in the line 1 tak	 			<u> </u>	
3 Enter total numb	er of other organizations lis	ted in the line	1 table					1 . Schedule I (Form 990) 2020	

#### Schedule I (Form 990) (2020)

## 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>(b)</b> Number of recipients	<b>(c)</b> Amount of cash grant	( <b>d</b> ) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
2					
3					
4					
5					
6					
7					
Part IV Supplemental Information. Provid	de the information re	quired in Part I,	line 2, Part III, o	column (b); and any c	ther additional

information.

SCHEDULE I, PART I, LINE 2

PROCEDURES TO MONITOR THE USE OF GRANT FUNDS IN THE U.S.:

GRANT RECIPIENTS ARE DETERMINED BY THE BOARD AND THE FORMAL APPROVAL IS

NOTED IN THE MINUTES. AS THE FOUNDATION PROVIDES GRANTS TO A RELATED

ORGANIZATION THAT SHARES THE SAME BOARD, THE USE OF THE FUNDS BY THE

AMERICAN BOARD OF RADIOLOGY IS MONITORED BY THE BOARD. GRANTS GIVEN TO

OTHER ORGANIZATIONS ARE GIVEN FOR A SPECIFIC PURPOSE, BUT THERE ARE NO

FORMAL MONITORING PROCEDURES FOR THESE FUNDS.

Page 2

(Forn	EDULE J n 990)	Compensation Information OM 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.					
	nent of the Treasury Revenue Service		990 for instructions and the latest information.		-	ectio	
Name	of the organization			Employer identification			
THE	AMERICAN I	BOARD OF RADIOLOGY FOUNDATI	ION	20-1354373			
Part	Question	ns Regarding Compensation					
1a			vided any of the following to or for a pers			Yes	No
			provide any relevant information regarding	5			
		iss or charter travel	Housing allowance or residence for	•			
		or companions	Payments for business use of perso				
		emnification and gross-up payments	Health or social club dues or initiation				
	Discretio	onary spending account	Personal services (such as maid, ch	auffeur, chef)			
b	or reimburse	ement or provision of all of the ex	e organization follow a written policy re penses described above? If "No," com	plete Part III to	415		
•			to roimburging or allowing evpones		1b		<u> </u>
2	•		to reimbursing or allowing expenses D/Executive Director, regarding the items	•			
					2		
					2		
3	organization's related organ	s CEO/Executive Director. Check all the ization to establish compensation of the	on used to establish the compensation of at apply. Do not check any boxes for metho e CEO/Executive Director, but explain in P	ods used by a			
		nsation committee	Written employment contract				
	· ·	dent compensation consultant	Compensation survey or study				
	Form 99	90 of other organizations	Approval by the board or compensation	ation committee			
4	organization of	or a related organization:	Part VII, Section A, line 1a, with respect to	-			
а			ayment?		4a	X	<u> </u>
b			tal nonqualified retirement plan?		4b	Х	<u> </u>
С			ed compensation arrangement?		4c		X
	Only section	501(c)(3), 501(c)(4), and 501(c)(29) or	rganizations must complete lines 5-9.				
5	•	listed on Form 990, Part VII, Secti n contingent on the revenues of:	on A, line 1a, did the organization pa	y or accrue any			
а	The organizat	ion?			5a		Х
b					5b		Х
	If "Yes" on lin	e 5a or 5b, describe in Part III.					
6	-	listed on Form 990, Part VII, Secti n contingent on the net earnings of:	on A, line 1a, did the organization pa	iy or accrue any			
а	The organizat	ion?			6a		Х
b	-				6b		Х
	If "Yes" on lin	e 6a or 6b, describe in Part III.					
7	For persons	listed on Form 990, Part VII, Sectio	n A, line 1a, did the organization prov		7		X
8			escribe in Part III. paid or accrued pursuant to a contract tha		-		
0			Regulations section 53.4958-4(a)(3)? If				1
			•		0		X
0			ow the rebuttable presumption proced		8		
9		<b>.</b>			0		
Eor Pr		ction Act Notice, see the Instructions for Fo			9 ule J (Fo		0) 2020
101 70	APELMOIN REUUC	and Activates, see the instructions for FC	,	Schedu	10 J (F(	2111 23(	<i>, 2020</i>

JSA

Schedule J (Form 990) 2020

Page 2

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

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

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

		(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
VALERIE P JACKSON, MD	(i)	0.	0.	0.	0.	0.	0.	0.
1 EXECUTIVE DIRECTOR END:07/2020	(ii)	461,141.	3,000.	131,945.	34,884.	3,967.	634,937.	131,500.
BRENT J WAGNER, MD	(i)	0.	0.	0.	0.	0.	0.	
2 EXECUTIVE DIRECTOR BEG:07/2020	(ii)	305,677.	0.	165.	0.	4,633.	310,475.	0.
	(i)							
3	(ii)							
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2020

Schedule J (Form 990) 2020

#### 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.

SCHEDULE J, PART I, LINE 3

ESTABLISHING COMPENSATION:

THE AMERICAN BOARD OF RADIOLOGY, A RELATED ORGANIZATION, ESTABLISHES

COMPENSATION FOR ITS EXECUTIVE DIRECTOR BY AN INDEPENDENT COMPENSATION

CONSULTANT, COMPENSATION COMMITTEE, COMPENSATION SURVEY OR STUDY, AND BY

APPROVAL OF THE BOARD OR COMPENSATION COMMITTEE.

SCHEDULE J, PART I, LINE 4B

SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN:

THE AMERICAN BOARD OF RADIOLOGY, A RELATED ORGANIZATION, MAINTAINS A SECTION 457(F) PLAN. VALERIE P JACKSON, MD PARTICIPATES IN THE 457(F) PLAN, BUT DID NOT RECEIVE ANY PAYMENTS FROM THE PLAN. DURING THE TAX YEAR CONTRIBUTIONS TO THE PLAN TOTALING \$6,384 WERE MADE DURING THE YEAR AND

ARE REFLECTED IN HER DEFERRED COMPENSATION.

\$131,500 WAS REPORTED IN HER W-2 TAXABLE COMPENSATION AS A 457(F) DISTRIBUTION ALTHOUGH SHE DID NOT ACTUALLY RECEIVE THE FUNDS.

Schedule J (Form 990) 2020

#### 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.

SCHEDULE J, PART I, LINE 4A

SEVERANCE PAYMENTS:

SEVERANCE IS A VOLUNTARY AGREEMENT THAT SET FORTH THE AGREED UPON

SEPARATION DATE FOR EMPLOYMENT AND BENEFITS COVERAGE, THE AMOUNT OF

PAYMENT, A CONFIDENTIALITY AGREEMENT CONCERNING COMPANY INFORMATION AND

MATERIALS, RETURN OF COMPANY MATERIALS, AND COOPERATION CONCERNING

BUSINESS MATTERS. MARK HOOVER RECEIVED A SEVERANCE PAYMENT OF \$12,500.

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. Cabadula O (Farma 000



Internal Revenue Service	Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.ii	s.gov/form990. Inspectio
Name of the organization		Employer identification number
THE AMERICAN BOARI	OF RADIOLOGY FOUNDATION	20-1354373

FORM 990, PART III, LINE 3

CHANGES TO CONDUCTING PROGRAM SERVICES:

THE FOUNDATION IS RE-EVALUATING PROGRAM SERVICES OFFERED TO DETERMINE HOW TO MOST EFFECTIVELY ACHIEVE THE MISSION STATEMENT. DURING THIS PERIOD OF RE-EVALUATION, NO NEW CONTRIBUTIONS ARE CURRENTLY BEING ACCEPTED. CURRENT PROGRAM COMMITMENTS FOR SPONSORSHIPS CONTINUE TO BE SERVICED.

FORM 990, PART VI, SECTION A, LINE 6 MEMBERS OR STOCKHOLDERS:

THE AMERICAN BOARD OF RADIOLOGY IS THE SOLE MEMBER OF THE FOUNDATION.

FORM 990, PART VI, SECTION A, LINE 7A MEMBERS WITH POWER TO APPOINT ONE OR MORE MEMBERS OF GOVERNING BODY: THE AMERICAN BOARD OF RADIOLOGY HAS THE POWER TO APPOINT OR REMOVE ANY MEMBERS OF THE BOARD OF DIRECTORS FOR THE FOUNDATION.

FORM 990, PART VI, SECTION B, LINE 11B PROCESS TO REVIEW FORM 990:

THE FORM 990 WAS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM FOLLOWING THE COMPLETION OF AN AUDIT OF FINANCIAL STATEMENTS. A COPY OF THE FORM 990 IS PROVIDED TO THE BOARD FOR REVIEW PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C PROCESS FOR MONITORING COMPLIANCE WITH CONFLICT OF INTEREST POLICY:

Schedule O (Form 990 or 990-EZ) 2020	Page
Name of the organization	Employer identification number
THE AMERICAN BOARD OF RADIOLOGY FOUNDATION	20-1354373

POTENTIAL CONFLICTS ARE REVIEWED ANNUALLY AT A MEETING OF THE BOARD OF GOVERNORS. IF A CONFLICT IS FOUND TO EXIST, THE CONFLICTED MEMBER RECUSES THEMSELVES FROM RELATED DISCUSSIONS.

FORM 990, PART VI, SECTION C, LINE 18 & 19 AVAILABILITY OF DOCUMENTS:

THE FORM 990 AND 1023, CONFLICT OF INTEREST POLICY, BYLAWS AND ANNUAL SUMMARY FINANCIAL STATEMENTS ARE AVAILABLE ON THE ABR'S WEBSITE.

FORM 990, PART VI, SECTION A, LINE 1A DELEGATION OF AUTHORITY: THE PRESIDENT AND PRESIDENT ELECT HAVE AUTHORITY TO MAKE DECISIONS OUTSIDE OF REGULAR BOARD MEETINGS.

OMB No. 1545-0047

Open to Public

Inspection

ZU

2

Employer identification number

20-1354373

SCHEDULE R	
(Form 990)	

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

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

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

THE AMERICAN BOARD OF RADIOLOGY FOUNDATION

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

	-			-	
(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity
(1)					
_(2)					
(3)					
_(5)					
(4)					
(5)					
_(6)					

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	(d) Exempt Code section	<b>(e)</b> Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	(g Section 5 contr enti	olled
						Yes	No
(1) THE AMERICAN BOARD OF RADIOLOGY 41-0773787							
5441 E. WILLIAMS CIRCLE TUCSON, AZ 85711	CERTIFICATION	DC	501(C)(6)	N/A	N/A		Х
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2020

JSA

Schedule R (Form 990) 2020

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

	Indie related org	amzation		araieromp daning ar	c tax year.							
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of- year assets	(h Disprop alloca	ortionate	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	<b>j)</b> eral or aging ner?	<b>(k)</b> Percentage ownership
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					Yes	No		Yes	No	
(1)												
<u> </u>												
(2)												
<u> </u>												
(3)												
<u></u>												
(4)												
<u></u>	1											
(5)												
<u></u>	1											
(6)												
	1											
(7)												
<u> </u>	1											

# Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	<b>(e)</b> Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(i) Secti 512(b) contro entity Yes	
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

Schedule R (Form 990) 2020

THE AMERICAN BOARD OF RADIOLOGY FOUNDATION

20-1354373

Page **3** 

Schedule R (Form 990) 2020

Part \	Transactions With Related Organizations. Complete if the organization answered "Ye	es" on Form 990, Par	t IV, line 34, 35b, or 36.				
Note:	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
1 D	uring the tax year, did the organization engage in any of the following transactions with one or more r	elated organizations lis	ted in Parts II-IV?				
a F	eceipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		X
	ift, grant, or capital contribution to related organization(s)				1b	Х	
	ift, grant, or capital contribution from related organization(s)				1c		X
	oans or loan guarantees to or for related organization(s)				1d		X
e L	oans or loan guarantees by related organization(s)				1e		X
					46		X
	ividends from related organization(s)				1f		X
	ale of assets to related organization(s)				1g		X
	urchase of assets from related organization(s)				1h 1i		X
	xchange of assets with related organization(s).						X
J L	ease of facilities, equipment, or other assets to related organization(s)		• • • • • • • • • • • • • • • • •		1j		
k I	asso of facilities, equipment, or other assots from related organization(c)				1k		X
	ease of facilities, equipment, or other assets from related organization(s) erformance of services or membership or fundraising solicitations for related organization(s)				11		X
	erformance of services of membership of fundraising solicitations for related organization(s)				1m		X
	haring of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Х	
	having of paid employees with related organization(s)				10	Х	
• •							
рF	eimbursement paid to related organization(s) for expenses.				1p	Х	
-	eimbursement paid by related organization(s) for expenses				1q		X
r C	other transfer of cash or property to related organization(s)				1r		X
s (	ther transfer of cash or property from related organization(s).	<u></u>			1s		Х
<b>2</b> If	the answer to any of the above is "Yes," see the instructions for information on who must complete t			action three		S.	
	(a) Name of related organization	(b) Transaction	<b>(c)</b> Amount involved	Method o	( <b>d)</b> of dete	erminii	na
	·······	type (a-s)		amou			.9
(1)							
(1)							
(2)							
(-)							
(3)							
(4)							
(5)							
(6)							
JSA			Sch	nedule R (F	orm	990)	2020

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

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

<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	from tax under	sec 501( organiz	tion c)(3) ations?	(f) Share of total income	(g) Share of end-of-year assets	Disprop	ortionate	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	man	aging	(k) Percentage ownership
		sections 512 - 514)	Yes	No			Yes	No	( · · · · /	Yes	No	<u> </u>
_												1
												1
_												
_												
												+
												+
	(b) Primary activity	(state or foreign	(state or foreign income (related, country) unrelated, excluded from tax under	(state or foreign country) income (related, sec unrelated, excluded 5010 from fax under organiz	(state or foreign income (related, section country) unrelated, excluded 501(c)(3)	(state or foreign country) income (related, section total income unrelated, excluded 501(c)(3) from tax under organizations?	(state or foreign income (related, section total income end-of-year country) unrelated, excluded 501(c)(3) assets assets	(state or foreign income (related, section total income end-of-year country) unrelated, excluded 501(c)(3) assets alloci	(state or foreign income (related, section total income end-of-year allocations?	(state or foreign income (related, section total income end-of-year allocations? allocations? allocations? assets of Schedule K-1 (Form tax under organizations?)	(state or foreign income (related, section total income end-of-year allocations? amount in box 20 man 501(c)(3) assets of Schedule K-1 part (Form fax under organizations?	(state or foreign income (related, section total income end-of-year allocations? allocations? allocations? and the partner? (Form tax under organizations?)

Schedule R (Form 990) 2020

JSA 0E1310 1.000

Schedule R (F	orm 990) 2020
Part VII	Supplemental Information
	Provide additional information for responses to questions on Schedule R. See instructions.