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CLIENT'S COPY

EXTENDED TO MAY 15, 2023

Form **990**

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047
2021
Open to Public Inspection

Form 990 (2021)

Department of the Treasury Internal Revenue Service

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

A F	or the	\pm 2021 calendar year, or tax year beginning $$ JUL $$ $$ $$ $$ $$ $$ $$ $$ $$ $$	nding J	UN 30, 2022	The same of the sa				
Во	heck if	NORTH CAROLINA HIGH SCHOOL ATHLETIC		D Employer identifi	cation number				
	Addres	ASSOCIATION, INC.							
	Name chang	Doing business as		56-06554	25				
	Initial roturn Final return	Number and street (or P.O. box if mail is not delivered to street address) PO BOX 3216	E Telephone numbe 919-240-						
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	Gross recaipts \$ 18,041,291.				
	Ament	CHAPEL HILL, NC 27515		H(a) Is this a group re	eturn				
	Application	F Name and address of principal officer: MARILYN TUCKER	-1746000-001	for subordinates	? Yes X No				
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in					
1.7	ax-ex	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527		list. See instructions				
		e: NWW.NCHSAA.ORG		H(c) Group exemptio					
K F	orm of	organization: X Corporation Trust Association Other ► Summary	L Year	of formation: 1924	A State of legal domicile: NC				
-	Annual Property lies	Briefly describe the organization's mission or most significant activities: THE M	ISSIO	N OF THE NC	HSAA IS TO				
ce		PROVIDE GOVERNANCE AND LEADERSHIP FOR INTE							
Activities & Governance		Check this box Fig. if the organization discontinued its operations or dispose							
Ver	1			3	19				
ဗိ	1	Number of independent voting members of the governing body (Part VI, line 1b)		********	18				
ళ		Total number of individuals employed in calendar year 2021 (Part V, line 2a)			19				
ţ.	6	Total number of volunteers (estimate if necessary)		*******	200				
#	7 2	Total unrelated business revenue from Part VIII, column (C), line 12	************	7a	0.				
¥		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.				
		Not amounted business taxable meeting with 1 and		Prior Year	Current Year				
Revenue	8	Contributions and grants (Part VIII, line 1h)		1,315,562.	1,402,577.				
		Program service revenue (Part VIII, line 2g)		2,000,513.	2,154,764.				
Yer		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		5,268,678.	2,168,827.				
8		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.				
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		8,584,753.	5,726,168.				
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		5,833,202.	1,291,396.				
		5		0.	0.				
	45	Salaries, other compensation, employee benefits (Part IX, column (A), line 4)		1,358,165.	1,283,677.				
ses	162	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
Expenses	,oa h	Total fundraising expenses (Part IX, column (D), line 25)	3 695	976999609990000					
EX	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,600,857.	3,029,471.				
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		9,792,224.	5,604,544.				
		Revenue less expenses, Subtract line 18 from line 12		-1,207,471.	121,624.				
58		revenue less expenses, odonace me 10 mon mo 12		ginning of Current Year	End of Year				
ets (20	Total assets (Part X, line 16)		44,786,651.	37,882,945.				
let Assets	21	Total Kabilisian (Part V. Kap. 26)		2,239,491.	1,535,251.				
Net	22	Net assets or fund balances. Subtract line 21 from line 20		42,547,160.	36,347,694.				
Pa	irt II	Signature Block		12/51//2001	30,311,031.				
-	-	Ities of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	nts, and to the best of my	knowledge and helief it is				
		t, and complete. Declaration of preparer (other than officer) is based on all information of which			menicago una beneri ma				
		Marilym Lucker Commissioner	M propulor		2023				
Sigi	n	Signature of pfficer	/	Date	0000				
Her		MARILYN TUCKER, COMMISSIONER	1						
	•	Type or print name and title							
_		Print/Type preparer's name Preparer's signature		ate Check	PTIN				
Paid		ROBERT LEWIS ROBERT LEWIS		2/21/23 self-craple					
	arer	Firm's name BLACKMAN & SLOOP, CPAS, P.A.			56-1304727				
	Only	Firm's address 1414 RALEIGH RD, SUITE 300		IIIIOSCINIS					
		CHAPEL HILL, NC 27517		Phone no (9	19)942-8700				
May	the IF	RS discuss this return with the preparer shown above? See instructions		11 Hone Ho, ()	X Yes No				

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE MISSION OF THE NCHSAA IS: TO PROVIDE GOVERNANCE AND LEADERSHIP FOR
	INTERSCHOLASTIC ATHLETIC PROGRAMS IN NORTH CAROLINA THAT SUPPORT AND
	ENRICH THE EDUCATIONAL EXPERIENCE OF STUDENTS;
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 4,156,634. including grants of \$ 1,082,815.) (Revenue \$ 2,154,764.)
	THERE WERE 427 MEMBER SCHOOLS IN 2021-2022 WITH OVER 165,000
	STUDENT-ATHLETES PARTICIPATING. THE MAIN PUBLICATION CREATED ANNUALLY
	IS THE THE NCHSAA HANDBOOK WHICH INCLUDES RULES & REGULATIONS, PENALTY
	CODE, APPEALS PROCESS, SPORTS REGULATIONS, PLAYOFF PROCEDURES, AND
	GENERAL REQUIREMENTS FOR MEMBER SCHOOLS AND STUDENT ATHLETES. THE
	HANDBOOK IS DISTRIBUTED TO EVERY MEMBER SCHOOL AND IS AVAILABLE
	ON-LINE.
	ADMINITURDANTON OF MUE CHANELS AMULENTS DROSDAN FOR THE NEWDERS SOLIOUS
	ADMINISTRATION OF THE STATE'S ATHLETIC PROGRAM FOR ITS MEMBERS SCHOOLS,
	INCLUDING THE EDUCATION AND TRAINING OF 4500-5000 GAME OFFICIALS.
	200 501 200 501 3
4b	(Code:) (Expenses \$ 208,581. including grants of \$ 208,581.) (Revenue \$)
	FORTY-ONE SCHOLARSHIPS WERE AWARDED TOTALING \$62,500.00 TO THIRTY-THREE
	UNIQUE INDIVIDUALS AND TWO COACH AWARDS WERE GIVEN TOTALING \$6,000.00.
	TWELVE GRANTS WERE AWARDED TO MEMBER SCHOOLS TOTALING \$140,081.00.
	GRANT PROJECTS TOUCHED AREAS OF HEALTH AND SAFETY, PROFESSIONAL
	DEVELOPMENT OPPORTUNITIES, AND SCHOOL-BASED STUDENT RECOGNITION PROGRAMS.
	PROGRAMS.
4c	(Code:) (Expenses \$
70	(Code:) (Expenses \$\psi
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 4,365,215.
	Form 990 (2021)

Form 990 (2021) ASSOCIATION, INC.
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	<u>X</u>	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X_
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 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? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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," 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		_X_
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		_X_
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_X_
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		_X_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		_X_
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> X</u>
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		<u> X</u>
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		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
00 -	complete Schedule G, Part III	19		<u> </u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21		х
	democro government entrative, committees, mile 1: II fes, complete ochequie I, Parts I and II	41		

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Form **990** (2021)

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NORTH CAROLINA HIGH SCHOOL ATHLETIC ASSOCIATION, INC.

Form 990 (2021)

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		<u> </u>
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		<u> </u>
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 the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u> X</u>
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 II	32		<u> </u>
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		<u> </u>
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
	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?			_ v
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			_ v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> X</u>
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		v	
Pai	Note: All Form 990 filers are required to complete Schedule O **T V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
. u				
	Check if Schedule O contains a response or note to any line in this Part V		V	
4 -	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
_		1		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	(mark lie) where the parties are 10	1c	Х	
	(gambling) winnings to prize winners?	I IC	-7	

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Form 990 (2021) Part V Statements Regarding Other IRS Filings and Tax Compliance

ASSOCIATION, INC. 56-0655425

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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 Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions. Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За **b** If "Yes," has it filed a Form 990-T for this year? *If* "No" to line 3b, provide an explanation on Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? Х 4a **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). Х **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? 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). Х 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 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X 7с d If "Yes," indicate the number of Forms 8282 filed during the year X Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Х 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. 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 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 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 against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a **b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand X Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or X excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069

56-0655425 ASSOCIATION, INC. Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.									
	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	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 committee, explain on Schedule O.									
b	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 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 supervision									
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х						
4										
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х						
6	Did the organization have members or stockholders?	6		Х						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or									
	more members of the governing body?	7a		Х						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		Х						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	The governing body?	8a	X							
b	Each committee with authority to act on behalf of the governing body?	8b	X							
9										
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
			Yes	No						
	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,	10b								
	and branches to ensure their operations are consistent with the organization's exempt purposes?									
	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?									
	b Describe on Schedule O the process, if any, used by the organization to review this Form 990.									
_	7 7 110, 90 to 1110 110									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40.	Х							
12	on Schedule O how this was done	12c 13	X							
13 14	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	14	X							
	Did the process for determining compensation of the following persons include a review and approval by independent	17								
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
a	The organization's CEO, Executive Director, or top management official	15a	Х							
	Other officers or key employees of the organization	15b	X							
~	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	.5.0	_							
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	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
	exempt status with respect to such arrangements?	16b								
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ▶NC									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availal	ole						
	for public inspection. Indicate how you made these available. Check all that apply									
	X Own website Another's website X Upon request Other (explain on Schedule O)									
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l financ	ial							
	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									
	MARILYN TUCKER - (919)240-7401									
	222 FINLEY GOLF COURSE ROAD, CHAPEL HILL, NC 27517									

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

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

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

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

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

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do		Posi heck i		1 than	one	Reportable	Reportable	Estimated
	hours per					is botl or/trus		compensation	compensation	amount of
	week					T	100)	from	from related	other
	(list any hours for	lirecto						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or (stee			satec		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	Individual trustee or director	Institutional trustee		yee	mper		1099-NEC)	1000 (120)	and related
	below	idual	ution	72	Key employee	st co	e.			organizations
	line)	Indiv	Instit	Officer	Key e	Highest compensated employee	Former			
(1) QUE TUCKER	40.00									
COMMISSIONER		Х		Х				164,185.	0.	15,504
(2) RONNIE BEVERLY	0.60									
DIRECTOR		Х						0.	0.	0.
(3) CHRIS BLANTON	0.60									
DIRECTOR		Х			L		L	0.	0.	0.
(4) MARK BYRD	0.60									
DIRECTOR		Х						0.	0.	0 .
(5) BRIAN CARVER	0.60									
DIRECTOR		Х						0.	0.	0
(6) CHAD DUNCAN	0.60									
DIRECTOR		Х						0.	0.	0.
(7) STEPHEN GAINEY	0.60									
DIRECTOR		Х						0.	0.	0.
(8) MARK GARRETT	0.60									
DIRECTOR		Х						0.	0.	0
(9) TROY LINDSEY	0.60									
DIRECTOR		Х						0.	0.	0
(10) JOHN LUCIANO	0.60									
DIRECTOR		Х						0.	0.	0
(11) FRED LYNCH	0.60									
DIRECTOR		Х						0.	0.	0 .
(12) ANDY MCCORMICK	0.60									
DIRECTOR		Х						0.	0.	0 .
(13) TOD MORGAN	0.60									
DIRECTOR		Х						0.	0.	0 .
(14) CATHY MOORE	0.60								-	
DIRECTOR		Х						0.	0.	0.
(15) TANYA TURNER	0.60									
DIRECTOR		Х						0.	0.	0.
(16) JOY WARNER	0.60								-	
DIRECTOR		Х						0.	0.	0
(17) BOBBY WILKINS	0.60								-	
PRESIDENT	_ · · · · ·	Х	ı	х	I	1	1	0.	0.	0

Form 990 (2021) ASSOCIAT	CON, INC	: <u>.</u>							56-0	<u>655</u>	<u>425</u>	P	age 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	d Hig	ghe	st C	ompensated Employee	s (continued)				
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average	١		Pos				Reportable	Reportable	,	Es	timate	ed
	hours per		(do not check more than one box, unless person is both an					compensation	compensation			ount	
	week					or/trus		from	from related			other	
	(list any	ctor						the	organization	ıs	com	pensa	tion
	hours for	dire				- G		organization	(W-2/1099-MIS	SC/	fr	om th	е
	related	lee ol	ıstee			usat		(W-2/1099-MISC/	1099-NEC)		orga	anizat	ion
	organizations	trus	la tr		oyee	lag		1099-NEC)			and	d relat	ed
	below	Individual trustee or director	Institutional trustee	je.	Key employee	lovee	ner				orga	ınizati	ons
	line)	Indi	Insti	Officer	Key	Highest compensated employee	Former						
(18) ROB JACKSON	0.60	l											_
VICE PRESIDENT		X		Х		_		0.		0.			0.
(19) JERRY SIMMONS	0.60	l		l						•			•
PAST PRESIDENT		Х		X		-		0.		0.			0.
		-											
						_							
		-											
						_	-						
		-											
						-							
		-											
						\vdash	-						
		-											
						-							
		-											
						\vdash	-						
		-											
di Oriental	l					<u> </u>	\vdash	164,185.		0.	1 [5,5	n 4
1b Subtotal								0.		0.		, ,	0.
c Total from continuation sheets to Part VI								164,185.		0.	1 [5,5	
d Total (add lines 1b and 1c)								•	000 - f			, ,	U 4 •
2 Total number of individuals (including but n	ot limited to th	iose	liste	ed ar	oove	e) wr	io re	eceived more than \$100,	000 of reportable	Э			1
compensation from the organization											1	Yes	No
2 Did the examination list any former officer	director truct	ا مما					. bia	hoot componented own	lavaa an	1		103	140
3 Did the organization list any former officer,	•		•	•	•		_		•				Х
line 1a? If "Yes," complete Schedule J for s											3		
4 For any individual listed on line 1a, is the su												v	
and related organizations greater than \$150											4	X	
5 Did any person listed on line 1a receive or a	=				-			-			_		v
rendered to the organization? f "Yes," com	<u>plete Schedul</u>	e J f	or su	ıch i	oers	on					5		X
<u> </u>		J					41		100 000 of com-		.:		
1 Complete this table for your five highest co	•	•							•	pensa	ion iro	orn	
the organization. Report compensation for	ine calendar y	ear e	enair	ıg w	ith c	or wi	ıtnın		ear.			.,	
(A) Name and business	address	N	ONE	7				(B) Description of s	ervices	С	(C omper		n
			<u> </u>				\dashv						
2 Total number of independent contractors (in	ncluding but n	ot lir	nited	d to	thos	se lis	sted	above) who received mo	ore than				
*					•	`							

Form 990 (2021) ASSOCIA
Part VIII Statement of Revenue

		Check if Schedule O contains a response of	r note to any line	e in this Part VIII			
		<u> </u>	,	(A)	(B)	(C)	_ (D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 - 514
ω ω	1 2	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts							
يَجُ وَ							
Ŧ\$,							
ᇐ			49,000.				
ns, Sim		Government grants (contributions) 1e	49,000.				
e jë	T	All other contributions, gifts, grants, and	1 252 577				
들 된		similar amounts not included above 1f	1,353,577.				
g	_	Noncash contributions included in lines 1a-1f	74,203.	1 400 577			
<u>0</u> 8	r	Total. Add lines 1a-1f		1,402,577.			
		a	Business Code	1 505 401	1 505 404		
<u>e</u>	2 a		711210	1,705,401.	1,705,401.		
er.	b		711210	303,937.	303,937.		
n S	C		711210	93,103.	93,103.		
an Sev	C	·	711210	50,383.	50,383.		
Program Service Revenue	e	PROGRAMS, RULEBOOKS, DIRECTORIES,	711210	1,940.	1,940.		
Δ.	f	All other program service revenue					
	ç	Total. Add lines 2a-2f		2,154,764.			
	3	Investment income (including dividends, interes					
		other similar amounts)	▶	699,307.			699,307.
	4	Income from investment of tax-exempt bond pr	oceeds 🕨				
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
	b	Less: rental expenses 6b					
	c	Rental income or (loss) 6c					
	c	Net rental income or (loss)	>				
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 13,784,643.					
	b	Less: cost or other basis					
ē		and sales expenses 7b 12,315,123.					
ē	c	Gain or (loss) 7c 1,469,520.					
her Revenue		Net gain or (loss)		1,469,520.			1469520.
ē		Gross income from fundraising events (not					
퉏		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18					
	b	Less: direct expenses 8b					
		Net income or (loss) from fundraising events					
		Gross income from gaming activities. See	,				
		Part IV, line 199a					
	b	Less: direct expenses 9b					
		Net income or (loss) from gaming activities	•				
		Gross sales of inventory, less returns	,				
		and allowances 10a					
	h	Less: cost of goods sold 10b					
		Net income or (loss) from sales of inventory	•				
		The time of the set ment called of inventory	Business Code				
sna	11 a						
neo	b						
Miscellaneous Revenue							
Be		All other revenue					
Σ		Total. Add lines 11a-11d	b				
	12	Total revenue. See instructions		5,726,168.	2,154,764.	0.	2168827.

Part IX | Statement of Functional Expenses

	Check if Schedule O contains a respons	(A)		(C)	_ (D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,222,896.	1,222,896.		
2	Grants and other assistance to domestic	68,500.	68,500.		
2	individuals. See Part IV, line 22 Grants and other assistance to foreign	00,300.	00,300.		
3	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	176,516.	117,677.	58,839.	
6	Compensation not included above to disqualified	27073201	227,0770	30,0331	
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	882,689.	475,969.	243,553.	163,167
8	Pension plan accruals and contributions (include	002,0031	27373331	210,0001	200,207
•	section 401(k) and 403(b) employer contributions)	69,440.	37,152.	18,576.	13.712
9	Other employee benefits	76,414.	48,600.	24,300.	3.514
10	Payroll taxes	78,618.	43,917.	21,958.	13,712 3,514 12,743
11	Fees for services (nonemployees):	7070201	13/31/1	21/3301	12,715
'' a	` ' ' '				
b	Management				
	Legal				
		63,252.		63,252.	
	Lobbying Professional fundraising services. See Part IV, line 17	03,232.		03,232.	
e f	Investment management fees	232,823.		232,823.	
	Other. (If line 11g amount exceeds 10% of line 25,	232,023.		232,023.	
g	column (A), amount, list line 11g expenses on Sch 0.)	185,614.	62,216.	123,398.	
12	Advertising and promotion	6,705.	735.	123,3301	5,970
13	Office expenses	245,784.	164,326.	81,418.	40
13 14	Information technology	213,7011	101/3201	01,1101	
1 4 15	Royalties				
16	Occupancy				
17	Travel	6,334.	3,800.	2,534.	
ı, 18	Payments of travel or entertainment expenses	0,0011	3,0001	2,0011	
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	67,838.	54,270.	13,568.	
20	·	0770001	32,2700	20,0001	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	77,062.	38,531.	38,531.	
23		481,545.	433,390.	48,155.	
23 24	Other expenses. Itemize expenses not covered	101/3131	13373301	10,1331	
. 7	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 0.) TEAM EXPENSES	858,274.	858,274.		
a b	GATE RECEIPTS DISTRIBUT	288,739.	288,739.		
n	MISCELLANEOUS	262,300.	211,235.	32,826.	18,239
d	AWARDS	110,430.	110,430.	32,320.	10,200
-	All other expenses	142,771.	124,558.	15,725.	2,488
	Total functional expenses. Add lines 1 through 24e	5,604,544.	4,365,215.	1,019,456.	219,873
2 <u>5</u> 26	Joint costs. Complete this line only if the organization	J,004,J44.	±,505,2±5•	1,010,100 ·	217,015
-0	reported in column (B) joint costs from a combined				
	1 1 1				
	educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2021)
Part X Balance Sheet

		line in this Part X	(A) Beginning of year		(B)				
emporary cash investments									
emporary cash investments					End of year 7,913,632.				
emporary cash investments		1 Cash · non-interest-bearing							
	2 Savings and temporary cash investments 3 Pledges and grants receivable, net								
			3						
eivable, net	326,088.	4	567,181						
ner receivables from any current or									
mployee, creator or founder, subst									
tity or family member of any of thes	ns		5						
ner receivables from other disqualit									
4958(f)(1)), and persons described	ion 4958(c)(3)(B)		6						
ns receivable, net			7						
r sale or use				8					
			67,450.	9	53,290				
gs, and equipment: cost or other									
ete Part VI of Schedule D	10a 10b	2,265,538.							
llated depreciation	1,083,246.	1,259,354.	10c	1,182,292					
publicly traded securities	27,488,007.	11	27,535,306						
other securities. See Part IV, line 1	165,496.	12	123,441						
program-related. See Part IV, line		13							
ets		14							
See Part IV, line 11			15						
Add lines 1 through 15 (must equa			44,786,651.	16	37,882,945				
able and accrued expenses	2,149,924.	17	1,457,276						
Grants payable				18	1 050				
nue		24,168.	19	1,068					
ond liabilities				20					
stodial account liability. Complete I				21					
ner payables to any current or form									
mployee, creator or founder, subst									
ity or family member of any of thes				22					
gages and notes payable to unrela				23					
otes and loans payable to unrelated				24					
	s 1 <i>7-</i> 24).	Complete Part X	65 200		76 007				
					76,907				
			2,233,431.	26	1,535,251				
	ck nere								
, , ,			26 496 156	07	20,439,128				
			15,908,566						
			10,031,004.		13,700,300				
	oo, che	ck fiere							
•				20					
- '			42 547 160		36,347,694.				
					37,882,945				
s the se o it in the	(including federal income tax, paner liabilities not included on lines of the lines 17 through 25 that follow FASB ASC 958, che lines 27, 28, 32, and 33. Hout donor restrictions that do not follow FASB ASC 9 lines 29 through 33. For trust principal, or current funds all surplus, or land, building, or edings, endowment, accumulated in sor fund balances	(including federal income tax, payables the fer liabilities not included on lines 17-24). 5. Add lines 17 through 25 that follow FASB ASC 958, check here lines 27, 28, 32, and 33. nout donor restrictions that do not follow FASB ASC 958, check lines 29 through 33. or trust principal, or current funds all surplus, or land, building, or equipmentings, endowment, accumulated income, of sor fund balances	(including federal income tax, payables to related third her liabilities not included on lines 17-24). Complete Part X 5. Add lines 17 through 25 that follow FASB ASC 958, check here X	(including federal income tax, payables to related third her liabilities not included on lines 17-24). Complete Part X 65,399. 2,239,491. that follow FASB ASC 958, check here ► X lines 27, 28, 32, and 33. hout donor restrictions he donor restrictions that do not follow FASB ASC 958, check here lines 29 through 33. hor trust principal, or current funds hal surplus, or land, building, or equipment fund hangs, endowment, accumulated income, or other funds so or fund balances 42,547,160.	(including federal income tax, payables to related third her liabilities not included on lines 17-24). Complete Part X 65,399. 25 3. Add lines 17 through 25 2,239,491. 26 that follow FASB ASC 958, check here ► X lines 27, 28, 32, and 33. nout donor restrictions 16,051,004. 28 that do not follow FASB ASC 958, check here ► □ lines 29 through 33. or trust principal, or current funds all surplus, or land, building, or equipment fund ngs, endowment, accumulated income, or other funds s or fund balances 42,547,160. 32				

Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5	,72	6 1	68.		
2	Total expenses (must equal Part IX, column (A), line 25)	2		,60				
		3				$\frac{24.}{24.}$		
3	Revenue less expenses. Subtract line 2 from line 1	4	12			$\frac{23\cdot}{60\cdot}$		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))			,3 4				
5	Net unrealized gains (losses) on investments	5		, , , ,	<u> </u>	90.		
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		2.0	2.4	- c	0.4		
Da	column (B))	10		,34	1,6	94.		
Pa	rt XII Financial Statements and Reporting					77		
	Check if Schedule O contains a response or note to any line in this Part XII					X		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				Yes	No		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.							
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?							
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?			2b	X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,						
	consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,						
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X			
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin		į					
	Act and OMB Circular A-133?	-		За		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ed audit						

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047

Open to Public Inspection

NORTH CAROLINA HIGH SCHOOL ATHLETIC **Employer identification number** Name of the organization ASSOCIATION 56-0655425 INC. Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

56-0655425 Page 2

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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization'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.						
Sec	ction B. Total Support				_		
Cale	ndar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4						
8	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. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)	
_	organization, check this box and stop		_				.
	ction C. Computation of Publi					T T	
	Public support percentage for 2021 (li					14	<u>%</u>
	Public support percentage from 2020					15	. %
16a	33 1/3% support test - 2021. If the contract test - 2021 is the contract test - 2021 i						
	stop here. The organization qualifies		-				
D	33 1/3% support test - 2020. If the c						. —
170	and stop here. The organization quali					and line 14 is 10%	
1/a	10% -facts-and-circumstances test						
	and if the organization meets the facts			=		_	▶ □
ı.	meets the facts-and-circumstances test	-	-	*	-	17a, and line 15 is	
O	10% -facts-and-circumstances test	_					1U70 UI
	more, and if the organization meets the organization meets the facts-and-circu		*		•		▶ □
10	•						\
10	Private foundation. If the organizatio	n did not check a	DUX UIT IIITE TO, TO	a, 100, 17a, 01 171	o, check this box a	ina see instructions	·

Schedule A (Form 990) 2021

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

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

0	qualify under the tests listed b	elow, please comp	lete Part II.)				
	ction A. Public Support	ı				Γ	_
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	0074604	0045054	222242		4=====	
	include any "unusual grants.")	3274621.	3247971.	3202140.	2131416.	1756897.	13613045.
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	2259012.	2341691.	1956312.	1191405.	1800444.	9548864.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization'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	5533633.	5589662.	5158452.	3322821.	3557341.	23161909.
7a	Amounts included on lines 1, 2, and		400 000	205 222		1 2 2 2 2 2 2	1041001
b	3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that	381,992.	130,000.	397,339.	202,000.	130,000.	1241331.
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c	Add lines 7a and 7b	381,992.	130,000.	397,339.	202,000.	130,000.	1241331.
	Public support. (Subtract line 7c from line 6.)				, , , , , ,		21920578.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6	5533633.	5589662.	5158452.	3322821.	3557341.	23161909.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	753,593.	935,084.	871,916.	954,575.	699,307.	4214475.
b	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975	753,593.	935,084.	871,916.	954,575.	699,307.	4214475.
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	755,595.	935,064.	871,910.	954,575.	699,307.	4214475.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	6287226.	6524746.	6030368.	4277396.	4256648.	27376384.
14	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third,	fourth, or fifth tax y	ear as a section 5	01(c)(3) organization	on,
	check this box and stop here						
Sec	tion C. Computation of Publi						
15	Public support percentage for 2021 (I	ine 8, column (f), d	ivided by line 13, o	olumn (f))		15	80.07 %
16	Public support percentage from 2020					16	79.98 %
Sec	ction D. Computation of Inves	tment Income	Percentage			_	
17	Investment income percentage for 20)21 (line 10c, colun	nn (f), divided by li	ne 13, column (f))		17	15.39 <u>%</u>
18	Investment income percentage from	2020 Schedule A,	Part III, line 17			18	14.20 %
19a	33 1/3% support tests - 2021. If the					3 1/3%, and line 1	
	more than 33 1/3%, check this box ar						▶ 🔽
b	33 1/3% support tests - 2020. If the line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	on did not check a	box on line 14, 19a	a, or 19b, check th	is box and see ins	tructions	

132023 01-04-22

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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 on 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 on 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? 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.)

	Yes	No
1		
2		
3a		
3b		
3с		
4-		
4a		
4b		
4c		
5a		
5b		
5c		
6		
0		
7		
8		
9a		
9b		
- 2		
0-		
9c		
10a		
100		
401		
10b		
ıle A (Forn	n 990)	2021

Pa	rt IV Supporting Organizations (continued)			-3
. u	Continued)		Yes	No
44	Has the examination accepted a gift or contribution from any of the following persons?		162	NO
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
а	11c below, the governing body of a supported organization?	11a		
h		11b		
	A family member of a person described on line 11a above? A 25% controlled entity of a person described on line 11a or 11b above?	I ID		
·	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	11c		
Sec	<u>detail in</u> Part VI. tion B. Type I Supporting Organizations	110		
	Mon 21 Type I capper and city and city		Yes	No
1	Did the governing hady, members of the governing hady officers eating in their official cancelly, or membership of one or		162	NO
•	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	1		
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported	•		
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		
Sec	supervised, or controlled the supporting organization. tion 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		163	140
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	tion 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		100	110
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	-		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No." explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
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	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	struction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
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	3b		1

Schedule A (Form 990) 2021 ASSOCIATION, INC.

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

1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust on	Nov. 20, 1970 (explain in F	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must of		·	
Sect	ion 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		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
_3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
_4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	integrat	ed Type III supporting organ	nization (see
	instructions).			

Schedule A (Form 990) 2021

Section D - Distributions	Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continu	ued)	<u>v</u>
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exemptives assets 4 Amounts paid to acquire exemptives assets 5 Outlified set-aside amounts (price plan paid to the paid to	Secti	on D - Distributions				Current Year
organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 Outsided set-aside amounts (prior IRS approval required - provide details in Part VI) 5 Outsided set-aside amounts (prior IRS approval required - provide details in Part VI) 5 Outsided set-aside amounts (prior IRS approval required - provide details in Part VI) 5 Outsided details in Part VI). See instructions to which the organization is responsive (provide details in Part VI). See instructions to which the organization is responsive (provide details in Part VI). See instructions 9 Distributable amount for 2021 from Section C, line 6 10 Line 8 amount divided by line 9 amount (i) (ii) (iii) Section E - Distributable amount for 2021 from Section C, line 6 2 Underdistributions, if any, for years prior to 2021 freason-abit cause required - explain in Part VI). See instructions. 3 Excess distributions arryover, if any, to 2021 a From 2016 b From 2017 c From 2018 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2021 distributable amount c Remainder, Subtract lines 3g, 3h, and 3h from line 3f. Distributable amount c Remainder, Subtract lines 3g, 3h, and 3h from line 3f. Part VI, See instructions, and 4b from line 4. Remainder, Subtract lines 3g, and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. 6 Remaining underdistributions for years prior to 2021, if any, subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2022. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2019 d Excess from 2019 d Excess from 2019 d Excess from 2019	1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt use assets 5 Qualified set aside amounts (prior IRS approval required - provide details in Part VI) 5 Other distributions (eleacribe in Part VI). See instructions. 6 Other distributions (eleacribe in Part VI). See instructions. 7 Total annual distributions. Add lines 1 through 6. 7 Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 9 Distributable amount for 2021 from Section C, line 6 10 Line 8 amount divided by line 9 amount 11 (ii) (iii) Underdistributions Pre-2021 1 Distributable amount for 2021 from Section C, line 6 2 Underdistributions, if any, for years prior to 2021 (resonable cause required - applian in Part VII). See instructions. 3 Excess distributions carryover, if any, to 2021 5 From 2016 6 From 2017 7 From 2018 7 From 2019 9 From 2018 9 Applied to underdistributions of prior years 1 Applied to 2021 distributable amount 1 Carryover from 2018 not applied (see instructions) 1 Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 1 Applied to 2021 distributable amount 2 Remaining underdistributions of prior years 2 Applied to underdistributions for years prior to 2021, if any, Subtract lines 3g and 4a from line 4. 5 Remaining underdistributions for years prior to 2021, if any, Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VII. See instructions. 6 Remaining underdistributions for years prior to 2021, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VII. See instructions. 7 Excess from 2019 2 Excess from 2019 3 Excess from 2019 5 Excess from 2019 5 Excess from 2019	2	Amounts paid to perform activity that directly furthers exemp				
4 Amounts paid to acquire exempt use assets 5 Qualified set aside amounts (prior IRS approval required - provide details in Part VI) 5 6 Other distributions (assenble in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 Total annual distributions. Add lines 1 through 6. 9 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 9 Distributable amount for 2021 from Section C, line 6 9 10 Line 8 amount divided by line 9 amount (i) (ii) (iii) (iv) (iv) (iv) (iv) (iv)		organizations, in excess of income from activity	2			
5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 6 6 Other distributions (describe in Part VI). See instructions. 6 7 7 Total annual distributions. Add lines 1 through 6 . 7 7 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 8 9 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 9 9 10 Line 8 amount divided by line 9 amount 10 10 (ii) Underdistributions (see instructions) (Excess Distributions (Pre-2021 Individed by line 9 amount for 2021 from Section C, line 6 2 Underdistributions, if any, for years prior to 2021 feasonable cause required - applican in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2021 a From 2016 From 2017 C From 2018 (a From 2018 C From 2018 C From 2019 C From 2016 not applied (see instructions) D From 2017 C From 2018 C From 2019 C From 2016 not applied (see instructions) D From 2017 C From 2018 C From 2019 C From 2018 C From 2019 C From 2018 C From 2018 C From 2019 C From 2018 C From 2019 C From 2018 C From 2019 C From 2019 C From 2018 C From 2019 C From 2019 C From 2019 C From 2020 C From	3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
6 Other distributions (describe in Part VI). See instructions. 7 Total annual distributions. Add lines 1 through 6. 9 Distributions to attentive supported organizations to which the organization is responsive (gravide details in Part VI). See instructions. 8 Distributions to attentive supported organizations to which the organization is responsive (gravide details in Part VI). See instructions. 8 Distributable amount for 2021 from Section C, line 6 9 Distribution Allocations (see instructions) 9 Distributable amount for 2021 from Section C, line 6 1 Underdistributions (in I) (ii) (iii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiiii) (iiii) (iiiii) (iiiiiiii	4	Amounts paid to acquire exempt-use assets			4	
7 Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which the organization is responsive (paradiac details in Part VI). See instructions. 9 Distributable amount for 2021 from Section C, line 6 10 Line 8 amount divided by line 9 amount 10 (ii) Section E - Distribution Allocations (see instructions) 10 Distributable amount for 2021 from Section C, line 6 2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2021 5 From 2016 6 From 2017 7 From 2018 7 From 2019 8 From 2020 9 Applied to underdistributions of prior years 1 Applied to 2021 distributable amount 1 Carryover from 2016 for applied (see instructions) 1 Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2021 from Section D, line 7: 9 Sa Applied to underdistributions of prior years 1 Applied to 2021 distributable amount 2 Carryover from 2016 for applied (see instructions) 3 Excess distributions or prior years 4 Applied to 2021 distributable amount 5 Remaining underdistributions of prior years 5 Applied to underdistributions of prior years 5 Applied to 2021 distributable amount 5 Remaining underdistributions for years prior to 2021, if 2 any. Subtract lines 3g and 4 from line 2. For result greater than 2ero, explain in Part VI. See instructions. 6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 7: 6 Excess from 2017 6 Excess from 2017 7 Excess from 2017 7 Excess from 2017 7 Excess from 2017 7 Excess from 2018 7 Excess from 2019 8 Excess from 2019 9 Excess from 2020	5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 1 Distributable amount for 2021 from Section C, line 6 9 9 10 Line 8 amount divided by line 9 amount 10 (ii) (iii)	6	Other distributions (describe in Part VI). See instructions.			6	
(proteide details in Part VI). See instructions. 9 Distributable amount for 2021 from Section C, line 6 10 Line 8 amount divided by line 9 amount (i) (ii) (iii)	7	Total annual distributions. Add lines 1 through 6.			7	
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8 Breakdown of line 7: a Excess from 2017 b Excess from 2018 c Excess from 2019 d Excess from 2020	7	-				
a Excess from 2017 b Excess from 2018 c Excess from 2019 d Excess from 2020	8					
b Excess from 2018 c Excess from 2019 d Excess from 2020	a					
c Excess from 2019 d Excess from 2020						
d Excess from 2020						
e Excess from 2021						

Schedule A (Form 990) 2021

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

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

	section 50 f(c)(4), (5), or (6) organiza				
Nam	e of organization NORTH C	AROLINA HIGH SCH	OOL ATHLETIC	Emp	loyer identification number
	ASSOCIA	TION, INC.			56-0655425
Pa	rt I-A Complete if the org	janization is exempt und	der section 501(c)	or is a section 527 or	ganization.
2 3	Provide a description of the organize Political campaign activity expenditive Volunteer hours for political campa	tures		▶ \$	
		·		·	
	Enter the amount of any excise tax				
	Enter the amount of any excise tax				
	If the organization incurred a section				
	Was a correction made?				Yes No
	If "Yes," describe in Part IV. rt I-C Complete if the org	anization is exempt und	der section 501(c)	except section 501(c)(3)
	Enter the amount directly expended	-			
	Enter the amount of the filing organ				·
	exempt function activities		•		1
	Total exempt function expenditures				
	line 17b		,		.
	Did the filing organization file Form				
	Enter the names, addresses and er				
	made payments. For each organiza			-	
	contributions received that were pr	omptly and directly delivered to	a separate political orga	anization, such as a separat	e segregated fund or a
	political action committee (PAC). If	additional space is needed, pro	vide information in Part	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990) 2021

LHA

132041 11-03-21

Part II-A Complete if the organ	nization is exer	npt under section	n 501(c)(3) and file	d Form 5768 (ele	ection under
expenses, and share	of excess lobbying		n Part IV each affiliated	group member's nam	ne, address, EIN,
Limits	on Lobbying Expe			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	nce public opinion (grassroots lobbying)			
b Total lobbying expenditures to influen	nce a legislative boo	dy (direct lobbying) .			
c Total lobbying expenditures (add line	s 1a and 1b)				
d Other exempt purpose expenditures					
e Total exempt purpose expenditures (
f Lobbying nontaxable amount. Enter					
If the amount on line 1e, column (a) or (bying nontaxable am			
Not over \$500,000		the amount on line 1e.			
Over \$500,000 but not over \$1,000,0 Over \$1,000,000 but not over \$1,500		00 plus 15% of the exc 00 plus 10% of the exc	1		
Over \$1,500,000 but not over \$1,500		00 plus 10% of the exce	1		
Over \$17,000,000	\$1,000	•	33 0701 \$1,000,000.		
	1 4.,555	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
g Grassroots nontaxable amount (enter h Subtract line 1g from line 1a. If zero of i Subtract line 1f from line 1c. If zero of j If there is an amount other than zero	or less, enter -0- r less, enter -0- on either line 1h or		ation file Form 4720		Vec No
reporting section 4911 tax for this ye		eraging Period Under	Section 501/h)		Yes No
(Some organizations tha	t made a section 5		have to complete all o	f the five columns b	elow.
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2021

Schedule C (Form 990) 2021

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(2	a)	(i	o)
of the	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?		X		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
	Media advertisements?		X		
	Mailings to members, legislators, or the public?		X		
	Publications, or published or broadcast statements?		X		
	Grants to other organizations for lobbying purposes?		X		
	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		63	3,252.
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х		•
	Other activities?		X		
	Total. Add lines 1c through 1i			63	3,252.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х		
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), section	1 501(c)(s	5), or sec	tion	
	501(c)(6).	` ^	,,		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
	t III-B Complete if the organization is exempt under section 501(c)(4), section	1 501(c)(5	5). or sec	tion	<u> </u>
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "		• •		3, is
	answered "Yes."		` ,	•	
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	al			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year		•		
	Total		I		
3			۱ 🛕		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Par				I	
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list): Part II-	A. lines 1 a	nd 2 (See	
	actions); and Part II-B, line 1. Also, complete this part for any additional information.	,,	,	= (000	
	RT II-B, LINE 1, LOBBYING ACTIVITIES:				
THE	ASSOCIATION PAID \$63,252 (NO FEDERAL OR STATE FUND	s) FOF	R LOBB	YING	
		_ ,			
ACI	TIVITIES TO THE LONGMIRE GROUP LLC, AND RANDOLPH CLO	UD ANI)		
ASS	SOCIATES, DURING FY2021-22.				
THE	PURPOSE OF THESE LOBBYING ACTIVITIES IS AS FOLLOWS	:			

Schedule C (Form 990) 2021

Part I	V Supple	mental	Inform	ation (continu	ued)					
<u>- TO</u>	ASSIST	WITH	ANY	TOPICAL	LEGISLATIVE	ISSUES	THAT	ARISE	RELATED	TO
HIGH	SCHOOL	ATHL	ETIC	5.						

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

NORTH CAROLINA HIGH SCHOOL ATHLETIC ASSOCIATION, INC.

Employer identification number 56-0655425

Schedule D (Form 990) 2021

Pai			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recrea	ation or education) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation of	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic structu	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel		
	year ▶		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	servation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	tion easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170((h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement and
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statement	ents that describes the
D :	organization's accounting for conservation easements.	CARL Historia de la Transca de la Co	la de Circila de Assacla
Pai	t III Organizations Maintaining Collections of		ther Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 95	·	
	of art, historical treasures, or other similar assets held for put	, ,	'
	service, provide in Part XIII the text of the footnote to its finar		
b	If the organization elected, as permitted under FASB ASC 95	· ·	
	art, historical treasures, or other similar assets held for public	e exhibition, education, or research in furth	nerance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
			·
2	If the organization received or held works of art, historical tre		l gain, provide
	the following amounts required to be reported under FASB A	_	
а	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		> \$

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

	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Oth	ner Si			Contir		age Z
3	Using the organization's acquisition, accession							(COITEI)	<u>ucu</u>	
	collection items (check all that apply):	,	,	3	3					
а	Public exhibition	d	Loan or exc	hange program						
b	Scholarly research	е	Other	3 1 3						
С	Preservation for future generations	_								
4	Provide a description of the organization's co	llections and explain	how they further th	e organization's ex	xempt	purpos	se in Part	XIII.		
5	During the year, did the organization solicit or									
	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arrang									
	reported an amount on Form 990, Par		3				,	,		
	Is the organization an agent, trustee, custodia	an or other intermedia	ary for contributions	or other assets n	ot inclu	uded				
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII							_		_
	, ,	•	J					Amount	t	
С	Beginning balance					1c				
	Additions during the year				- 1	1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Fo							Yes		No
	If "Yes," explain the arrangement in Part XIII.				-					
Par	t V Endowment Funds. Complete it	f the organization ans	wered "Yes" on Fo	rm 990, Part IV, lir	ne 10.					
	·	(a) Current year	(b) Prior year	(c) Two years bacl		Three y	ears back	(e) Four	years	back
1a	Beginning of year balance	23,654,767.	23,931,954.	23,779,866	5.	25,1	94,992.	23,	807,	334.
b	Contributions	52,309.	30,452.	835,310).	1,0	22,992.	. 1,029,641.		641.
С	Net investment earnings, gains, and losses	-2,856,543.	5,783,899.	580,052	2.	1,2	29,589.	1,345,533.		
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	1,402,250.	6,091,538.	1,263,274	١.	3,6	67,707.		987,	516.
f	Administrative expenses						-			
g	End of year balance	19,448,283.	23,654,767.	23,931,954	١.	23,7	79,866.	25,	194,	992.
2	Provide the estimated percentage of the curr	ent year end balance	(line 1g, column (a)) held as:	•					
а	Board designated or quasi-endowment	18.0000	%	,						
b	Permanent endowment ► 82.0000	%	_							
С		 %								
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.								
За	Are there endowment funds not in the posses	ssion of the organizat	ion that are held ar	d administered for	r the or	rganiza	ation			
	by:								Yes	No
	(i) Unrelated organizations							3a(i)		X
	(ii) Related organizations							3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	d on Schedule R?					3b		
4	Describe in Part XIII the intended uses of the		ment funds.							
Pai	t VI Land, Buildings, and Equipm	ent.								
	Complete if the organization answered	d "Yes" on Form 990,	Part IV, line 11a. S	ee Form 990, Part	X, line	10.				
	Description of property	(a) Cost or ot	her (b) Cost	or other (c) Accu	mulate	ed	(d) Bool	k valu	е
		basis (investm	ent) basis	(other)	depred	ciation				
1a	Land									
	Buildings			5,512.		0,58				30.
С	Leasehold improvements			1,524.		2,9:		828	8,6	06.
d	Equipment		38	3,684.	25	0,60	59.			15.
ее	Other		11	4,818.	8	9,0'				41.
	. Add lines 1a through 1e. (Column (d) must e						•	1,182	2.2	92.

Part VII Investments - Other Securities. Complete if the organization answered "Yes" or		11b See Form 990 Part X line 12	Tage (
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1) Financial derivatives	()		, , , , , , , , , , , , , , , , , , , ,
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" or		_	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	- F 000 B+ IV I'	Add One Form COO Book V Proc 45	
Complete if the organization answered "Yes" or		11d. See Form 990, Part X, line 15.	(h) Daak walee
· · ·	escription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	45.		
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	15.)	>	
Complete if the organization answered "Yes" or	n Form 990 Part IV line	11e or 11f See Form 990 Part Y line 25	
(-) Described as a Charlette			(b) Book value
(1) Federal income taxes			(S) DOON VAIGO
(2) AGENCY FUNDS			76,907
1=7			10,501
(3)			
(4)			
(5)			
(6) (7)			
• •			
(8)			
(9)	05.)	<u> </u>	76,907
Total. <i>(Column (b) must equal Form 990, Part X, col. (B) line a</i> 2. Liability for uncertain tax positions. In Part XIII, provide t	•	o the examination's financial statements the	

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organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2021

	.,			
che			0655425 Page	
Pai	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1	Total revenue, gains, and other support per audited financial statements	1	-738,829	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments 2a -6,321,089.			
b	Donated services and use of facilities 2b 88,915.			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d	2e	-6,232,174	
3	Subtract line 2e from line 1	3	5,493,345	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 232, 823.			
b	Other (Describe in Part XIII.)			
С	Add lines 4a and 4b	4c	232,823	-
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	5,726,168	
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per F	Retur	n.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
4	Total augustion and leaves you condited financial atotacounts		5 460 636	

Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 88,915. a Donated services and use of facilities 2a **b** Prior year adjustments 2b 2c Other (Describe in Part XIII.) 88,915. Add lines 2a through 2d 5,371,721. Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: 232.823. a Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIII.) 232,823. c Add lines 4a and 4b 4c 5,604,544. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

Part XIII Supplemental Information.

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

PART V, LINE 4:

THE ORGANIZATION'S ENDOWMENTS WERE ESTABLISHED: 1) TO PRESERVE AND CREATE OPPORTUNITIES FOR THOUSANDS OF STUDENT-ATHLETES INVOLVED IN THE ASSOCIATION'S PROGRAMS, 2) TO PROVIDE A VEHICLE FOR NORTH CAROLINIANS TO BECOME ACTIVELY INVOLVED IN SUPPORTING WHOLESOME PROGRAMS THAT INSTILL LIFELONG VALUES IN OUR YOUNG CITIZENS, AND 3) TO ENSURE THAT THE ASSOCIATION CAN CONTINUE TO PROVIDE QUALITY PROGRAMS AND SERVICES TO ITS MEMBERSHIP, INCLUDING OLYMPIC (NON-REVENUE) SPORTS, CLASSIFIED CHAMPIONSHIPS, AND SPECIAL PROGRAMS WITHOUT IMPLEMENTING PARTICIPATION FEES (A.K.A. PAY-TO-PLAY) AT THE PLAYOFF LEVEL.

Schedule D (Form 990) 2021

NORTH CAROLINA HIGH SCHOOL ATHLETIC

Schedule D (Form 990) 2021	ASSOCIATION,	INC.	56-0655425	Page 5
Schedule D (Form 990) 2021 Part XIII Supplemental Inform	mation (continued)			
	(continued)			

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

2021
Open to Public

Inspection

NORTH CAROLINA HIGH SCHOOL ATHLETIC **Employer identification number** Name of the organization 56-0655425 ASSOCIATION, INC. Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection X Yes criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2021

Schedule I (Form 990) 2021 ASSOCIATION	N, INC.				56-0655425	Page
Part III Grants and Other Assistance to Domestic Inc Part III can be duplicated if additional space is r		organization answe	ered "Yes" on Form 9	990, Part IV, line 22.		
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash	assistance
					SCHOLARSHIPS ARE GIVEN	TO
					SELECTED STUDENTS TO AS	SIST
					WITH EXPENSES RELATED T	.O
STUDENT SCHOLARSHIPS	35	68,500.	0.		POST-SECONDARY EDUCATION	N AND
Part IV Supplemental Information. Provide the inform	nation required in Part I, line	e 2; Part III, column	ı (b); and any other ac	dditional information.		

(F) DESCRIPTION OF NON-CASH ASSISTANCE: SCHOLARSHIPS ARE GIVEN TO
SELECTED STUDENTS TO ASSIST WITH EXPENSES RELATED TO POST-SECONDARY
EDUCATION AND AMARDS TO CONCUES IN DECOMPTION OF MALES OF MALES
EDUCATION AND AWARDS TO COACHES IN RECOGNITION OF THEIR OUTSTANDING
CONTRIBUTIONS IN HIGH SCHOOL ATHLETICS. PAYMENTS TO SCHOOLS ARE
CALCULATED BASED ON PREDETERMINED FORMULAE, AND FUNDS ARE SPENT AT THE
agricol al. Diagramion
SCHOOLS' DISCRETION.

Schedule I (Form 990)

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

2021

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

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

NORTH CAROLINA HIGH SCHOOL ATHLETIC

ASSOCIATION, INC.

Employer identification number 56-0655425

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
	Any related organization?	5b		_X_
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		<u> </u>
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958.6(c)?	۱۵		

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

Schedule J (Form 990) 2021

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 of W-2 and/or 1099-MISC and/or 1099-NEC compensation			other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title	(A) Name and Title		(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) QUE TUCKER	(i)	164,185.	0.	0.	12,724.	2,780.	179,689.	0.
COMMISSIONER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
-	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(II)						<u> </u>	

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 M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

NORTH CAROLINA HIGH SCHOOL ATHLETIC ASSOCIATION, INC.

Employer identification number 56-0655425

Pai	rt I Types of Property				•			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermini	_	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
• •	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (TEAM SUPPLIES)	X	4	74,203.	ESTIMATED F	MV		
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organization	zation during	the tax year for c	ontributions				
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29				
							Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least three years from the date	e of the initia	l contribution, and	which isn't required to be us	sed for			
	exempt purposes for the entire holding period	?				30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	oolicy that re	quires the review	of any nonstandard contribut	ions?	31		Х
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash				
	contributions?					32a		Х
b	If "Yes," describe in Part II.				·			
33	If the organization didn't report an amount in c	olumn (c) foi	a type of property	for which column (a) is chec	cked,			
	describe in Part II.							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2021

NORTH CAROLINA HIGH SCHOOL ATHLETIC

Schedule M	(Form 990) 2021 ASSOCIATION, INC.	56-0655425	Page 2
Part II	(Form 990) 2021 ASSOCIATION, INC. Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33	and whether the organiza	tion
	is reporting in Part I, column (b), the number of contributions, the number of items received, or a com	hingtion of both Alon com	liori Noto
	is reporting in Part 1, countries (b), the number of contributions, the number of items received, or a contribution is the number of items received, or a contribution is the number of items received, or a contribution is the number of items received, or a contribution is the number of items received, or a contribution is the number of items received.	bination of both. Also comp	Diete
	this part for any additional information.		
-			

Schedule M (Form 990) 2021

132142 11-17-21

SCHEDULE 0 (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

Inspection

OMB No. 1545-0047

Name of the organization

NORTH CAROLINA HIGH SCHOOL ATHLETIC ASSOCIATION, INC.

Employer identification number 56-0655425

,
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PROGRAMS IN NORTH CAROLINA THAT SUPPORT AND ENRICH THE EDUCATIONAL
EXPERIENCE OF STUDENTS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE ADMINISTRATION OF THE STATE'S INTERSCHOLASTIC EDUCATION-BASED
ATHLETICS PROGRAMS FOR ITS MEMBER HIGH SCHOOLS IN NC THROUGH A
MEMORANDUM OF UNDERSTANDING BETWEEN THE NCHSAA AND NC STATE BOARD OF
EDUCATION; THE EDUCATION AND TRAINING OF GAME OFFICIALS OF SCHOOL
ATHLETIC EVENTS; THE ADMINISTRATION OF EDUCATIONAL PROGRAMS FOR HIGH
SCHOOL STUDENTS, COACHES, AND ATHLETIC ADMINISTRATORS.
FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:
IN 2021-2022, THE NCHSAA ABSORBED COSTS ASSOCIATED WITH STUDENT
SERVICES PROGRAMMING INTO THE ANNUAL OPERATING BUDGET. PREVIOUSLY,
FUNDING HAD BEEN RECEIVED FROM THE DEPARTMENT OF HEALTH AND HUMAN
SERVICES.
FORM 990, PART VI, SECTION B, LINE 11B:
THE ORGANIZATION'S FORM 990 IS REVIEWED PRIOR TO FILING BY THE
ORGANIZATION'S DIRECTOR OF BUSINESSS AND FINANCE AND COMMISSIONER.
FORM 990, PART VI, SECTION B, LINE 12C:
DURING THE ANNUAL BOARD OF DIRECTORS MEETING, THE DIRECTORS ARE ASKED IF
THEY HAVE CONFLICTS OF INTEREST THAT WOULD PREVENT THEM FROM BEING ON THE
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2021

Schedule O (Form 990) 2021

Name of the organization

NORTH CAROLINA HIGH SCHOOL ATHLETIC

ASSOCIATION, INC.

Page 2

Employer identification number

56-0655425

BOARD DURING THE UPCOMING YEAR AND MUST SIGN A CONFLICT OF INTEREST FORM.

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

NEW HIRE SALARIES AND PAY INCREASES ARE REVIEWED BY THE FINANCE AND
PERSONNEL COMMITTEE AND APPROVED BY THE BOARD OF DIRECTORS. A SALARY

SCHEDULE WAS DEVELOPED DURING THE 2019-20 YEAR BY OUTSIDE HUMAN RESOURCE
CONSULTATION AND COMPARATIVE DATA WAS USED BASED ON OTHER STATE ASSOCIATION
SALARIES FOR COMPRABLE WORK, SALARIES WITHIN THE LOCAL AREA, SALARIES FOR
NONPROFITS AND SALARIES FOR ORGANIZATIONS OF SIMILAR SIZE. SALARY RANGES
WERE ADJUSTED IN 2022 PER RECOMMENDATION BY THE OUTSIDE HUMAN RESOURCE
CONSULTANT TO ACCOUNT FOR RISING COSTS OF LIVING.

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

THE ORGANIZATION MAKES ITS FORM 1023 AND 990 AVAILABLE FOR PUBLIC

INSPECTION UPON REQUEST AT THEIR OFFICE. THE ORGANIZATION PROVIDES COPIES

VIA MAIL TO INTERESTED PARTIES AND A LINK TO 990S IS AVAILABLE ON THE

NCHSAA WEBSITE.

FORM 990, PART XII, LINE 2C

THE FINANCE COMMITTEE HAS OVERSIGHT RESPONSIBILITY FOR THE FINANCIAL STATEMENTS. THIS HAS NOT CHANGED FROM THE PRIOR YEAR.

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Type or Taxpayer identification number (TIN) NORTH CAROLINA HIGH SCHOOL ATHLETIC print 56-0655425 ASSOCIATION, INC. File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your PO BOX 3216 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions CHAPEL HILL, NC 27515 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Is For Code Code Form 990 or Form 990-EZ Form 1041-A 01 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) MARILYN TUCKER • The books are in the care of ▶ 222 FINLEY GOLF COURSE ROAD - CHAPEL HILL, NC 27517 Telephone No. \triangleright (919)240-7401 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box 🕨 📉 and attach a list with the names and TINs of all members the extension is for. MAY 15, 2023 ____ , to file the exempt organization return for I request an automatic 6-month extension of time until the organization named above. The extension is for the organization's return for: calendar year or ightharpoonup X tax year beginning $_JUL$ 1, 2021 $_$, and ending $_$ \mathtt{JUN} $\,\,30$, $\,\,2022$ Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)

MAIL TO: DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE CENTER
OGDEN, UT 84201-0045

123841 01-12-22