Form <b>990</b>			Return of Organization Exempt From	Income Tay	OMB No. 1545-0047				
Forn	чЯ	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (		2021				
1 011			Do not enter social security numbers on this form as it ma						
Depai Intern	tment al Reve	of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and the late		Open to Public Inspection				
	A For the 2021 calendar year, or tax year beginning JUL 1, 2021 and ending JUN 30, 2022								
B Check if C Name of organization D Employer identification									
	Addre	BAR-	MA, INC.						
	]chang		usiness as RAISING A READER MA	80-029789	8				
	]chang Initial	U	and street (or P.O. box if mail is not delivered to street address) Room/su		5				
	_returr ]Fiṇal	3 90	HOOL STREET 3		-2665				
	Jreturr termi ated	n-	pwn, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	1,627,098.				
	Amer Amer		ON, MA 02108	H(a) Is this a group retu					
	Appli dtion		nd address of principal officer: CHRISTINE WARD	for subordinates?	Yes 🔀 No				
· · ·	pend		AS C ABOVE	H(b) Are all subordinates inclu					
ТТ	ay.ey	empt status:		If "No," attach a lis					
			RAISINGAREADERMA.ORG	H(c) Group exemption r					
				ear of formation: 2009 M S					
	rt I	Summary			ale et legal definient.				
	1	,	e the organization's mission or most significant activities: EARLY L	TERACY PROGRAM	M				
JCe	•		ING FAMILIES OF YOUNG CHILDREN IN HIGH						
nai	2		x      if the organization discontinued its operations or disposed of m						
ver	3		ing members of the governing body (Part VI, line 1a)	1 1	15				
ß	4		ependent voting members of the governing body (Part VI, line 1a)		15				
s &	5		of individuals employed in calendar year 2021 (Part V, line 2a)		14				
Activities & Governance	6		of volunteers (estimate if necessary)		39				
tiv	-				0.				
Ă			d business revenue from Part VIII, column (C), line 12 business taxable income from Form 990-T, Part I, line 11		<u> </u>				
	U	Net unrelated		Prior Year	Current Year				
	0	Contributions	and grants (Dart ) (III, line 1b)	1,248,911.	1,483,460.				
anı	8		and grants (Part VIII, line 1h)	41,263.	57,092.				
Revenue	9	•	ce revenue (Part VIII, line 2g)	67.	57,052:				
Re	10		come (Part VIII, column (A), lines 3, 4, and 7d)	25,730.	7,809.				
	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,315,971.	1,548,411.				
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.	<u> </u>				
	13		nilar amounts paid (Part IX, column (A), lines 1-3)	0.	<u> </u>				
	14	0	to or for members (Part IX, column (A), line 4)	850,137.	870,492.				
ses	15	Salaries, other	compensation, employee benefits (Part IX, column (A), lines 5-10)	52,152.	69,213.				
en	16a	Professional fi	andraising fees (Part IX, column (A), line $11e$ ) ng expenses (Part IX, column (D), line $25$ ) $\blacktriangleright$ 276, 409.	52,152.	09,213.				
Expense		l otal fundraisi	ng expenses (Part IX, column (D), line 25) $\blacktriangleright$ 270, 409.	267,638.	286,187.				
	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)	1,169,927.	1,225,892.				
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)						
<u>د</u> ي	19	Revenue less	expenses. Subtract line 18 from line 12	146,044.	322,519.				
Net Assets or Fund Balances	•-	<b>_</b>	-	Beginning of Current Year	End of Year				
sse Bala	20	Total assets (F		1,166,845.	1,314,582.				
et A ind	21		(Part X, line 26)	287,246.	112,464.				
	22		fund balances. Subtract line 21 from line 20	879,599.	1,202,118.				
	rt II	-							
	•		declare that I have examined this return, including accompanying schedules and stat		nowledge and belief, it is				
true,	corre	ct, and complete.	Declaration of preparer (other than officer) is based on all information of which prepa	irer has any knowledge.					

Sign Here	Signature of officer CHRISTINE WARD, EXECU: Type or print name and title	TIVE DIRECTOR	Date							
Paid	Print/Type preparer's name SANDRA M. BROWN, CPA	Preparer's signature <b>SANDRA M. BROWN</b> ,	Date Check PTIN CPA11/09/22 self-employed P01614103							
Preparer	Firm's name SMITH, SULLIVAN	& BROWN, P.C.	Firm's EIN 🕨 43-1985162							
Use Only	Firm's address 80 FLANDERS ROA									
	WESTBOROUGH, MA 01581 Phone no. (508) 871-7178									
May the II	May the IRS discuss this return with the preparer shown above? See instructions X Yes No									
132001 12-0	13200112-09-21LHAFor Paperwork Reduction Act Notice, see the separate instructions.Form 990 (2021)									

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2021) RAR-MA, INC.	80-0297898	Page <b>2</b>
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	RAISING A READER MASSACHUSETTS (RAR-MA) IS AN EVIDE		-
	LITERACY AND FAMILY ENGAGEMENT ORGANIZATION WITH A		<u> </u>
	THE LITERACY OPPORTUNITY GAP AMONG CHILDREN 0-6 IN		
	COMMUNITIES BY HELPING FAMILIES DEVELOP AND PRACTIC		
2	Did the organization undertake any significant program services during the year which were not listed		XNo
	prior Form 990 or 990-EZ?	Yes	LA No
	If "Yes," describe these new services on Schedule O.		XNo
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	services?Yes	LA No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program se		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocatio	ns to others, the total expenses,	and
	revenue, if any, for each program service reported.	F7	000
4a			092.)
	RAR-MA TEACHES PARENTS TO SHARE BOOKS WITH YOUNG CH		110
	THEIR LANGUAGE, LITERACY, COGNITIVE, AND SCHOOL REA		
	FOSTERS FAMILY ENGAGEMENT THROUGH PARENT OUTREACH,		
	TO CULTURALLY RELEVANT AND AGE APPROPRIATE BOOKS. C		LVEN
	BY 30 YEARS OF RESEARCH THAT SHOWS THE MOST SIGNIFI		
	IMPACTING A CHILD'S ACADEMIC SUCCESS IS BEING REGUI		
	PARENT OR OTHER PRIMARY ADULT CAREGIVER BEFORE STAF		
	RAR-MA IMPROVES ACADEMIC OUTCOMES FOR ALL CHILDREN,		
	LOW-INCOME CHILDREN, IMMIGRANTS, AND CHILDREN WHOSE		IS
	NOT ENGLISH. OUR GOAL IS TO END THE LITERACY OPPOR		
	HELPING FAMILIES DEVELOP HIGH-IMPACT READING ROUTIN		
	GROUND WORK FOR A LIFETIME OF LEARNING SUCCESS AND	PRODUCTIVE,	
4b	(Code:) (Expenses \$ including grants of \$	) (Revenue \$	)
4c	(Code:) (Expenses \$ including grants of \$	_ ) (Revenue \$	)
<u></u>			
4d	Other program services (Describe on Schedule O.)	N	
40	(Expenses \$ including grants of \$ ) (Revenue \$       Total program service expenses ►     858,567.	)	
<u>4e</u>	Total program service expenses ► 858,567.	CC	<b>990</b> (2021)
132002	2 12-09-21 SEE SCHEDULE O FOR CONTINUAT		(2021)

Form	990	(2021)

Form 990 (2021) RAR-MA, 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)?		х	
•	If "Yes," complete Schedule A	1 2	X	<u> </u>
2 3	Did the organization required to complete schedule b, schedule of contributors, see instructions	2	21	<u> </u>
3		3		x
4	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		
7	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			
Ũ	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,			37
	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? <i>If</i> "Yes," <i>complete Schedule D, Part III</i>	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			v
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	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	х	
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		X
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		X
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			v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	40		v
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i> . See instructions	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	.0		
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		X
	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

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 Form 990 (2021)
 RAR-MA, INC.

 Part IV
 Checklist of Required Schedules (continued)

22       Did the organization report more than 55.000 of grants or other assistance to or for domestic individuals on Part K, complex Schedule J, Part I and NIII       22         23       Did the organization answer "Yes" to Fart VII, Soction A, line 3, 4, or 5, about compensation of the organization's current and forms orfines, director, trustees, key employees, and highest compensated employee? If 'Yes,' complete Schedule J       23         24       Did the organization have a taxesempt bond issue with an outstanding principal amount of more than 5100,000 as of the last day of the year, intar van issue date December 31, 2002? If 'Yes,' answer lines 26th through 24d and complete Schedule J       24a       X         25       Did the organization mixet any proceeds of tax escent bonds beyond a temporary period exception?       24a       X         26       Did the organization mixet any non-schow account other than a refunding gestrow at any time during the year 10 delease any tax-sempt bonds?       24d       25a         26       Did the organization answer that it orgaged in an access benefit tarasaction with a disqualified person than prior year, and that the transaction during the year? If 'Yes,' complete Schedule L, Part I       25a       X         27       Z bid the organization acreas that no them reported on any of the organization ary payshes to any current or former direct, trustee, key employee, creator or founder, substantial contributor on 35% controlled entry of nonder, substantial contributor on mixet any moment of any of these spacence? If 'Yes,' complete Schedule L, Part IV.       26b       X         28       Wa				Yes	No
23       Ddt the organization answer 'Ver' to Part VII, Saction A, Iine 3, 4, or 5, abod compensation of the organization is current and former officing, directors, trustees, key employees, and highest compensated employees? // 'Ves, 'complete's Schedule // I' Ves, 'to onplete's Schedule // I' Ves, 'to Schedule // I' Ves, 'to onplete's Sc	22				
and former officers, directors, trustees, key employees, and highest compensated employees? <i>H</i> . "Yes," complete Schedule <i>J</i> .     23     X       24a     Did the organization have a tax exampt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year. It at vasis issued after. December 31, 2002? <i>H</i> "Yes," answer lines 24b through 24d and complete Schedule <i>K</i> . <i>H</i> No," go to line 25a.     24a     X       24b     Did the organization invist any proceeds of tax-exampt bonds beyond a temporary paried excaption?     24d     X       25a     Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?     24d     24d       25a     Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?     24d     25s       25a     Did the organization avar mout on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, ley employae, creator or founder, substantial contributor, or 35%, construct or dary annound on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, ley employae, creator or founder, apart selection committee mather, or to a 25%, construct or aphcable line interved or any fine trustee selectors?     26     X       27     Zid     Zid     Zid     Zid     Zid     Zid       27     Did the organization neoved or any of the organization commitse member, or to a 25%, conorbid e 24m (2, Part			22		X
Schedule J       23       X         44 ald day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.       X         45 Did the organization market any proceeds of tax exempt bonds beyond a temporary period exception?       24b         46 Did the organization market any proceeds of tax exempt bonds outstanding at any time during the year?       24d         47 Did the organization market any proceeds of tax exempt bonds outstanding at any time during the year?       24d         48 Did the organization and at as an "on behalf Of" issuer for bonds outstanding at any time during the year?       24d         49 Did the organization and at an adopting previous outstanding at any time during the year?       24d         40 Did the organization and that the rengation an access benefit tarnasction with a disqualified person during the year? If Yes," complete Schedule L, Part I       25a         41 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, trustes, key employee, creator or founder, substantial contibutor, or 35% controlled orthing or tarnity member of any of these person? If Yes," complete Schedule L, Part I       26b       X         42 Was the organization approved target or target and exceptions?       27 No       28       X         43 Old the organization previde a grant or other assistance to any current or former officer, director, trustes, key employee, creator or founder, substantial contribution? II       28a <td>23</td> <td></td> <td></td> <td></td> <td></td>	23				
24a DX the organization have a tax-exempt bond issue with an outstanding principal incount of more than \$100,000 as of the last day of the year, that was issue after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I, 17W or 1 go to line 25a.       24a       X         2b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       24a       X         2b Did the organization invest any proceeds of tax-exempt bonds. Dud the organization execution there than a refunding excreat any time during the year to defease any tax-exempt bonds?       24d       X         2b DX the organization invest as no behaft of issuer for bonds outstanding at any time during the year?       24d       X         2b DX the organization area as no behaft of issuer for bonds outstanding at any time during the year?       24d       X         2b DX the organization aware that it engaged in an excress benefit transaction with a disqualified person in a priory year, and that the transaction neopot any amount on Part X. line 5 or 22, for receivables from or payables to any current or form officing, directly, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of change. Receivables from or payables to any current or form officing, directly trustee, key employee, creator or founder, substantial contributor? If "Yes," complete Schedule L, Part IV.       26b       X         2b DX the organization provide a grant or other assistance to any current or form officing, directly trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection commute member. Or to a 35% controlled entity of a party of a bassistan					v
Is at day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete     24b     X       b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?     24b     24c       c Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?     24d     24d       c Did the organization analtain an escrow account other than a refunding acrow at any time during the year?     24d     24d       25a Section 507(c)(3), 507(c)(4), and 507(c)(2) organizations. Did the organization anage in an excess benefit transaction with a disqualified person during the year?     24d     25a       b Is the organization export 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 onthy or bank been reported on any of the assistance to any on these sparson? If "Yes," complete Schedule L, Part I     25b     X       27 Did the organization provide a grant or other assistance to any on these parsons? If "Yes," complete Schedule L, Part IN, instructions or papicable filting threshoids, comployee thereod, parts election or to a 35% controlled entity or annily member of any or these parsons? If "Yes," complete Schedule L, Part IN, instructions or papicable filting threshoids, complete Schedule L, Part IN, instructions and exceptions);     A current or forme officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IN, instructions and exceptions);     A current or forms officer, director, trustee, key employee, creator or founder, or substantial co			23		
Schedule K. If Yes," got b line 25a       24a       X         b Did the organization meantain an escrow account other than a refunding escrow at any time during the year to defease any tax-axampt bonds?       24b       24b         c Did the organization meantain an escrow account other than a refunding escrow at any time during the year' to defease any tax-axampt bonds?       24c       24c         25a       Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year' 1/ Yes, "complete Schedule L, Part I       25a       X         25a       Did the organization avare that it engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction near other encort of near officer. Girector, trustee, key employee, creator or founder, substantial combuch, or 35% controlled entity or founder, and theread, a grant selection committee member, or to a 35% controlled entity or founder, and theread, grant selection committee member, or to a 35% controlled entity or founder, substantial combuch, or a 53% controlled entity or founder, and theread, grant selection committee member, or to a 35% controlled entity or founder, and theread or any or these persons? If Yes, "complete Schedule L, Part I V         28       Was the organization review endered or family member of any or these persons? If Yes, "complete Schedule L, Part I V, instructions or applicable limp theredol, continuous, and cocreptiono;       2a       X         29       Did the organization review enderedon or family member of any or thoread schedul	24a				
b       Dd the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?       24b         c       Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?       24c         d       Did the organization at as an "on behalf of itsuer for bonds outstanding at any time during the year?       24d         25       Section 501(68), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction neaces that the maceaction with a disqualified person in a prior year, and that the transaction member of any of these persons? If 'Yes,' complete Schedule L, Part I       25b       X         20 bid the organization one themps of any of these persons? If 'Yes,' complete Schedule L, Part II.       26b       X         27 bid the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of ramily member of any of these persons? If 'Yes,' complete Schedule L, Part II.       27       X         28 Was the organization a party to a business transaction with an of the following parties (see the Schedule L, Part II.       28       X         29 bid the organization following parties (see the Schedule L, Part II.       28       X         29 bid the organization neceive more than 325.00 in non cash contributors? If 'Yes,' complete Schedule L, Part IV.       28       X					v
c       Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds?       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?       25a         25a       Section 501(c)(3), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?       25b         25a       X       Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       26       X         25       Did the organization provide grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, 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 IV       27       X         26       X       27       X       28       X         27       X       28       X       28       X         28       X					
any tax-sempt bonds?     24c       25a     Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?     25a       25a     Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 II "Yes," complete Schedule L, Part I     25a       25b     Ub the organization aware that engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction that no excess benefit transaction thas not been reported on any of thee organization's prior Forms 990 or 990-E27 II "Yes," complete Schedule L, Part I     25b       27b     Did the organization aware that contributor or goint dress persons 7I "Yes," complete Schedule L, Part II     26     X       27b     Did the organization approxip to a purso or the average in an excess benefit transaction with an ontip or the organization approxip to a business transaction with an organization approxip to a purso or the sole of 2, part 10 clociton committe member, or to a 55% controlled entity or namily member of any of these persons 7I "Yes," complete Schedule L, Part II     26     X       27b     Did the organization approxip to a business transaction with an organization approxip to a business transaction with a dischalled constructor? II     28     X       27b     Did the organization receive contributions of art, historical trassues, or other similar assets, or qualified conservation contributions? II "Yes," complete			240		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?       24d         25a Section 501(c)3), 501(c)4), 401 (c)4(3), 401	С				
25a       Section 501(c)(3), 501(c)(29) or ganizations. Duc the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I       25a       X         b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 900 or 900-E27. If "Yes," complete Schedule L, Part I       25b       X         26       Did the organization export any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of manify member of any of these persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization a party to a business transaction with one of the following parties (see the Schedule L, Part II)       27       X         28       Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part II)       28       X         29       Did the organization receive more than \$25,000 in non-cash contributions of the Schedule L, Part II       28a       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         29       Did the organization cell schedule A, Part II       28a       X         29       Did the organization neceive onorbituition sof an in, bioto					
transaction with a disqualified person during the year/ If "Yes," complete Schedule L, Part I       25a       X         b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization report Forms 990 or 990 E27 II "Yes," complete Schedule L, Part I       25b       X         26       Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity (including an employee thereof) or family member of any of these persons? II "Yes," complete Schedule L, Part II       28       X         28       Was the organization provide a grant or other assistance to any or these persons? II "Yes," complete Schedule L, Part II       27       X         29       A current or former officer, director, trustee, key employee, creator or founder, substantial contributor? II       28       X         20       A current or former officer, director, trustee, key employee, treator or founder, or substantial contributor? II       28       X         29       A tamily member of any individual described in line 28a? II "Yes," complete Schedule L, Part II       28       X         20       A discussion on one individuals and/or organization redeve contributions? II "Yes," complete Schedule L, Part II       28       X         30       Did the organization redeve contributions of at, historical treasures, or other			240		
b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization spiror Forms 900 or 900 cF2/1 "Yes," complete Schedule L, Part I       25b       X         26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       26       X         27 Did the organization approve thereof) or family member of any or these persons? If "Yes," complete Schedule L, Part III.       26       X         28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV.       28       X         28 A atmain member or any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28a       X         29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV.       28a       X         20 Did the organization receive contributions of an, historical thesaures, or other similar assets, or qualified consention or organization receive contributions of an, historical thesaures, or there similar assets, or qualified consention contributions? If "Yes," complete Schedule L, Part II.       28       X         20 Did the organization receive contributions of an, historical thesaures, or other similar assets, or qualified consention conortibutions? If "Yes," complete Schedule M.       30	25a		05-		v
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I     25b     X       26     Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of family member of any of these persons? If "Yes," complete Schedule L, Part II     26     X       27     Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or any of these persons? If "Yes," complete Schedule L, Part II.     27     X       28     Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part IV.     28a     X       29     D Af thering member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.     28a     X       20     Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part IV.     28a     X       29     Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule R, Part I     20     30     X       30     Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?// "Yes," co	h		25a		- 73
Schedule L, Part I       25b       X         26       Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? II 'Yes,' complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to any current or former, fulcer, 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? II 'Yes,' complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):       a       A current or former officer, director, trustee, key employee, creator or founder, substantial contributor? II 'Yes,' complete Schedule L, Part IV.       28a       X         28       M atmily member of any individual described in line 28a? II 'Yes,' complete Schedule L, Part IV.       28b       X         29       Did the organization receive contributions and/or organizations described in line 28a or 28D?If       ??       ??         29       Did the organization is exclamate, or dissorted and case operations? If 'Yes,' complete Schedule M.       20       X         30       Did the organization liquidate, terminate, or dissorte and case operations? If 'Yes,' complete Schedule M.       20       X         31       Did the organization sel, exchange, dispose o	D				
26       Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes, ' complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, or family member of any of these persons? If 'Yes, ' complete Schedule L, Part II       26       X         28       Was the organization apaty to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):       27       X         28       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV.       28b       X         29       D A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV.       28b       X         20       Did the organization receive more than 325,000 in non-cash contributions? If 'Yes,' complete Schedule N, Part I       30       X         31       Did the organization receive onther base entry if 'Yes,' complete Schedule N, Part I       31       X         32       Did the organization need end with disregarded as separate from the organization need to any taxee-mpt or transfer more than 25% of its net assets? If 'Yes,' co			25h		x
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%     26     X       27     Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, treator 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 provide signal or othese persons? If "Yes," complete Schedule L, Part IV     28a     X       29     Was the organization a provide signal or organization set on source and the following parties (see the Schedule L, Part IV     28a     X       20     A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV     28a     X       20     Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M     29     X       20     Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I     30     X       31     Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I     31     X       32     Did the organization receive control thores of a neithy disregarded as separate from the organization under Negulations sections 30.17701-32 M "Yes," complete Schedule R, Part I     31     X       33     Did	26	,	250		
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV.       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 finiting thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributions? If "Yes," complete Schedule L, Part IV.       28a       X         29       DA family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28b       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.       291       X         30       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I       31       X         31       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule R, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of	20				
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 ently (including an employee thereof) or family member or any of these persons? If "Yes," complete Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):       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):       28       X         29       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.       29       X         20       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.       30       X         31       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II.       30       X         32       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II.       30       X         33       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II.       31       X </td <td></td> <td></td> <td>26</td> <td></td> <td>x</td>			26		x
creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entry (including an employee for family member of any of these persons? If "Yes," complete Schedule L, Part II       Z7       X         Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a       X         b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28b       X         29       Did the organization and L, Part IV.       28c       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule R, Part I       30       X         31       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net asset?/If "Yes," complete Schedule R, Part I       31       X         32       Xid the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       33       X         33       Did the organization neated to any tax-exempt or taxable entity? If "Y	27		20		
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.       1       1         28       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If       28a       X         28       A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive more individuals and/or organizations described in line 28a or 28b?/If       "Yes," complete Schedule L, Part IV.       28b       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       30       X         31       Did the organization sele, exchange, dispose of, or transfer more than 255 of its net assets?/If "Yes," complete Schedule N, Part II       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       31       X         33       Did the organization and 01.7701.37 If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       34       X         34       Was the organization set.010 entity disregarded as separate from the organization with a controlled entity within the meaning of section 512(b)(13)? <td>21</td> <td></td> <td></td> <td></td> <td></td>	21				
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): <ul> <li>A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If</li> <li>**es," complete Schedule L, Part IV</li> <li>A family member of any individual described in line 28a? If 'Yes," complete Schedule L, Part IV.</li> <li>A family member of any individual described in line 28a? If 'Yes," complete Schedule L, Part IV.</li> <li>B A family member of any individual described in line 28a? If 'Yes," complete Schedule L, Part IV.</li> <li>B A damily member of any individual described in line 28a? If 'Yes," complete Schedule L, Part IV.</li> <li>B A damily member of any individual described in line 28a? If 'Yes," complete Schedule M.</li> <li>D Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes," complete Schedule N.</li> <li>D Did the organization receive contributions of at, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes," complete Schedule N, Part I</li> <li>D Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes," complete Schedule N, Part I</li> <li>D Did the organization realed to any tax exempt or taxable entity? If 'Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</li> <li>Sa dat X</li> <li>D Did the organization neceive 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</li> <li>Sa dat X</li> <li>D Did the organization neceive any payment from or engage in any tr</li></ul>			27		х
instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f "Yes," complete Schedule L, Part IV 28a 28b 2 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization inguidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.32 If 'Yes," complete Schedule R, Part I 33 Did the organization netated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 33 34 35b Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 35b 35b 36 36 37 36 36 37 36 36 37 36 37 36 37 37 36 37 37 38 3 37 38 3 3 3 3 3 3 3 3 3 3 3	28				
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If       28a       X         b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV       28b       X         c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/If       28c       X         29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       31       X         31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/If "Yes," complete Schedule N, Part I       31       X         32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.3? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       34       X         33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       36a       X         34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       36a       X         35a       Did the organization neceive any payment from or engage in any transaction with a controled entity within the meaning of section 512					
"Yes," complete Schedule L, Part IV       28a       X         b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV       28b       X         c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?If       "Yes," complete Schedule L, Part IV       28c       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       X         31       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?If "Yes," complete Schedule N, Part I       31       X         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization netated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization netated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       35a       X         35a       Did the organization. Did the organization make any transfers to an exempt non-charitable related organization?<	а				
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV       28a       X         c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV       28c       X         30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       X         31 Did the organization sel, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       X         32 Did the organization sel, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       X         33 Did the organization rown 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       X       33       X       34       X         35a Did the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       X       35a         35a Did the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       X       35a       X         36 Section 501(c)(3) organizations. Did the organizati			28a		Х
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/ff	b				Х
"Yes," complete Schedule L, Part IV       28c       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-32 If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Bett "Yes," complete Schedule R, Part V, line 2       35a       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V       <					
29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         35a       Did the organization. Solid the organization. Did he organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization complete Schedule Q organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V       37       X         38       Did the organization complete Schedule Q organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V		· ·	28c		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       X         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-32 and 301.7701-37 If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization neceive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2       36       X         37       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O       11       12       12       X       X <td>29</td> <td></td> <td>29</td> <td></td> <td>Х</td>	29		29		Х
31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/If "Yes," complete       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-32 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       36       X         38       Did the organization complete Schedule O       18       X       37       X         39       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         39       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X     <	30				
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       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.32 /f "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes," complete Schedule R, Part V, line 2       35b       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization complete Schedule R, Part V, line 2       36       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O.       38       X         39       Did the organization complete Schedule O.       38       X		contributions? If "Yes," complete Schedule M	30		Х
Schedule N, Part II       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         9       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       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an expany non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       36       X         37       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O       38       X         Vest All Form 990 filers are required to complete Schedule O         Vest All Form 990 filers are required to complete Schedule O         V       Statements Regarding Other IRS Filings and	31		31		Х
33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         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       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V       36       X         37       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       37       X         38       X       Note: All Form 990 filers are required to complete Schedule O       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       Ia       12       1         14       12       Ib       0       Ib       0         16       benter the number reported in box 3 of Form 1096. Enter	32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
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34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         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       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V       1a       122 1b       1b       0         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable g	33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         90       Herry M       Statements Regarding Other IRS Filings and Tax Compliance       1       12       1         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1		sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
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36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V       Ia       12         1a       12       Ves       No         1a       12       0       0         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0         b       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       1a       12	b				
If "Yes," complete Schedule R, Part V, line 2       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         9at V       Statements Regarding Other IRS Filings and Tax Compliance       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       Yes       No         1a       12       1       12       1         b       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       12       1         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0       0       1         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1			35b		
<ul> <li>37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>.</li> <li>38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?</li> <li>38 Note: All Form 990 filers are required to complete Schedule O</li> <li>90 Statements Regarding Other IRS Filings and Tax Compliance</li> <li>Check if Schedule O contains a response or note to any line in this Part V</li> <li>1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable</li> <li>b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable</li> <li>c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming</li> </ul>	36				v
and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			36		
38       Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?       38       X         Note: All Form 990 filers are required to complete Schedule O         98       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance         Check if Schedule O contains a response or note to any line in this Part V         Yes       No         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       12         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       Image: Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan= 2	37				v
Note: All Form 990 filers are required to complete Schedule O       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       V         Check if Schedule O contains a response or note to any line in this Part V       Yes       No         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       12       V         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0       Image: Complete Co	~~		37		
Yes No         1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a Enter -0- if not applicable       1a 12       Ves       No         b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b 0       0       0         c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       1a       1a       1a	38			v	
Check if Schedule O contains a response or note to any line in this Part V         Yes No         1a       12         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       1	Pa	Note: All Form 990 filers are required to complete Schedule 0	38	Δ	
1a       1a       12         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       Image: Comparison of the payment of the	ra				
1a       12         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable         b       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		Check in Schedule C contains a response of hole to any line in this Part V		Vca	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0         c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1-	Enter the number reported in box 3 of Form 1096. Enter 0, if not applicable $  1  $		Tes	NO
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming					
	U		10	х	

Form 990	
Part V	Sta

 021)
 RAR-MA, INC.

 Statements Regarding Other IRS Filings and Tax Compliance (continued)

i ui							
					Yes	No	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		1 /				
	filed for the calendar year ending with or within the year covered by this return	2a	14		v		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X		
0-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instruction			0-		x	
		• •		3a 3b			
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule At any time during the calendar year, did the organization have an interest in, or a signature or other			30			
40	financial account in a foreign country (such as a bank account, securities account, or other financial	•		4a		x	
h	If "Yes," enter the name of the foreign country	accounty:		та			
N.	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accounts (FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		х	
	<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?						
	c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?						
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t						
	any contributions that were not tax deductible as charitable contributions?			6a		x	
b	If "Yes," did the organization include with every solicitation an express statement that such contribu						
	were not tax deductible?			6b			
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices provided to the	he payor?	7a	Х		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Х		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required					
	to file Form 8282?			7c		X	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d					
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			7e		X	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f 7g		X	
g							
h							
8							
9	sponsoring organization have excess business holdings at any time during the year?						
	<ul> <li>Sponsoring organizations maintaining donor advised funds.</li> <li>a Did the sponsoring organization make any taxable distributions under section 4966?</li> </ul>						
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9a 9b			
	Section 501(c)(7) organizations. Enter:			0.0			
	Initiation fees and capital contributions included on Part VIII, line 12	10a					
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b					
11	Section 501(c)(12) organizations. Enter:						
а	Gross income from members or shareholders	11a					
	Gross income from other sources. (Do not net amounts due or paid to other sources against						
	amounts due or received from them.)	11b					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?		12a			
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b					
	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state?			13a			
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.						
b	Enter the amount of reserves the organization is required to maintain by the states in which the	405					
~	organization is licensed to issue qualified health plans	13b 13c					
	Enter the amount of reserves on hand			14a		x	
	Did the organization receive any payments for indoor tanning services during the tax year?	ule ()		14a 14b		<u> </u>	
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remun			1-10			
	excess parachute payment(s) during the year?			15		x	
	If "Yes," see the instructions and file Form 4720, Schedule N.						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investme	nt income?		16		х	
	If "Yes," complete Form 4720, Schedule O.						
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage ir	n any					
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17			
	If "Yes." complete Form 6069.						

	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 1a 15								
	If there are material differences in voting rights among members of the governing body, or if the governing	1							
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.								
b		5							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1							
	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	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X X					
6	6 Did the organization have members or stockholders?								
7a	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		X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?	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	Х						
b	Each committee with authority to act on behalf of the governing body?	8b	Х						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	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,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	v						
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х						
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		v						
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X X						
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Λ						
С	5 5 5 7 7	10	х						
40	on Schedule O how this was done	12c	X						
13	Did the organization have a written whistleblower policy?	13 14	X						
14 15	Did the organization have a written document retention and destruction policy?	14	1						
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
		15a	х						
a b	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	15a		X					
D	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	155							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
104	taxable entity during the year?	16a		Х					
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100							
	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 ►MA								
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 onlv	) avail	able					
	for public inspection. Indicate how you made these available. Check all that apply.	, <b>,</b>		-					
	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, a	nd finai	ncial						
	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								
	CHRISTINE WARD - (617) 292-2665								
	3 SCHOOL STREET, 3, BOSTON, MA 02108								

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

RAR-MA, INC.

Form 990 (2021)

80-0297898

Page 6

I

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

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

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)		(D)	(E)	(F)					
Name and title	Average	(da	Position		Reportable	Reportable	Estimated				
	hours per	box, unl		(do not check more than one box, unless person is both an officer and a director/trustee)			is bot	h an	compensation	compensation	amount of
	week		cer an	id a d I	irecto	or/trus	itee)	from	from related	other	
	(list any	ector						the	organizations	compensation	
	hours for	or di	e			ated		organization	(W-2/1099-MISC/	from the	
	related	ustee	trustee		æ	pens		(W-2/1099-MISC/	1099-NEC)	organization	
	organizations below	ual tri	onal		ploye	t com		1099-NEC)		and related organizations	
	line)	Individual trustee or director	Institutional t	Officer	Key employee	Highest compensated employee	ormer			organizations	
(1) CHRISTINE WARD	40.00		-	0	×	Ξē	E.				
EXECUTIVE DIRECTOR				x				122,933.	0.	10,950.	
(2) GREGG M. DOOLING	2.00							,		,	
FORMER CHAIR		x		x				0.	0.	0.	
(3) JILL QUINBY	2.00										
TREASURER		Х		Х				0.	0.	0.	
(4) MELISSA ALEXANDER	1.00										
FORMER DIRECTOR		X						0.	0.	0.	
(5) FRANCINE ROSENZWEIG	2.00										
FORMER VICE CHAIR		X		Х				0.	0.	0.	
(6) JONATHAN SLAWSBY	1.00										
FORMER DIRECTOR		X						0.	0.	0.	
(7) DARYL ANDREWS	2.00										
CHAIR		X		X				0.	0.	0.	
(8) SUSAN HOUSTON	1.00									•	
DIRECTOR		X						0.	0.	0.	
(9) DR. OLA J. FRIDAY	1.00									•	
DIRECTOR		X						0.	0.	0.	
(10) ARIA GLASGOW	1.00									•	
DIRECTOR		X						0.	0.	0.	
(11) BRANDON BURNS	2.00									0	
SECRETARY	1 00	X		X				0.	0.	0.	
(12) CAMILLE CARLSTROM	1.00							0		0	
DIRECTOR		X						0.	0.	0.	
(13) MERCEDES DAHAR	2.00							0		0	
VICE CHAIR		X		X				0.	0.	0.	
(14) DALE DOWDIE	2.00							0		0	
DIRECTOR	1 00	X						0.	0.	0.	
(15) BILL BARKE	1.00							0.	0.	0	
DIRECTOR	1 00	X						0.	0.	0.	
(16) SHELLEY WILSON	1.00							0.	0.	•	
DIRECTOR	1.00	X				<u> </u>	<u> </u>	0.	0.	0.	
(17) MAGGIE BEGLEY	U	x						0.	0.	0.	
DIRECTOR								0.	0.	U •	

Form 990 (2021) RAR-MA,	INC.								80-02	297	898	Pa	ge <b>8</b>
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees			ghe	st C	Compensated Employe	es (continued)				
(A) Name and title	<b>(B)</b> Average hours per week	officer and a director/trust				than ( is bot	n an	(D) Reportable compensation from	<b>(E)</b> Reportable compensation from related	oortable oensation		(F) imateo ount c other	
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS 1099-NEC)		fro orga and	oensat om the nizatio relate nizatio	on ed
(18) KATY CALDWELL	1.00	x						0.		0.			0
DIRECTOR (19) DAN GRONDIN	1.00	^						0.		0.			0.
DIRECTOR		x						0.		0.			0.
(20) JEANNETTE HSU DIRECTOR	1.00	x						0.		0.			0.
1b Subtotal							•	122,933.		0.	10	),95	50.
c Total from continuation sheets to Part VI d Total (add lines 1b and 1c)	I, Section A							0. 122,933.		0.	1(	),95	0.
2 Total number of individuals (including but n compensation from the organization ►									),000 of reportabl	-		<u>, , , , , , , , , , , , , , , , , , , </u>	1
										_		Yes	No
3 Did the organization list any <b>former</b> officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> s			-	•	•			ghest compensated emp			3		x
4 For any individual listed on line 1a, is the su and related organizations greater than \$150	-	le co	omp	ensa	ation	n and	l ot	her compensation from			4		х
5 Did any person listed on line 1a receive or a rendered to the organization? <i>If "Yes," com</i>	accrue compe	nsat	ion f	rom	any	unr	elat	ted organization or indiv			5		x
Section B. Independent Contractors			0/ 30		0013						<u> </u>		
1 Complete this table for your five highest co the organization. Report compensation for										pensa	ation fr	om	
(A) Name and business	address	NC	ONE	2				<b>(B)</b> Description of s	ervices	C	(C) ompen		1
2 Total number of independent contractors (i	ncludina but n	ot lii	mite	d to	thos	se lis	ster	d above) who received n	nore than				
\$100,000 of compensation from the organiz	•			-	(			, <b>-</b>					

orm 990 <b>Part V</b>			-	•				80-0297	<b>898</b> Pag
									Г
	Check if Schedul	e O cont	ans a respo	nse	or note to any in	(A) (A) Total revenue	(B) Related or exempt function revenue	(C)	(D) Revenue exclud from tax und sections 512 -
Sil 1 a	a Federated campaigns	3	1a						
<u> </u>	<b>b</b> Membership dues								
A A	c Fundraising events				297,759.				
ar	d Related organizations								
Ē ,	e Government grants (o				226,930.				
ן אַ	f All other contributions, g								
the	similar amounts not incl	uded abo	ve <b>1</b> f		958,771.				
	g Noncash contributions inclu	ded in lines	1a-1f <b>1g</b> \$	;					
a au	h Total. Add lines 1a-11				►	1,483,460.			
					Business Code				
2 8	a PROGRAM REV	<b>ENUE</b>	2		900099	57,092.	57,092.		
a 1	b								
2 a Hevenue	c								
eve	d								
±  ,	e								
1	f All other program ser	vice reve	enue						
	g Total. Add lines 2a-21				►	57,092.			
3	Investment income (ir	ncluding	dividends, i	ntere	est, and				
	other similar amounts	.)			►	50.			5
4	Income from investme	ent of ta	x-exempt bo	nd p	roceeds 🕨 🕨				
5	Royalties				►				
			(i) Real		(ii) Personal				
6 8	a Gross rents	6a							
1	b Less: rental expenses	6b							
(	c Rental income or (los	s) <b>6c</b>							
	d Net rental income or	loss)			►				
7 8	a Gross amount from sale	s of	(i) Securit	ies	(ii) Other				
	assets other than invent	ory <b>7a</b>							
	b Less: cost or other basi	s							
	and sales expenses								
	<b>c</b> Gain or (loss)	7c							
	d Net gain or (loss)			. <u></u>	►				
8 8	a Gross income from fund								
	including \$	297,7	<b>59</b> . of						
	contributions reporte								
	Part IV, line 18			8a	86,496.				
1	<b>b</b> Less: direct expenses	s		8b	78,687.				
	c Net income or (loss) f		-		🕨	7,809.			7,80
9 8	a Gross income from g								
	Part IV, line 19			9a					
	<b>b</b> Less: direct expenses			9b					
	c Net income or (loss) f			s	🕨				
10 a	a Gross sales of invente			1					
	and allowances			10a					
	b Less: cost of goods s			10b					
	c Net income or (loss) f	rom sale	es of invento	ry					
					Business Code				
<u>9</u> 11 å	-								
8	b								
e (	c								
	d All other revenue								
	e Total. Add lines 11a-								
12	Total revenue. See inst	ructions			🕨	1,548,411.	57,092.	0.	7,8

### RAR-MA, INC.

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a respon Do not include amounts reported on lines 6b,	(A) Total expenses	(B)	(C)	(D)
7b, 8b, 9b, and 10b of Part VIII.	Total expenses	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				
2 Grants and other assistance to domestic				
individuals. See Part IV, line 22				
3 Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors,	4.4.9 5.9.5			~~ ~~ ~
trustees, and key employees	143,527.	99,794.	5,352.	38,381
6 Compensation not included above to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)	<u> </u>		07.016	110 450
7 Other salaries and wages	621,218.	481,550.	27,216.	112,452
8 Pension plan accruals and contributions (include	7 200	C 017	210	250
section 401(k) and 403(b) employer contributions)	7,388. 30,048.	6,817.	219.	352 5,831
9 Other employee benefits	68,311.	22,187.	2,030.	2,831
10 Payroll taxes	00,311.	51,615.	2,775.	13,921
11 Fees for services (nonemployees):				
a Management				
b Legal	36,859.		36,859.	
c Accounting				
<ul> <li>d Lobbying</li> <li>e Professional fundraising services. See Part IV, line 17</li> </ul>	69,213.			69,213
	05,215.			0,213
f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25,				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.)	52,547.	46,078.	4,498.	1 971
12 Advertising and promotion	8,823.	498.	265.	1,971 8,060 8,805
13 Office expenses	26,022.	16,130.	1,087.	8,805
14 Information technology				0,000
15 Royalties				
16 Occupancy	43,286.	33,898.	2,415.	6,973
17 Travel	7,331.	4,921.	143.	2,267
18 Payments of travel or entertainment expenses	.,			_/
for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	7,008.	5,463.	377.	1,168
24 Other expenses. Itemize expenses not covered	-			-
above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25. column (A).				
amount, list line 24e expenses on Schedule 0.)				
a PROGRAM SUPPLIES AND AC	83,113.	83,113.		
b STAFF RECRUITMENT, DEVE	11,869.	5,214.	20.	6,635
c MISCELLANEOUS EXPENSE	7,893.	117.	7,639.	137
d FOOD AND MEALS	1,436.	1,172.	21.	243
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	1,225,892.	858,567.	90,916.	276,409
26 Joint costs. Complete this line only if the organization				
reported in column (B) joint costs from a combined				
educational campaign and fundraising solicitation.				
Check here if following SOP 98-2 (ASC 958-720)				

80	-029789	8 Page 11
00	-0431030	

Form 990 (2021)
Part X Balance Sheet RAR-MA, INC.

		Check if Schedule O contains a response or	note to any line in this Part X			
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		951,574.	1	1,032,222.
	2	Savings and temporary cash investments		100,636.	2	100,686.
	3	Pledges and grants receivable, net		76,742.	3	94,901.
	4	Accounts receivable, net		20,326.	4	68,485.
	5	Loans and other receivables from any currer		· · · · · · · · · · · · · · · · · · ·		
		trustee, key employee, creator or founder, si				
		controlled entity or family member of any of			5	
	6	Loans and other receivables from other disq	F			
		under section 4958(f)(1)), and persons desci			6	
S	7	Notes and loans receivable, net	F		7	
Assets	8	Inventories for sale or use			8	
As	9			10,224.	9	10,945.
		Land, buildings, and equipment: cost or othe		•		
		basis. Complete Part VI of Schedule D				
	Ь	Less: accumulated depreciation			10c	
	11	Investments - publicly traded securities		11		
	12	Investments - other securities. See Part IV, li		12		
	13	Investments - program-related. See Part IV, I		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11	7,343.	15	7,343.	
	16	Total assets. Add lines 1 through 15 (must of		1,166,845.	16	1,314,582.
	17	Accounts payable and accrued expenses		113,099.	17	107,301.
	18	Grants payable	E Contraction of the second	•	18	
	19	Deferred revenue		15,257.	19	5,163.
	20	Tax-exempt bond liabilities		•	20	
	21	Escrow or custodial account liability. Complete			21	
s	22	Loans and other payables to any current or				
Liabilities	<u> </u>	trustee, key employee, creator or founder, si				
lide		controlled entity or family member of any of			22	
Ľ	23	Secured mortgages and notes payable to ur	F		23	
	24	Unsecured notes and loans payable to unre			24	
	25	Other liabilities (including federal income tax	F			
		parties, and other liabilities not included on I				
		of Schedule D	, ' '	158,890.	25	0.
	26	Total liabilities. Add lines 17 through 25		287,246.	26	112,464.
	1	Organizations that follow FASB ASC 958,	check here ▶ X	-		
ces		and complete lines 27, 28, 32, and 33.				
ano	27			513,235.	27	819,610.
Bal	28		<u></u>	366,364.	28	382,508.
pu		Organizations that do not follow FASB AS		•		
μ		and complete lines 29 through 33.	,			
s or	29	Capital stock or trust principal, or current fur	nds		29	
šets	30	Paid-in or capital surplus, or land, building, o			30	
As	31	Retained earnings, endowment, accumulate			31	
Net Assets or Fund Balances	32	Total net assets or fund balances	F	879,599.	32	1,202,118.
~	33	Total liabilities and net assets/fund balances		1,166,845.	33	1,314,582.
				, , , , , , , , , , , , , , , , , , , ,		Eorm <b>990</b> (2021)

Form **990** (2021)

Form	1 990 (2021) RAR-MA, INC.	80-029	7898	Pag	ge <b>12</b>
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	1,548		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,225		
3	Revenue less expenses. Subtract line 2 from line 1	3			19.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	879	9,5	99.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,202	2,1	18.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d 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?		_ <b>2</b> b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e 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	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		_ 2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			_
	Act and OMB Circular A-133?		. 3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b		

Form **990** (2021)

(Form 990)

Total

# Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

	OMB No. 1545-0047
	2021
	Open to Public Inspection
r	identification number

	ent of the Treasury evenue Service			Attach to Form 990 or F v/Form990 for instruction			nformation.		Open to Public Inspection			
Name	of the organizat	ion	_						identification number			
	RAR-MA, INC. 80											
Part	I Reason	for Public	Charity Status.	(All organizations must c	omplete tl	his part.) S	See instruction	าร.				
The org	he organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)											
1 📙	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).											
2	A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E (Form 990).)											
3 🗋	A hospital or a cooperative hospital service organization described in <b>section 170(b)(1)(A)(iii).</b>											
4 🗆	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 stat	-										
5 🗆				ollege or university owned	d or opera	ted by a g	overnmental	unit describ	bed in			
•			Complete Part II.)									
6 ∟ 7 ∑	•			mental unit described in s					and the state and the state			
7 🗋	0			antial part of its support f	rom a gov	remmenta	unit or from	ine general	public described in			
8			Complete Part II.)	(1)(A)(vi). (Complete Par	• 11 \							
9				l in section 170(b)(1)(A)	-	ed in conii	inction with a	land-grant	college			
5				culture (see instructions).								
	university:		grant concept of agric			name, en	y, and otato o	r the coneg				
10	-, ·-	ion that norma	ally receives (1) more	than 33 1/3% of its sup	oort from	contributio	ons. members	hip fees. a	nd aross receipts from			
				ct to certain exceptions;								
				(less section 511 tax) fr								
			mplete Part III.)									
11 🗌	An organizat	ion organized	and operated exclus	ively to test for public sa	fety. See	section 50	<b>)9(a)(4).</b>					
12	🔄 An organizat	ion organized	and operated exclus	ively for the benefit of, to	perform	the function	ons of, or to c	arry out the	e purposes of one or			
	more publicly	/ supported or	rganizations describe	ed in <b>section 509(a)(1)</b> o	r section	509(a)(2).	See section	509(a)(3). 🤇	Check the box on			
	lines 12a thro	ough 12d that	describes the type of	of supporting organizatio	n and con	nplete line	s 12e, 12f, an	d 12g.				
a				supervised, or controlled								
				egularly appoint or elect a	a majority	of the dire	ctors or trust	ees of the s	supporting			
.			complete Part IV, Se									
b				d or controlled in connec								
		-		anization vested in the s	ame perso	ons that co	ontrol or mana	age the sup	ported			
•			st complete Part IV,		in connoc	tion with	and functions	lly intograt	ad with			
C		-		g organization operated s). <b>You must complete l</b>				iny integrate	ed with,			
d		0	()(	oorting organization oper				rtod organi	zation(s)			
u				zation generally must sat				-				
				nplete Part IV, Sections				u an attent	TVCHC33			
е				written determination fro				e II. Type III				
		•		onally integrated support				···, · <b>,  </b> ···				
fΕ	nter the number			, , , , , , , , , , , , , , , , , , , ,	5 5							
g F	Provide the follow	ing information	n about the supporte	ed organization(s).								
	(i) Name of supp		(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	anization listed ing document?	(v) Amount o	-	(vi) Amount of other			
	organizatio	า		above (see instructions))	Yes	No	support (see ii	nstructions)	support (see instructions)			
			L			1			1			

Schedule	A (Form 990) 2021
Part II	Support Sch

RAR-MA, INC.

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

Sec	tion A. Public Support										
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	(d) 2020	(e) 2021	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grants.")	765,238.	883,488.	791,598.	1248911.	1483460.	5172695.				
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	765,238.	883,488.	791,598.	1248911.	1483460.	5172695.				
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)						252,148.				
6	Public support. Subtract line 5 from line 4.						4920547.				
	Section 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	765,238.	883,488.	791,598.	1248911.	1483460.	5172695.				
	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties,										
	and income from similar sources	823.	10,671.	21,179.	3,839.	50.	36,562.				
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.)		300.	1,100.			1,400.				
11	Total support. Add lines 7 through 10						5210657.				
12	Gross receipts from related activities,	etc. (see instructi	ons)		•	12	630,527.				
13	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third, <sup>.</sup>	fourth, or fifth tax	year as a section s	501(c)(3)					
	organization, check this box and stop	here									
Sec	tion C. Computation of Publ	ic Support Pe	rcentage								
14	Public support percentage for 2021 (	line 6, column (f), c	livided by line 11, o	column (f))		14	94.43 %				
15	Public support percentage from 2020	) Schedule A, Part	II, line 14			15	89.67 %				
<b>16</b> a	33 1/3% support test - 2021. If the c	-									
	stop here. The organization qualifies as a publicly supported organization										
b	b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box										
	and stop here. The organization qual										
17a	7a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,										
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and <b>stop he</b>	r <b>e.</b> Explain in Part	VI how the organiz	ation				
	meets the facts-and-circumstances te	est. The organization	on qualifies as a pu	ublicly supported of	organization		▶∟				
b	10% -facts-and-circumstances tes	<b>t - 2020.</b> If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or				
	more, and if the organization meets the				• •						
	organization meets the facts-and-circ		•				▶∐				
18	B Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and 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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
2	Gross receipts from activities that						
3	are not an unrelated trade or bus-						
	iness 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						
U	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
Ċ	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						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for th	e organization's fi	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) orgai	nization,
	check this box and stop here						
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2021 (I	ine 8, column (f), c	divided by line 13,	column (f))		15	%
16	Public support percentage from 2020	Schedule A, Part	III, line 15			16	%
	ction D. Computation of Inves						
17	Investment income percentage for 20	21 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	%
	Investment income percentage from 2					18	%
	<b>33 1/3% support tests - 2021.</b> If the						
	more than 33 1/3%, check this box a						
ł	<b>33 1/3% support tests - 2020.</b> If the						3%, and
	line 18 is not more than 33 1/3%, che						
20	<b>Private foundation.</b> If the organizatio						
-				, ,			

RAR-MA, INC.

#### 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.)

	V	
	Yes	No
1		
2		
3a		
3b		
3c		
4a		
44		
4b		
4c		
5a		
5b		
5c		
6		
-		
7		
8		
_		
9a		
9b		
56		
9c		
10-		
10a		
10b		

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above?If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> <b>Part VI</b> <i>how the supported organization(s)</i> <i>effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported</i> <i>organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the</i> <i>supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	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			
	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

			162	NU
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? 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		

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

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

Schedule A (Form 990) 2021

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

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

Schedule A (Form 990) 2021

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-	dule A (Form 990) 2021 RAR-MA, INC.		·	8	0-0297898 Page 7
Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continu</sub>	ied)	1
Sect	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exemption	ot purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	9		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	าร	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
с	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D.				
	line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2021 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in <b>Part VI.</b> See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
•	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
•	and 4c.				
8	Breakdown of line 7:				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				

Schedule A (Form 990) 2021

Schedule A (Form 990) 2021 RAR-MA, INC.	80-0297898 Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1	17b; Part III, line 12;
line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V	/, Section B, line 1e; Part V,
Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additio (See instructions.)	nal information.
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:	
MISCELLANEOUS INCOME	
2018 AMOUNT: \$ 300.	
2019 AMOUNT: \$ 1,100.	

SCHEDULE D	Supplemental F
(Form 990)	Complete if the organization

## 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
0001
2021
Open to Public
Inspection

Name of the organization

Department of the Treasury Internal Revenue Service

RAR-MA,	INC.
o Maintaini	na Dona

Employer identification number 80-0297898

Pa	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the						
	organization answered "Yes" on Form 990, Part IV, li		(b) Funda and other accounts				
		(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	-					
-	are the organization's property, subject to the organization's						
6	Did the organization inform all grantees, donors, and donor						
	for charitable purposes and not for the benefit of the donor						
Do							
Pa			IV, line 7.				
1	Purpose(s) of conservation easements held by the organiza						
	Preservation of land for public use (for example, recre		storically important land area				
	Protection of natural habitat	Preservation of a ce	rtified historic structure				
-	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qua	lified conservation contribution in the form of a	Conservation easement on the last Held at the End of the Tax Year				
	day of the tax year.						
	Total number of conservation easements						
b							
с	Number of conservation easements on a certified historic st		2c				
d	Number of conservation easements included in (c) acquired						
•	listed in the National Register						
3	Number of conservation easements modified, transferred, r	released, extinguished, or terminated by the org	anization during the tax				
	year	en en en tra la casta d					
4	Number of states where property subject to conservation e						
5	Does the organization have a written policy regarding the po- violations, and enforcement of the conservation easements		Yes No				
6	Staff and volunteer hours devoted to monitoring, inspecting						
U		g, naroning of violations, and emoteling conserva	ation easements during the year				
7	Amount of expenses incurred in monitoring, inspecting, har	adling of violations, and enforcing conservation	easements during the year				
•			casemente danng the year				
8	Does each conservation easement reported on line 2(d) abo	ove satisfy the requirements of section 170(b)(4	)(B)(i)				
-	and section 170(h)(4)(B)(ii)?						
9	In Part XIII, describe how the organization reports conserva	tion easements in its revenue and expense stat					
-	balance sheet, and include, if applicable, the text of the foo						
	organization's accounting for conservation easements.	5					
Pa	t III Organizations Maintaining Collections	of Art, Historical Treasures, or Othe	r Similar Assets.				
	Complete if the organization answered "Yes" on For	m 990, Part IV, line 8.					
<b>1</b> a	If the organization elected, as permitted under FASB ASC 9	958, not to report in its revenue statement and t	palance sheet works				
	of art, historical treasures, or other similar assets held for pu	ublic exhibition, education, or research in furthe	rance of public				
	service, provide in Part XIII the text of the footnote to its fina						
b	If the organization elected, as permitted under FASB ASC 9	958, to report in its revenue statement and bala	nce sheet works of				
	art, historical treasures, or other similar assets held for publ	lic exhibition, education, or research in furtherar	nce of public service,				
	provide the following amounts relating to these items:						
	(i) Revenue included on Form 990, Part VIII, line 1		► \$				
			<b>.</b> .				
2	If the organization received or held works of art, historical tr						
	the following amounts required to be reported under FASB						
а	Revenue included on Form 990, Part VIII, line 1	-	► \$				
	Assets included in Form 990, Part X						
	For Paperwork Reduction Act Notice, see the Instruction		Schedule D (Form 990) 2021				

	dule D (Form 990) 2021 RAR-MA,					80-02			age <b>2</b>
Par	t III Organizations Maintaining C	ollections of A	rt, Historical T	reasures, or Oth	ner Simila	ar Asse	<b>ts</b> (contir	nued)	
3	Using the organization's acquisition, accession	on, and other record	ds, check any of th	e following that make	significant	use of its			
	collection items (check all that apply):								
а	Public exhibition	d	Loan or ex	change program					
b	Scholarly research	e	e 🛄 Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	-	-	-		ose in Par	t XIII.		
5	During the year, did the organization solicit o						-		7
Der	to be sold to raise funds rather than to be ma						Yes		No
Par	t IV Escrow and Custodial Arran		ete if the organizat	ion answered "Yes" o	on Form 990	), Part IV,	line 9, or		
<u> </u>	reported an amount on Form 990, Par								
1a	Is the organization an agent, trustee, custodi		•				7.2		٦.,
	on Form 990, Part X?					L	Yes		<b>∣ No</b>
D	If "Yes," explain the arrangement in Part XIII	and complete the to	bliowing table:				Amoun		
-							Amoun		
	Beginning balance								
	Additions during the year								
f	Distributions during the year								
' 2a	Ending balance Did the organization include an amount on Fo						Yes		No
	If "Yes," explain the arrangement in Part XIII.								]
Par									
		(a) Current year	(b) Prior year	(c) Two years back		ears back	(e) Four	years	back
1a	Beginning of year balance								
b	Contributions								
с	Net investment earnings, gains, and losses								
d	Grants or scholarships								
	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
	End of year balance								
2	Provide the estimated percentage of the curr	rent year end baland	ce (line 1g, column	(a)) held as:					
а	Board designated or quasi-endowment		_%						
b	Permanent endowment	%							
с	Term endowment	%							
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
3a	Are there endowment funds not in the posse	ssion of the organiz	ation that are held	and administered for	the organiz	zation			
	by:							Yes	No
	(i) Unrelated organizations						3a(i)		
	(ii) Related organizations						3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza			?			3b		
4	Describe in Part XIII the intended uses of the	Y	owment funds.						
Par	t VI Land, Buildings, and Equipm		0 Dart IV line 11a	Saa Farm 000 Dart	V line 10				
	Complete if the organization answered		· · · ·			.	(		
	Description of property	<b>(a)</b> Cost or o basis (investr			Accumulate epreciation	d	(d) Boo	k value	Э
1a	Land								
	Buildings								
С	Leasehold improvements								
d	Equipment								
	Other								
Total	Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line	10c.)					0.

Schedule D (Form 990) 2021

INC.

Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		e 11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(1)			
(8)			
(8) (9)			
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	·		
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes"	·	e 11e or 11f. See Form 990, Part X, line 25.	
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes"	·	e 11e or 11f. See Form 990, Part X, line 25.	<b>(b)</b> Book value
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes	·	≥ 11e or 11f. See Form 990, Part X, line 25.	<b>(b)</b> Book value
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2)	·	e 11e or 11f. See Form 990, Part X, line 25.	<b>(b)</b> Book value
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) (3)	·	e 11e or 11f. See Form 990, Part X, line 25.	<b>(b)</b> Book value
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2)	·	a 11e or 11f. See Form 990, Part X, line 25.	<b>(b)</b> Book value
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) (3)	·	e 11e or 11f. See Form 990, Part X, line 25.	<b>(b)</b> Book value
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) (3) (4)	·	e 11e or 11f. See Form 990, Part X, line 25.	<b>(b)</b> Book value
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)	·	e 11e or 11f. See Form 990, Part X, line 25.	<b>(b)</b> Book value
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6)	·	e 11e or 11f. See Form 990, Part X, line 25.	<b>(b)</b> Book value
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)	on Form 990, Part IV, line		(b) Book value

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

Sche	dule D (Form 990) 2021 RAR-MA, INC.			80-	0297898 Page 4
	t XI Reconciliation of Revenue per Audited Financial State	ments With			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a.			
1	Total revenue, gains, and other support per audited financial statements			1	1,557,861.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	9,450.		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	9,450.
3	Subtract line 2e from line 1			3	1,548,411.
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			
b	Other (Describe in Part XIII.)	4b			_
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,548,411.
Do	d VII   Decempiliation of Expenses new Audited Einemaiol Clate				
га	t XII Reconciliation of Expenses per Audited Financial State		Expenses per	Retu	irn.
га	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a.			
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements	2a.		Retu	ırn. 1,235,342.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	2a.			
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a. <b>2</b> a			
1 2	Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a. <b>2a</b> <b>2b</b>			
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a. 			
1 2 a b	Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a. 			1,235,342.
1 2 a b c	Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b>	2a. 2a 2b 2c 2d	9,450.	1 2e	1,235,342. 9,450.
1 2 b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a. 2a 2b 2c 2d	9,450.	1	1,235,342.
1 2 b c d e	Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b>	2a. 2a 2b 2c 2d	9,450.	1 2e	1,235,342. 9,450.
1 2 b c d e 3	Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a. 2a 2b 2b 2c 2d 2d 4a	9,450.	1 2e	1,235,342. 9,450.
1 2 b c d e 3 4 a b	Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a. 2a 2b 2b 2c 2d 2d 4a	9,450.	1 2e	1,235,342. 9,450.
1 2 b c d e 3 4 a b	Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines <b>4a</b> and <b>4b</b>	2a. 2a 2b 2c 2c 2d 4a 4b	9,450.	1 2e 3 4c	1,235,342. 9,450. 1,225,892. 0.
1 2 d 6 3 4 b 5	Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a. 2a 2b 2c 2c 2d 4a 4b	9,450.	1 2e 3	1,235,342. 9,450.

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.

SCHEDULE G	Suppleme	ental Information Regarding	g Fun	drais	ing or Gaming	Acti	vities	OMB No. 1545-0047
(Form 990)	Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.						, or if the	2021
Department of the Treasury		Attach to Form 990						Open to Public Inspection
Internal Revenue Service Name of the organization		<sub>o to</sub> www.irs.gov/Form990 for inst	ructior	is and	the latest informat	ion.	Employer id	entification number
Name of the organization	RAR-MA,	INC.					80-029	
Part I Fundrais		Complete if the organization answ	ered "\	es" o	n Form 990. Part IV.	line 1		
	complete this pa		orou i	00 01				
1 Indicate whether th	e organization rai	sed funds through any <u>of th</u> e followi	ng acti	vities.	Check all that apply			
	· · · · · · · · · · · · · · · · · · ·							
	email solicitation				nment grants			
c X Phone solici		g 🔀 Specia	l fundra	aising	events			
d X In-person so								
•		or oral agreement with any individua	•	Ũ				<b>—</b>
		Part VII) or entity in connection with p			•		X Ye	
		ividuals or entities (fundraisers) purs	uant to	agree	ements under which	the fi	undraiser is to	be
compensated at le	east \$5,000 by the	e organization.						
(i) Nome and address	o of individual		(iii)	Did	(iv) Cross respire		Amount paid	(vi) Amount paid
(i) Name and addres or entity (fund		(ii) Activity	have c	ustody	(iv) Gross receipts from activity		or retained by) fundraiser	to (or retained by)
or orning (rand			contrib	utions?	in on a damage	lis	ted in col. <b>(i)</b>	organization
CAROL MCKEAN EVENT	S, INC -		Yes	No				
344 TEMPLE STREET,	DUXBURY,	EVENT PLANNING		x	0.		8,000	. 0.
TARA A. RUBY - 823	COLUMBIA							
AVENUE, LANCASTER,	PA 17603	GRANTWRITING		х	0.		35,063	. 0.
JOSH CHALMERS - 22	9 MAIN							
STREET, DEEP RIVER	, CT 06417	EVENT PLANNING		х	0.		15,000	. 0.
AMY KINGMAN CONSUL								
4 ICE HOUSE LANE,	ESSEX, MA	DEVELOPMENT CONSULTANT		X	0.		28,375	. 0.
		•						
Total				. 🕨			86,438	•
3 List all states in whi	ich the organizati	on is registered or licensed to solicit	contrik	outions	s or has been notifie	d it is	exempt from	registration
or licensing.								
MA								

						0005000
-		e G (Form 990) 2021 RAR-MA,				-0297898 Page 2
Pa	πI	Fundraising Events. Complete if the of fundraising event contributions and gradient of fundraising event contributions and gradient of the second			· · ·	-
		or fundraising event contributions and gr	(a) Event #1 DINNER WITH	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
			AN AUTHOR GA		1	col. (c))
e			(event type)	(event type)	(total number)	coi. <b>(cj</b> )
Revenue	1	Gross receipts	384,255.			384,255.
	2	Less: Contributions	297,759.			297,759.
	3	Gross income (line 1 minus line 2)	86,496.			86,496.
	4	Cash prizes				
s	5	Noncash prizes				
pense	6	Rent/facility costs	58,766.			58,766.
Direct Expenses	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	19,921.			19,921.
	10	Direct expense summary. Add lines 4 throug	h 9 in column (d)		►	78,687.
	11	7,809.				
Pa	rt I	<b>II Gaming.</b> Complete if the organization \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	1 990, Part IV, line 19, or	reported more than	
evenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))

anue			(a) Bingo	bingo/progressive bingo (c) Other gaming		col. (a) through col. (c))
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Noncash prizes				
Direct E	4	Rent/facility costs				
	5	Other direct expenses			11	
	6	Volunteer labor	└── Yes % └── No	└── Yes % └── No	└── Yes % └── No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		►	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
	ı Is t	ter the state(s) in which the organization condu the organization licensed to conduct gaming ac No," explain:	ctivities in each of these	states?		
	_					
		ere any of the organization's gaming licenses re Yes," explain:			year?	Yes No

132082 10-21-21

Sch	edule G (Form 990) 2021	RAR-MA,	INC.	80-029	7898	Page 3
11	Does the organization conduct g	aming activities v	vith nonmembers?		Yes	No
12			e of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?				Yes	🗌 No
13	Indicate the percentage of gamin					
				13	a	%
						%
			epares the organization's gaming/special events books and record		•	
	Name					
15:			party from whom the organization receives gaming revenue?		Yes	
156	Does the organization have a cor			······ —		
k	If "Yes," enter the amount of gam	ning revenue rece	eived by the organization 🕨 \$ and the amou	nt		
	of gaming revenue retained by th	e third party 🕨 S	\$			
Ċ	If "Yes," enter name and address	of the third party	y:			
	Name					
	Address 🕨					
16	Gaming manager information:					
	Name 🕨					
	Gaming manager compensation					
		• • <u> </u>				
	Description of services provided	•				
	Director/officer	Employee	Independent contractor			
17	Mandatory distributions:					
a	•	r state law to ma	ke charitable distributions from the gaming proceeds to			
	retain the state gaming license?				Yes	🗌 No
k	Enter the amount of distributions	required under s	tate law to be distributed to other exempt organizations or spent ir	1 the		
	organization's own exempt activit	ties during the ta	x year 🕨 \$			
Pa			te the explanations required by Part I, line 2b, columns (iii) and (v); provide any additional information. See instructions.	and Part III,	lines 9	, 9b, 10b,
			· · ·			
SC	HEDULE G, PART I,	LINE 2B	, LIST OF TEN HIGHEST PAID FUNDRA	ISERS:		
·						
(1	) NAME OF FUNDRAL	SER: CAR	OL MCKEAN EVENTS, INC			
(1	) ADDRESS OF FUND	RAISER:	344 TEMPLE STREET, DUXBURY, MA 0	2332		
(I	) NAME OF FUNDRAI	SER: TAR	A A. RUBY			
(1	) ADDRESS OF FUND	RAISER:	823 COLUMBIA AVENUE, LANCASTER, PA	A 176	03	

#### (I) NAME OF FUNDRAISER: JOSH CHALMERS

Part IV Supplemental Information (continued)

(I) ADDRESS OF FUNDRAISER: 229 MAIN STREET, DEEP RIVER, CT 06417

(I) NAME OF FUNDRAISER: AMY KINGMAN CONSULTING, LLC

(I) ADDRESS OF FUNDRAISER: 4 ICE HOUSE LANE, ESSEX, MA 01929

SCHEDULE O (Form 990) Department of the Treasury Internal Revenue Service	Supplemental Information to Form 990 or 990- 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.	-EZ
Name of the organization	RAR-MA, INC.	Employer identification number 80-0297898
FORM 990, PA	RT I, LINE 1, DESCRIPTION OF ORGANIZATION MISS	SION:
RAISING A RE	ADER MA IS AN EVIDENCE-BASED EARLY LITERACY OF	RGANIZATION
THAT HELPS F	AMILIES OF YOUNG CHILDREN (BIRTH THROUGH AGE 6	5) DEVELOP,
PRACTICE, AN	D MAINTAIN HOME-BASED LITERACY ROUTINES.	
OUR GOAL IS	TO END THE CYCLE OF LOW LITERACY BY HELPING FA	AMILIES ACROSS
MASSACHUSETT	S DEVELOP HIGH IMPACT HOME READING ROUTINES TH	HAT LAY THE
GROUNDWORK F	OR A LIFETIME OF LEARNING, SUCCESS, AND PRODUC	CTIVE,
RESPONSIBLE	CITIZENSHIP.	
FORM 990, PA	RT III, LINE 1, DESCRIPTION OF ORGANIZATION M	ISSION:
READING HABI	IS.	
FORM 990, PA	RT III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMEN	NTS:
RESPONSIBLE	CITIZENSHIP.	
	RT VI, SECTION B, LINE 11B:	
	IS REVIEWED BY MANAGEMENT AND THE AUDIT COMM	ITTEE PRIOR TO
	OPY OF THE FORM 990 AS IT IS ULTIMATELY FILED	
	DARD PRIOR TO IT BEING FILED.	
FORM 990, PA	RT VI, SECTION B, LINE 12C:	

THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO THE BOARD ANNUALLY FOR

REVIEW AND SIGNATURE. A WRITTEN COPY OF THESE APPROVED CONFLICTS OF

INTEREST POLICY STATEMENTS, SIGNED BY EACH MEMBER OF THE BOARD, IS KEPT AT

THE RAR HEADQUARTERS FOR RECORDKEEPING.

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

THE COMPENSATION COMMITTEE AND THE BOARD OF DIRECTORS REVIEW, DISCUSS, AND

APPROVE THE COMPENSATION PACKAGES ON AN ANNUAL BASIS FOR THE EXECUTIVE

DIRECTOR AND KEY EMPLOYEES. THE PROCESS INCLUDES REVIEW AND APPROVAL BY

INDEPENDENT PERSONS, USE OF APPROPRIATE COMPARABILITY DATA, AND

DOCUMENTATION OF THE DECISION AND DELIBERATION.

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

UPON REQUEST