Form **990-EZ**

Department of the Treasury

Short Form Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit frust or private foundation) Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form. The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-1150

Open to Public Inspection

Α	For th	e 2009 calendar year, or tax year beginning		and end	ing			
	B Check if applicable: Please C Name of organization D Employer identification number							dentification number
	Addres							
	Name change	print or OF THE UNITED STATES				5	2-1	559702
	Initial returr)	F	Room/suite E	Tele	phone	number
	Term ated	n- Specific Instructure 1660 L STREET, NW		3	01	2	02-	534-3705
		nded tions. City or town, state or country, and ZIP + 4			F	Gro	up Exe	mption
	Applic pendir					Nur	nber 🕨	•
		tion 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach	a com	pleted	G Accounti	ng m	ethod:	Cash X Accrual
		Schedule A (Form 990 or 990-EZ).			Other (sp	ecify) >	
ī	Websit	e: ► WWW.THEARC.ORG			H Check	\	X if t	he organization is not
J	Tax-ex	empt status (check only one) $ \times$ 501(c) (3) \rightarrow (insert no.) \longrightarrow 4947(a)(1) or	527				lule B (Form 990, 990-EZ, or 990-PF).
K	Check	if the organization is not a section 509(a)(3) supporting organization and its g	ross re					
		Form 990 return is not required, but if the organization chooses to file a return	ı, be sı	re to file a	complete retui	rn.		
L	Add lin	es 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 9	90 ins	tead of Forr	n 990-EZ		▶ \$	2,683.
P	art I	Revenue, Expenses, and Changes in Net Assets or Fund	Bal	ances (S	See the instruc	tions	for Pa	rt I.)
	1	Contributions, gifts, grants, and similar amounts received					1	
	2	Program service revenue including government fees and contracts					2	
	3	Membership dues and assessments					3	
	4	Investment income					4	2,683.
	5a	Gross amount from sale of assets other than inventory	5a					
	b	Less: coşt or other basis and sales expenses	5b					
	С	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		5c	
ne	6 7							
Revenue	a	Gross revenue (not including \$ of contributions						
Re		reported on line 1)	6a					
	b	Less: direct expenses other than fundraising expenses	6b					
	С	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)					6c	
	7a	Gross sales of inventory, less returns and allowances	7a					
	b	Less: cost of goods sold	7b					
	С						7c	
	8							
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8				•	9	2,683.
	10	Grants and similar amounts paid (attach schedule)	STM	T 3			10	50,000.
	11	Benefits paid to or for members					11	
es	12	Salaries, other compensation, and employee benefits					12	
sus	13	Professional fees and other payments to independent contractors					13	3,551.
Expenses	14	Occupancy, rent, utilities, and maintenance						
ш	15	Printing, publications, postage, and shipping					15	
	16	Other expenses (describe >)	16	
	17	Total expenses. Add lines 10 through 16					17	53,551.
S	18	Excess or (deficit) for the year (Subtract line 17 from line 9)					18	<50 , 868 . >
set	19	Net assets or fund balances at beginning of year (from line 27, column (A))						
As		(must agree with end-of-year figure reported on prior year's return)					19	346,949.
Net Assets	20	Other changes in net assets or fund balances (attach explanation)					20	***************************************
Tecore.	21	Net assets or fund balances at end of year. Combine lines 18 through 20					21	296,081.
P	art II		ore, file				0 - EZ.	
		(See the instructions for Part II.)		(A)	Beginning of y			(B) End of year
22	2 Cas	sh, savings, and investments			356,6	95	• 22	309,212.
23		•					23	
24		er assets (describe 🚩)		<u> </u>	24	
25		al assets			356,6			309,212.
26		al liabilities (describe ►			9,7			
27		assets or fund balances (line 27 of column (B) must agree with line 21)			346,9	49	• 27	
932 02-	2171 08-10	LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate inst	ruction	18.				Form 990-EZ (2009)

FOUNDATION OF THE ARC OF THE UNITED STATES Form 990-EZ (2009)

What is the organization's primary exempt purpose? SEE STATEME Describe what was achieved in carrying out the organization's exempt the services provided, the number of persons benefited, and other release.	be (Required for and 501(c)(c) section 494 for others.)	xpenses or section 501(c)(3) 4) organizations and 7(a)(1) trusts; optional		
SUPPORTED THE CHARITABLE PURPOSES STATES, INC.	OF THE ARC OF	THE UNITE	<u>D</u>	
(Grants \$ 50,000 •) If this amount includes foreign	gn grants, check here	>	28a	50,000.
(Grants \$) If this amount includes fore	gn grants, check here	>	29a	
	gn grants, check here		30a	
31 Other program services (attach schedule) (Grants \$) If this amount includes fore	gn grants, check here		31a	
32 Total program service expenses (add lines 28a through 31a)			> 32	50,000.
Part IV List of Officers, Directors, Trustees, and Ke	ey Employees. List each one ev	en if not compensated. (
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
PETER BERNS (SEE STATEMENT 2)	CHIEF EXECUTI			
CINDY JOHNSON	1.00 PRESIDENT	0.	0.	0.
CINDI GOINBON	1.00	0.	0.	0.
JACK BLACKSTONE	VICE PRESIDEN			
	1.00	0.	0.	0.
NANCY WEBSTER	SECRETARY 1.00	0	0	0.
	1.00	U •	0.	0.
•				
932172		<u> </u>		
932172 02-08-10			Form	990-EZ (2009)

Form 990-EZ (2009)

Pa	Other Information (Note the statement requirements in the instructions for Part V.)			
			Yes	
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		X
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not			
	reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting,			
	and proxy tax requirements?	35a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	N/	A
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes,"			
	complete applicable parts of Sch. N	36		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions.			
b	Did the organization file Form 1120-POL for this year?	37b		X
	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made			
	in a prior year and still outstanding at the end of the period covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities 39b N/A			
40 a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911 ► O • ; section 4912 ► O • ; section 4955 ► O •			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the			
	year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction			
	has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		Х
C	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers			
	or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the			
	organization • 0.			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
	transaction? If "Yes," complete Form 8886-T	40e	*********	Х
41	List the states with which a copy of this return is filed. NONE			
42 a	The organization's books are in care of ► THE ARC OF THE UNITED STATES Telephone no. ► 202-53	34 - 3	705	
	Located at ► 1660 L STREET, NW, WASHINGTON, DC ZIP+4 ► 2			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority			
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No
	account)?	42b		Х
	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	**********	Х
	If "Yes," enter the name of the foreign country:			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/A		
		<u> </u>		
	~ 		Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			
	Form 990-EZ	44	1 0.00.00000000000000000000000000000000	Х
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be			

completed instead of Form 990-EZ

Form 99	90-EZ (2009) OF THE UNITED STATES			52-1559	702	•	Page
Part	Section 501(c)(3) organizations and section 49 organizations and section 4947(a)(1) nonexempt charitable to and 51.						
46 Di	d the organization engage in direct or indirect political campaign activities or	behalf of or in opposition to	candidates for publ	ic		Yes	No
					46		X
	d the organization engage in lobbying activities? If "Yes," complete Sche				47	ļ	X
	the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes,"				48 49a	1	X
	d the organization make any transfers to an exempt non-charitable related of "Yes," was the related organization a section 527 organization?				49a 49b		
50 Co	omplete this table for the organization's five highest compensated employees an \$100,000 of compensation from the organization. If there is none, enter "	s (other than officers, directors				ceived	more
	(a) Name and address of each employee paid more than \$100,000 NONE	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contribution to employee benefit plans & deferred compensation	(a oth	e) Expe ccount er allov	t and
51 Co	otal number of other employees paid over \$100,000 complete this table for the organization's five highest compensated independer ganization. If there is none, enter "None." NONE	ent contractors who each recei					
	(a) Name and address of each independent contractor paid more the	nan \$100,000	(b) Type of s	ervice (c) Con	npensa	tion
d To	otal number of other independent contractors each receiving over \$100,000		>				
Sign Here	Under penalties of perjury I declare that I have examined this return, including accorrect and complete. Declaration of preparer (when han officer) is based on all interest of the state o	ompanying schedules and statemer formation of which preparer has any	nts, and to the best of knowledge.	my knowledge and be	elief, It is	s true,	
	PETER BERNS, CHIEF EXECUTIVE Type or print name and title	OFFICER					
Paid Prepare		1 7 1 2 1 2 2	eck if self- ployed ▶	eparer's identifying n	umber	(See inst	tr.)
Use On	Firm's name (or yours GELMAN, ROSENBERG & FRE	EEDMAN	EIN	>			

4550 MONTGOMERY AVE., SUITE 650 NORTH

BETHESDA, MARYLAND 20814-2930

address, and ZIP + 4

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

no.

Phone ►

(301) 951-9090

► X Yes No Form 990-EZ (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

FOUNDATION OF THE ARC OF THE UNITED STATES

Employer identification number 52-1559702

Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 9 activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). X An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III - Functionally integrated **b** Type II ☐ Type III - Other e X By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III f supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? Х 11g(i) X (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? h Provide the following information about the supported organization(s). (iii) Type of (iv) Is the organization (v) Did you notify the (vi) Is the (i) Name of supported (vii) Amount of (ii) EIN organization in col. (i) organized in the U.S.? organization in col. **(i)** listed in your organization in col. organization support (described on lines 1-9 (i) of your support? governing document? above or IRC section (see instructions)) Yes No Yes No Yes No THE ARC OF THE U.S. 13-5642032509(A)(1) Х 50,000. 50,000.

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

Schedule A (Form 990 or 990-EZ) 2009

932021 02-08-10

	art II Support Schedule for	Organizations	Described in	Sections 170	0(b)(1)(A)(iv) and	1 170(b)(1)(A)(vi	raye 1
	(Complete only if you checke						,
Sec	ction A. Public Support		, , , , , , , , , , , , , , , , , , , ,				
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions, and	(a) 2000	(b) 2000	(0) 2007	(4) 2000	(e) 2009	(i) Total
•	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
2	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	İ					
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)				 		
	Public support. Subtract line 5 from line 4.						
	ction B. Total Support	T	T		1		
	endar year (or fiscal year beginning in)▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities	, etc. (see instructi	ons)			12	
13	First five years. If the Form 990 is fo	r the organization's	s first, second, th	ird, fourth, or fifth	tax year as a sectio	n 501(c)(3)	
_	organization, check this box and sto						>
	ction C. Computation of Publ						
14	Public support percentage for 2009 (line 6, column (f) d	ivided by line 11,	column (f))		14	
15	Public support percentage from 2008	3 Schedule A, Part	II, line 14			15	
16	a 33 1/3% support test - 2009.If the c	rganization d i d no	t check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies	as a publicly supp	orted organizatio	n			▶□
ı	b 33 1/3% support test - 2008 .If the c	organization did no	t check a box on	line 13 or 16a, and	d line 15 is 33 1/3%	or more, check this	box
	and stop here. The organization qua	lifies as a publicly :	supported organi	zation			
178	a 10% -facts-and-circumstances tes	i t - 2009. If the orga	anization did not	check a box on lin	e 13, 16a, or 16b, a	nd line 14 is 10% o	r more,
	and if the organization meets the "fac	cts-and-circumstan	ices" test, check	this box and stop	here. Explain in Pa	rt IV how the organiz	zation
	meets the "facts-and-circumstances"	test. The organize	ation qualifies as	a nublicly supports	ed organization		

Schedule A (Form 990 or 990-EZ) 2009

b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

	edule A (Form 990 or 990·EZ) 2009 rt III Support Schedule for C	Organizations	Described in	Section 509(a)(2) (Complete only	if you checked the b	Page 3 ox on line 9 of Part I.)
	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008 ·	(e) 2009	(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						
3	Gross receipts from activities that						
	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						
	furnished by a governmental unit to				:		
	the organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Sec	ction B. Total Support	,					
Cale	endar year (or fiscal year beginning in)►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10 <i>a</i>	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	r the organization'	s first, second, thi	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	ation,
	check this box and stop here						>
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2009 (line 8, column (f) c	livided by line 13, o	column (f))		15	%
16	Public support percentage from 2008	3 Schedule A, Part	III, line 15			16	%
Sec	ction D. Computation of Inve	stment Incom	e Percentage				
17	Investment income percentage for 20)09 (line 10c, colui	mn (f) divided by li	ne 13, column (f))		17	%
18	Investment income percentage from	2008 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2009. If the	organization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line ⁻	7 is not
	more than 33 1/3%, check this box a		-				
b	33 1/3% support tests - 2008. If the						
	line 18 is not more than 33 1/3%, che		<u>-</u>	•		-	
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check th	nis box and see in	structions	▶□
					Scl	nedule A (Form 99	0 or 990-E Z) 2009
9320	23 02-08-10						

FORM 990-EZ OTHER	LIABILITIES			STATEMENT	1
DESCRIPTION		BEG.	OF YEAR	END OF YEA	AR
DUE TO THE ARC OF THE UNITED STATES			9,746.	13,13	31.
TOTAL TO FORM 990-EZ, LINE 26			9,746.	13,1	
FOOTNOTES				STATEMENT	2

OFFICER AND KEY EMPLOYEE COMPENSATION:

THE FOUNDATION DOES NOT HAVE ANY EMPLOYEES. THE ARC OF THE UNITED STATES PERFORMS ALL ACCOUNTING PROCEDURES AND MANAGEMENT FUNCTIONS. THE FOUNDATION'S BOARD OF DIRECTOR'S OVERSEES THESE OPERATIONS.

FORM 990-EZ	CASH GRANTS AND ALLOCA	CASH GRANTS AND ALLOCATIONS		
CLASS OF ACTIVITY/GRANT	TEE'S NAME AND ADDRESS	GRANTEE'S RELATIONSHIP	AMOUNT	
GRANT THE ARC OF THE U.S. 1010 WAYNE AVENUE, SUITSILVER SPRING, MD 20910		SUPPORTED ORGANIZATION	50,000.	,
TOTAL INCLUDED ON FORM	990-EZ, LINE 10		50,000.	- =

		INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS					
A)	DIRECTLY OR	ANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL IRACT?	[]	YES	[X]	NO
В)		ANIZATION, DURING THE YEAR, PAY PREMIUMS, INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?.	• []	YES	[X]	NO

990-EZ PG 2 STATEMENT 5

TO PROMOTE, SUPPORT AND FURTHER THE INTERESTS AND PURPOSES OF THE ARC OF THE UNITED STATES, INC.