

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2024

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning JUL 1, 2024 and ending JUN 30, 2025

B Check if applicable: C Name of organization: ARLINGTON COMMUNITY FOUNDATION
D Employer identification number: 54-1602838
E Telephone number: (703) 243-4785
G Gross receipts \$: 31,122,315.
H(a) Is this a group return for subordinates?
H(b) Are all subordinates included?
I Tax-exempt status: 501(c)(3)
J Website: WWW.ARLCF.ORG
K Form of organization: Corporation
L Year of formation: 1991
M State of legal domicile: VA

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1 Mission statement, 2-7 Governance, 8-12 Revenue, 13-19 Expenses, 20-22 Net Assets or Fund Balances.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Sign Here: Signature of officer JENNIFER OWENS, PRESIDENT & CEO
Paid: Preparer's name KELLI PECK, signature KELLI PECK, Date 05/08/26, PTIN P01423033
Preparer Use Only: Firm's name RSM US LLP, Firm's address 9355 N WICKHAM ROAD, SUITE 304 MELBOURNE, FL 32940, Firm's EIN 42-0714325, Phone no. 321-751-6200

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [] No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: WE EXIST TO IDENTIFY AND ELEVATE THE NEEDS IN OUR COMMUNITY, AND TO ATTRACT AND DEPLOY CHARITABLE RESOURCES TO ADDRESS THOSE NEEDS. ACF STEWARDS THE GIFTS AND CHARITABLE LEGACIES OF INDIVIDUALS, FAMILIES AND BUSINESSES TO MEET NEEDS IN ARLINGTON AND BEYOND.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 4,100,432. including grants of \$ 3,482,950.) (Revenue \$ 48,751.) ARLINGTON COMMUNITY FOUNDATION'S COMMUNITY GRANTMAKING INCLUDES BOTH DISCRETIONARY AWARDS ALIGNED WITH OUR STRATEGIC INITIATIVES AND GRANTS MADE IN PARTNERSHIP WITH DONORS THROUGH FIELD-OF-INTEREST AND DONOR-ADVISED FUNDS. INDIVIDUALS, FAMILIES, AND BUSINESSES USE THE FOUNDATION AS A PLATFORM TO EXPLORE AND IMPLEMENT THEIR OWN CHARITABLE GOALS, SUPPORTED BY STAFF GUIDANCE AS DESIRED. OUR DISCRETIONARY GRANTMAKING PRIMARILY SUPPORTS DEMONSTRATION PILOTS AND INITIATIVES THAT MITIGATE THE DISPLACEMENT OF LOW INCOME RESIDENTS. KEY AREAS OF WORK INCLUDE DEEPLY AFFORDABLE HOUSING, ECONOMIC MOBILITY, AND ACCESSIBLE CHILDCARE. OUR ROLE IS TO WORK IN PARTNERSHIP WITH LOCAL GOVERNMENT, BUSINESSES, AND NONPROFIT ORGANIZATIONS TO SCALE COMMUNITY-CENTERED SOLUTIONS. THROUGH THIS DUAL APPROACH COMMUNITY

4b (Code:) (Expenses \$ 582,169. including grants of \$ 582,169.) (Revenue \$) ARLINGTON COMMUNITY FOUNDATION ADMINISTERS A WELL-ESTABLISHED SCHOLARSHIP PROGRAM THAT MAKES AWARDS TO APPROXIMATELY 200 STUDENTS EACH YEAR. THE PROGRAM IS FUNDED BY GENEROUS INDIVIDUALS, FAMILIES, BUSINESSES, AND ORGANIZATIONS, MANY OF WHOM ESTABLISH NAMED SCHOLARSHIPS TO HONOR LOVED ONES, EMPLOYEES, OR COMMUNITY MEMBERS. DONORS DEFINE THE ELIGIBILITY CRITERIA, SUCH AS ACADEMIC ACHIEVEMENT, FINANCIAL NEED, ATHLETIC INVOLVEMENT, OR COMMUNITY SERVICE, WHILE THE FOUNDATION'S SCHOLARSHIP COMMITTEE MANAGES THE SELECTION PROCESS, ENSURING BROAD OUTREACH AND EQUITABLE REVIEW ACROSS A DIVERSE APPLICANT POOL. IN ADDITION, CONTRIBUTIONS TO THE COMMUNITY SCHOLARSHIP FUND SUPPORT A GENERAL POOL OF AWARDS THAT RESPOND FLEXIBLY TO STUDENTS' DEMONSTRATED NEEDS AND ASPIRATIONS. THIS PROGRAM EXPANDS ACCESS TO

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 4,682,601.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>	X	
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		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 foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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 "Yes," complete Schedule G, Part I.</i> See instructions		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 22-38 covering various organizational requirements.

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 []

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 1a, 1b, 1c regarding Form 1096 and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee reporting, tax shelter transactions, and various organizational requirements.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included on line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 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?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 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?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 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.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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 The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed VA
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
THE FOUNDATION - (703) 243-4785
4601 N FAIRFAX DRIVE, SUITE 1050, ARLINGTON, VA 22203

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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JENNIFER OWENS PRESIDENT & CEO	40.00			X			250,274.	0.	30,645.	
(2) CHRISTINA COLE DIR OF PHILANTHROPY	30.00				X		149,231.	0.	4,477.	
(3) BRIAN MARROQUIN DIR GRANTS/INITIATIVES	40.00				X		119,594.	0.	5,885.	
(4) NICHOLAS KNOCK DIR OF COMMUNICATIONS	40.00				X		101,027.	0.	12,183.	
(5) PATRICIA RODRIGUEZ CHAIR	4.00	X		X			0.	0.	0.	
(6) DEB GANDY VICE CHAIR	4.00	X		X			0.	0.	0.	
(7) DANA LAIDHOLD TREASURER	2.00	X		X			0.	0.	0.	
(8) CARMEN OVIEDO SECRETARY	1.00	X		X			0.	0.	0.	
(9) DULCE CARRILLO TRUSTEE	1.00	X					0.	0.	0.	
(10) TANJA CASTRO TRUSTEE	1.00	X					0.	0.	0.	
(11) LEVAR CROOMS TRUSTEE	1.00	X					0.	0.	0.	
(12) DIMPLE DHABALIA TRUSTEE	1.00	X					0.	0.	0.	
(13) JADE GONG TRUSTEE	1.00	X					0.	0.	0.	
(14) JASON HOWELL TRUSTEE	1.00	X					0.	0.	0.	
(15) DAN MCCABE TRUSTEE	1.00	X					0.	0.	0.	
(16) NANCY MCELDOWNEY TRUSTEE	1.00	X					0.	0.	0.	
(17) CHRIS MUSTO TRUSTEE	1.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) KARRENTHYA SIMMONS TRUSTEE	1.00	X						0.	0.	0.
(19) ASHLEIGH SIMPSON TRUSTEE	1.00	X						0.	0.	0.
1b Subtotal								620,126.	0.	53,190.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								620,126.	0.	53,190.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 4

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

Part VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	238,628.				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f	15,171,365.				
	g	Noncash contributions included in lines 1a-1f	1g	\$ 5,048,071.				
	h	Total. Add lines 1a-1f		15,409,993.				
Program Service Revenue	2 a	FUND MANAGEMENT FEES	Business Code					
			523000	48,751.	48,751.			
	b							
	c							
	d							
	e							
	f	All other program service revenue						
g	Total. Add lines 2a-2f		48,751.					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,025,083.			1,025,083.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross rents	6a	(i) Real				
				(ii) Personal				
	b	Less: rental expenses ...	6b					
	c	Rental income or (loss)	6c					
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	7a	(i) Securities				
				(ii) Other				
					14,618,829.			
	b	Less: cost or other basis and sales expenses	7b	14,561,426.				
	c	Gain or (loss)	7c	57,403.				
d	Net gain or (loss)		57,403.			57,403.		
8 a	Gross income from fundraising events (not including \$ 238,628. of contributions reported on line 1c). See Part IV, line 18	8a		0.				
			8b	53,836.				
c	Net income or (loss) from fundraising events		-53,836.			-53,836.		
9 a	Gross income from gaming activities. See Part IV, line 19	9a						
			9b					
c	Net income or (loss) from gaming activities							
10 a	Gross sales of inventory, less returns and allowances	10a						
			10b					
			10c					
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a	OTHER INCOME	Business Code	900099	19,659.		19,659.	
	b							
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d		19,659.				
12	Total revenue. See instructions		16,507,053.	48,751.	0.	1,048,309.		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	3,482,950.	3,482,950.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	582,169.	582,169.		
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, trustees, and key employees	315,920.	145,875.	57,661.	112,384.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	569,344.	262,893.	103,915.	202,536.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	16,230.	7,494.	2,962.	5,774.
9 Other employee benefits	20,681.	9,549.	3,775.	7,357.
10 Payroll taxes	59,911.	27,663.	10,935.	21,313.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	211,079.	139,705.	26,338.	45,036.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	114,132.		114,132.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	31,665.			31,665.
13 Office expenses	30,934.	4,528.	22,898.	3,508.
14 Information technology				
15 Royalties				
16 Occupancy	17,223.	8,158.	3,224.	5,841.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	17,056.	8,528.	8,528.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	7,360.		7,360.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a UNCOLLECTIBLE PLEDGE	10,000.		10,000.	
b DUES AND SUBSCRIPTIONS	5,543.	2,559.	1,012.	1,972.
c TAXES LICENSES AND FEES	1,149.	530.	210.	409.
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	5,493,346.	4,682,601.	372,950.	437,795.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	9,970.	1	26,251.
	2 Savings and temporary cash investments	6,798,377.	2	6,638,118.
	3 Pledges and grants receivable, net	215,500.	3	27,500.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	36,867.	9	67,838.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 31,113.		
	b Less: accumulated depreciation	10b 20,964.		
	11 Investments - publicly traded securities	27,848,710.	11	31,069,489.
	12 Investments - other securities. See Part IV, line 11		12	12,786,815.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	181,370.	15	0.
16 Total assets. Add lines 1 through 15 (must equal line 33)	35,102,656.	16	50,626,160.	
Liabilities	17 Accounts payable and accrued expenses	91,581.	17	56,901.
	18 Grants payable	694,917.	18	611,420.
	19 Deferred revenue		19	15,309.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	5,505,698.	21	7,717,118.
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	186,849.	25	100,804.
	26 Total liabilities. Add lines 17 through 25	6,479,045.	26	8,501,552.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	26,631,370.	27	40,069,481.
	28 Net assets with donor restrictions	1,992,241.	28	2,055,127.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	28,623,611.	32	42,124,608.
33 Total liabilities and net assets/fund balances	35,102,656.	33	50,626,160.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	16,507,053.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,493,346.
3	Revenue less expenses. Subtract line 2 from line 1	3	11,013,707.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	28,623,611.
5	Net unrealized gains (losses) on investments	5	2,487,290.
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	42,124,608.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization: ARLINGTON COMMUNITY FOUNDATION
Employer identification number: 54-1602838

Part I 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 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 section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)
3 [] A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
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 state:
5 [] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
6 [] A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 [X] 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.)
8 [] A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9 [] An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
10 [] An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
11 [] An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
12 [] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
a [] Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
b [] Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
c [] Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
d [] Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
e [] Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations
g Provide the following information about the supported organization(s).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Includes a Total row at the bottom.

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,337,358.	12,401,706.	5,641,320.	7,334,289.	15,409,993.	44,124,666.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	3,337,358.	12,401,706.	5,641,320.	7,334,289.	15,409,993.	44,124,666.
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)						16,262,941.
6 Public support. Subtract line 5 from line 4.						27,861,725.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	3,337,358.	12,401,706.	5,641,320.	7,334,289.	15,409,993.	44,124,666.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	529,479.	571,007.	607,289.	803,208.	1,025,083.	3,536,066.
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.)					19,659.	19,659.
11 Total support. Add lines 7 through 10						47,680,391.
12 Gross receipts from related activities, etc. (see instructions)					12	227,073.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	58.43 %
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	51.67 %
16a 33 1/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2023. 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 qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2024. 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 facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2023. 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 VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
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		<input type="checkbox"/>

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.)

Section A. Public Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 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 the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2023 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2023 Schedule A, Part III, line 17 18%.

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11a		
11b		
11c		

Section 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 "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>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.</i>		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>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).</i>		
1		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> 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? <i>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.</i>		
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? <i>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.</i>		
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? <i>If "Yes" or "No," provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
2a		
2b		
3a		
3b		

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.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	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	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

**Schedule B
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization ARLINGTON COMMUNITY FOUNDATION	Employer identification number 54-1602838
--	--

Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ 501(c)(3) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization
- Form 990-PF 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization ARLINGTON COMMUNITY FOUNDATION	Employer identification number 54-1602838
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 3,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 2,104,396.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 2,060,086.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 1,385,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ 788,280.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ 400,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ARLINGTON COMMUNITY FOUNDATION	Employer identification number 54-1602838
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	PUBLIC SECURITIES _____ _____ _____	\$ 102,885.	12/17/24
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization ARLINGTON COMMUNITY FOUNDATION	Employer identification number 54-1602838
--	--

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2024

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

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

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

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

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

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

Name of organization ARLINGTON COMMUNITY FOUNDATION	Employer identification number (EIN) 54-1602838
---	---

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

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures \$ _____
- 3 Volunteer hours for political campaign activities _____

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses, and EINs of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

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

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)	0.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)	30,178.													
c Total lobbying expenditures (add lines 1a and 1b)	30,178.													
d Other exempt purpose expenditures	3,549,036.													
e Total exempt purpose expenditures (add lines 1c and 1d)	3,579,214.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	328,961.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: left;">IF the amount on line 1e, column (a) or (b), is:</th> <th style="text-align: left;">THEN the lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:	not over \$500,000	20% of the amount on line 1e.	over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	over \$17,000,000	\$1,000,000.		
IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:													
not over \$500,000	20% of the amount on line 1e.													
over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)	82,240.													
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
2a Lobbying nontaxable amount			452,147.	328,961.	781,108.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,171,662.
c Total lobbying expenditures			37,586.	30,178.	67,764.
d Grassroots nontaxable amount			113,037.	82,240.	195,277.
e Grassroots ceiling amount (150% of line 2d, column (e))					292,916.
f Grassroots lobbying expenditures					

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

Table with 4 columns: Question, (a) Yes, (a) No, (b) Amount. Rows include questions about lobbying activities like volunteers, staff, media, mailings, etc.

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include questions about dues, lobbying expenditures, and carryover.

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

Table with 3 columns: Question, Yes, No. Rows include questions about dues, lobbying expenditures, and taxable amounts.

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Blank lines for providing supplemental information as required by the instructions.

SCHEDULE D
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

ARLINGTON COMMUNITY FOUNDATION

Employer identification number

54-1602838

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	86	151
2 Aggregate value of contributions to (during year)	7,854,650.	9,848,313.
3 Aggregate value of grants from (during year)	2,485,401.	1,634,520.
4 Aggregate value at end of year	19,945,566.	22,179,039.
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year _____

4 Number of states where property subject to conservation easement is located _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1 \$ _____

(ii) Assets included in Form 990, Part X \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 \$ _____

b Assets included in Form 990, Part X \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,906,741.	1,764,259.	1,666,860.	2,104,096.	1,666,204.
b Contributions	18,487.	11,718.	20,068.	41,918.	26,780.
c Net investment earnings, gains, and losses	241,890.	243,330.	180,118.	-286,256.	497,175.
d Grants or scholarships	76,166.				
e Other expenditures for facilities and programs		112,566.	102,787.	192,898.	86,063.
f Administrative expenses	35,825.				
g End of year balance	2,055,127.	1,906,741.	1,764,259.	1,666,860.	2,104,096.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 1.9100 %
 - b Permanent endowment .0000 %
 - c Term endowment 98.0900 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|-------------------------------------|-------------------------------------|
| (i) Unrelated organizations? | | <input checked="" type="checkbox"/> |
| (ii) Related organizations? | | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | <input checked="" type="checkbox"/> | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		31,113.	20,964.	10,149.
d Equipment				
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				10,149.

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) ISHARES CORE S & P 500	12,786,815.	COST
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	12,786,815.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) RIGHT-OF-USE OPERATING LEASE	100,804.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	100,804.

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 ...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	18,934,047.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a 2,487,290.		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d 53,836.		
e	Add lines 2a through 2d		2e	2,541,126.
3	Subtract line 2e from line 1		3	16,392,921.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 114,132.		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	114,132.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	16,507,053.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	5,433,050.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d 53,836.		
e	Add lines 2a through 2d		2e	53,836.
3	Subtract line 2e from line 1		3	5,379,214.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 114,132.		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	114,132.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	5,493,346.

Part XIII Supplemental Information

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

PART IV, LINE 2B:

THE FOUNDATION OFFERS AGENCY FUNDS AS AN INVESTMENT OPTION FOR NONPROFIT ORGANIZATIONS. THE FOUNDATION HOLDS AND MANAGES FINANCIAL ASSETS IN INVESTMENT FUNDS ON BEHALF OF THESE ORGANIZATIONS TO HELP PROVIDE A WAY TO BUILD AN ENDOWMENT OR A RESERVE FOR THEM.

PART V, LINE 4:

FULFILLMENT OF ACF'S MISSION, OR THE WRITTEN INSTRUCTIONS OF THE DONOR AS PROVIDED.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSE 53,836.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSE 53,836.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		SPIRIT OF COMMUNITY (event type)	(event type)	NONE (total number)	
Revenue	1	Gross receipts	238,628.		238,628.
	2	Less: Contributions	238,628.		238,628.
	3	Gross income (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	53,836.		53,836.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			53,836.
	11	Net income summary. Subtract line 10 from line 3, column (d)			-53,836.

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

**SCHEDULE I
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization **ARLINGTON COMMUNITY FOUNDATION** Employer identification number **54-1602838**

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
703 WARRIORS 3311 20TH ST N ARLINGTON, VA 22207	93-4761605	501C3	12,000.	0.			GENERAL SUPPORT
9/11 DAY 5151 CALIFORNIA AVENUE, SUITE 100 IRVINE, CA 92617	45-0491886	501C3	100,000.	0.			GENERAL SUPPORT
AFFORDABLE HOMES & COMMUNITIES (AHC) - 2230 N FAIRFAX DR SUITE 100 - ARLINGTON, VA 22201	54-1026365	501C3	252,856.	0.			HOUSING & SHELTER
AMERICAN CIVIL LIBERTIES UNION (ACLU) FOUNDATION - 125 BROAD ST., 18TH FLOOR - NEW YORK, NY 10004-2400	13-6213516	501C3	12,700.	0.			LEGAL SERVICES
AMERICAN RED CROSS, NATIONAL CAPITAL & GREATER CHESAPEAKE REGION - 8550 ARLINGTON BLVD. - FAIRFAX, VA 22031	53-0196605	501C3	25,600.	0.			PUBLIC SAFETY, DISASTER PREPAREDNESS AND RELIEF
ANIMAL WELFARE LEAGUE OF ARLINGTON (AWLA) - 2650 S. ARLINGTON MILL DRIVE - ARLINGTON, VA 22206	54-0603502	501C3	39,000.	0.			ANIMALS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 114.

3 Enter total number of other organizations listed in the line 1 table 0.

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

Schedule I (Form 990) (Rev. 12-2024)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANNIE'S HOME 1509 CHURCH ST. PHILADELPHIA, PA 19124	99-1715981	501C3	30,000.	0.			GENERAL SUPPORT
ARLINGTON BRIDGE BUILDERS 5201 1ST ST N ARLINGTON, VA 22203-1253	90-0950744	501C3	35,000.	0.			GENERAL SUPPORT
ARLINGTON COUNTY / DEPARTMENT OF PARKS AND RECREATION - 2100 CLARENDON BLVD SUITE 414 - ARLINGTON, VA 22201	54-6001123	501C3	15,000.	0.			GENERAL SUPPORT
ARLINGTON COUNTY / TREASURER'S OFFICE - 2100 CLARENDON BLVD. SUITE #201 - ARLINGTON, VA 22201	54-6001123	501C3	10,714.	0.			EDUCATION
ARLINGTON COUNTY BAR FOUNDATION 1809 N. ADAMS ST. ARLINGTON, VA 22201	52-1398762	501C3	5,460.	0.			VOLUNTARISM & PHILANTHROPY
ARLINGTON FOOD ASSISTANCE CENTER (AFAC) - 2708 S. NELSON ST. - ARLINGTON, VA 22206	54-1473207	501C3	65,350.	0.			FOOD AND NUTRITION
ARLINGTON FREE CLINIC 2921 11TH STREET SOUTH ARLINGTON, VA 22204	54-1671883	501C3	40,900.	0.			HEALTH CARE
ARLINGTON LITTLE LEAGUE, INC. PO BOX 3755 ARLINGTON, VA 22203	51-0256066	501C3	24,000.	0.			RECREATION, SPORTS, LEISURE, ATHLETICS
ARLINGTON NEIGHBORHOOD VILLAGE 4000 LORCOM LANE ARLINGTON, VA 22207	46-3591812	501C3	11,500.	0.			HOUSING & SHELTER

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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ARLINGTON OUTDOOR EDUCATION ASSOCIATION - PO BOX 5646 - ARLINGTON, VA 22205-0146	54-0840089	501C3	5,525.	0.			EDUCATION
ARLINGTON PUBLIC SCHOOL DISTRICT / ABINGDON ELEMENTARY SCHOOL - 3035 S. ABINGDON STREET - ARLINGTON, VA 22204	54-6001128	501C3	11,200.	0.			YOUTH DEVELOPMENT
ARLINGTON PUBLIC SCHOOL DISTRICT / BARCROFT ELEMENTARY SCHOOL - 625 S. WAKEFIELD ST. - ARLINGTON, VA 22204	54-6001128	501C3	5,917.	0.			YOUTH DEVELOPMENT
ARLINGTON PUBLIC SCHOOL DISTRICT / CAMPBELL ELEMENTARY SCHOOL - 737 S. CARLIN SPRINGS RD. - ARLINGTON, VA 22204	54-6001123	501C3	6,450.	0.			EDUCATION
ARLINGTON PUBLIC SCHOOL DISTRICT / CARLIN SPRINGS ELEMENTARY SCHOOL - 5995 SOUTH 5TH RD. - ARLINGTON, VA 22204	54-6001128	501C3	10,881.	0.			YOUTH DEVELOPMENT
ARLINGTON PUBLIC SCHOOL DISTRICT / DR. CHARLES R. DREW ELEMENTARY - 3500 S. 23RD ST. - ARLINGTON, VA 22206	54-6001128	501C3	6,216.	0.			GENERAL SUPPORT
ARLINGTON PUBLIC SCHOOL DISTRICT / HOFFMAN-BOSTON ELEMENTARY SCHOOL - 1415 S. QUEEN ST. - ARLINGTON, VA 22204	54-6001123	501C3	11,054.	0.			EDUCATION
ARLINGTON PUBLIC SCHOOL DISTRICT / RANDOLPH ELEMENTARY SCHOOL - 1306 S. QUINCY ST. - ARLINGTON, VA 22204	54-6001128	501C3	10,138.	0.			YOUTH DEVELOPMENT
ARLINGTON SCHOOL ADMINISTRATORS 720 N FILLMORE ST ARLINGTON, VA 22201-2029	54-0975043	501C3	19,670.	0.			EDUCATION

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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ARLINGTON THRIVE PO BOX 7429 ARLINGTON, VA 22207	51-0207684	501C3	71,699.	0.			HUMAN SERVICES
ASPIRE! AFTERSCHOOL LEARNING PO BOX 41318 ARLINGTON, VA 22204	54-1705642	501C3	54,450.	0.			YOUTH DEVELOPMENT
ATLANTA MISSION 2353 BOLTON RD NW ATLANTA, GA 30318	58-0572430	501C3	10,000.	0.			GENERAL SUPPORT
AYUDA 1413 K STREET NW FIFTH FLOOR WASHINGTON, DC 20005	52-0971440	501C3	6,000.	0.			HUMAN SERVICES
BIG BROTHERS BIG SISTERS OF AMERICA - 2502 N ROCKY POINT DR STE 100 - TAMPA, FL 33607	23-1365190	501C3	9,389.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUBS OF AMERICA 1275 PEACHTREE ST NE ATLANTA, GA 30309	13-5562976	501C3	10,044.	0.			GENERAL SUPPORT
CALIFORNIA RESTAURANT FOUNDATION 621 CAPITOL MALL STE 2000 SACRAMENTO, CA 95814	95-3676330	501C3	25,000.	0.			GENERAL SUPPORT
CENTER FOR RENEWABLE ENERGY AND APPROPRIATE TECHNOLOGY FOR THE ENVIRONMENT (CREA - 132 EAST BROADWAY, SUITE 416 - EUGENE, OR	26-1535453	501C3	60,000.	0.			GENERAL SUPPORT
CENTER FOR YOUTH AND FAMILY ADVOCACY - 2111 WILSON BLVD, 8TH FLOOR - ARLINGTON, VA 22201	82-4681676	501C3	11,500.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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CENTERS FOR OPPORTUNITY 12020 SUNRISE VALLEY DR, STE 100 RESTON, VA 20191-3429	45-2910746	501C3	5,158.	0.			GENERAL SUPPORT
CHALLENGING RACISM PO BOX 4743 ARLINGTON, VA 22204-0743	81-2305195	501C3	51,250.	0.			EQUITY & JUSTICE
CHAUTAUQUA INSTITUTION PO BOX 28, ONE AMES AVE. CHAUTAUQUA, NY 14722	16-0758844	501C3	17,500.	0.			GENERAL SUPPORT
CHURCH OF THE LITTLE FLOWER 5607 MASSACHUSETTS AVENUE BETHESDA, MD 20817	53-0233067	501C3	25,000.	0.			GENERAL SUPPORT
CLOTHESLINE FOR ARLINGTON KIDS 3330 WASHINGTON BLVD, SUITE 200 ARLINGTON, VA 22201	81-5100482	501C3	15,500.	0.			HUMAN SERVICES
COMMUNITY FOUNDATION FOR A GREATER RICHMOND - 3409 MOORE STREET - RICHMOND, VA 23230	23-7009135	501C3	9,407.	0.			GENERAL SUPPORT
CULINARY CARE 1 E ERIE ST, STE 525 PMB 4179 CHICAGO, IL 60611-2980	46-1080873	501C3	10,000.	0.			GENERAL SUPPORT
CULPEPPER GARDEN 4435 N. PERSHING DRIVE ARLINGTON, VA 22203	54-1873290	501C3	32,500.	0.			GENERAL SUPPORT
DEED COMMUNITY GIVING FOUNDATION 25 KENT AVE, FLOOR 4 BROOKLYN, NY 11249	88-3801559	501C3	224,303.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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DEMOCRACY FORWARD FOUNDATION PO BOX 34553 WASHINGTON, DC 20043	82-1007988	501C3	6,750.	0.			GENERAL SUPPORT
DISCOVERY ELEMENTARY SCHOOL PTA 5241 N. 36TH ST. ARLINGTON, VA 22207	47-1132364	501C3	6,127.	0.			GENERAL SUPPORT
DOCTORS WITHOUT BORDERS 40 RECTOR STREET, 16TH FLOOR NEW YORK, NY 10006	13-3433452	501C3	6,250.	0.			HEALTH CARE
DON BOSCO CRISTO REY HIGH SCHOOL 1010 LARCH AVE TAKOMA PARK, MD 20912-6521	06-1786297	501C3	15,000.	0.			EDUCATION
DOORWAYS PO BOX 100185 ARLINGTON, VA 22210	54-1087829	501C3	28,100.	0.			HOUSING & SHELTER
ECOACTION ARLINGTON 3308 S. STAFFORD ST. ARLINGTON, VA 22206	54-1094546	501C3	11,400.	0.			ENVIRONMENT
FEEDING AMERICA 161 N CLARK STREET, SUITE 700 CHICAGO, IL 60601	36-3673599	501C3	15,066.	0.			GENERAL SUPPORT
FEEDING TAMPA BAY 4702 TRANSPORT DRIVE, BLDG 6 TAMPA, FL 33605	59-2116576	501C3	25,000.	0.			GENERAL SUPPORT
FOUNTAIN HOUSE INC. 425 W 47TH ST NEW YORK, NY 10036	13-1624009	501C3	10,000.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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FRESHFARM 1380 MONROE ST #605 WASHINGTON, DC 20010	35-2169859	501C3	15,000.	0.			GENERAL SUPPORT
GEORGETOWN VISITATION PREPARATORY SCHOOL - 1524 35TH STREET NW - WASHINGTON, DC 20007	47-1142687	501C3	7,700.	0.			GENERAL SUPPORT
GIRLS ON THE RUN NORTHERN VIRGINIA 10301 DEMOCRACY LANE #100 FAIRFAX, VA 22030	54-2026885	501C3	5,060.	0.			GENERAL SUPPORT
GREATER CLEVELAND FOOD BANK, INC. 15500 S WATERLOO RD CLEVELAND, OH 44110	34-1292848	501C3	53,000.	0.			GENERAL SUPPORT
HABITAT FOR HUMANITY INTERNATIONAL 322 WEST LAMAR STREET AMERICUS, GA 31709	91-1914868	501C3	8,515.	0.			HOUSING & SHELTER
HILLSDALE COLLEGE OFFICE OF STUDENT FINANCIAL AID, 33 E. COLLEGE ST. - HILLSDALE, MI 49242	38-1374230	501C3	5,300.	0.			GENERAL SUPPORT
HUMAN RIGHTS CAMPAIGN FOUNDATION 1640 RHODE ISLAND AVE NW WASHINGTON, DC 20036-3200	52-1481896	501C3	6,987.	0.			GENERAL SUPPORT
INSPIRE ACCESS INC 1100 WILSON BOULEVARD, SUITE 1000 ARLINGTON, VA 22209	88-3094715	501C3	50,000.	0.			VOLUNTARISM & PHILANTHROPY
JOHN CARROLL SOCIETY ARCHDIOCESE OF WASHINGTON - PO BOX 454 - GLEN ECHO, MD 20812	53-0196623	501C3	10,000.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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JUNIOR ACHIEVEMENT OF GREATER WASHINGTON - 1050 17TH ST NW, STE 750 - WASHINGTON, DC 20036-5593	54-0788947	501C3	27,000.	0.			GENERAL SUPPORT
JUST NEIGHBORS 7630 LITTLE RIVER TURNPIKE SUITE 90 ANNANDALE, VA 22003	54-1820633	501C3	61,900.	0.			LEGAL SERVICES
JUSTIN-SIENA 4026 MAHER STREET NAPA, CA 94558	94-2168313	501C3	7,500.	0.			EDUCATION
KENNEDY CENTER PO BOX 96533 WASHINGTON, DC 20090-6533	53-0245017	501C3	11,800.	0.			ARTS, CULTURE & HUMANITIES
LA MANO AMIGA 2000 N DINWIDDIE ST ARLINGTON, VA 22207	99-1180409	501C3	17,500.	0.			GENERAL SUPPORT
LEGAL AID JUSTICE CENTER 6400 ARLINGTON BOULEVARD, SUITE 600 FALLS CHURCH, VA 22042	54-0884513	501C3	57,500.	0.			GENERAL SUPPORT
LEGAL SERVICES OF NORTHERN VIRGINIA - 10700 PAGE AVENUE SUITE 100 - FAIRFAX, VA 22030	54-1137931	501C3	10,000.	0.			LEGAL SERVICES
LOS ANGELES FIRE DEPARTMENT FOUNDATION - 1700 STADIUM WAY STE 100 - LOS ANGELES, CA 90012-1404	27-2007326	501C3	50,000.	0.			GENERAL SUPPORT
LYON PARK COMMUNITY CENTER 414 N. FILLMORE ST ARLINGTON, VA 22201	65-1317810	501C3	10,000.	0.			ENVIRONMENT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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MARYMOUNT UNIVERSITY 2807 N. GLEBE ROAD ARLINGTON, VA 22207	54-0573801	501C3	112,500.	0.			EDUCATION
MORGAN ADAMS FOUNDATION 5303 E. EVANS AVENUE, SUITE 200 DENVER, CO 80222	20-0165051	501C3	35,000.	0.			HEALTH CARE
MUSEUM OF CONTEMPORARY ART ARLINGTON - 3550 WILSON BLVD. - ARLINGTON, VA 22201	23-7382322	501C3	6,000.	0.			ARTS, CULTURE & HUMANITIES
NATIONAL ALLIANCE ON MENTAL ILLNESS (NAMI) NORTHERN VIRGINIA - PO BOX 480 - OAKTON, VA 22124	51-0241920	501C3	8,500.	0.			MENTAL HEALTH
NATIONAL CAPITAL TREATMENT AND RECOVERY (PHOENIX HOUSE) - 200 N GLEBE RD, SUITE 104 - ARLINGTON, VA 22203	54-0805530	501C3	21,800.	0.			HUMAN SERVICES
NATIONAL GALLERY OF ART 2000B SOUTH CLUB DRIVE HYATTSVILLE, MD 20785	53-6001666	501C3	11,000.	0.			ARTS, CULTURE & HUMANITIES
NATIONAL LINKS TRUST PO BOX 42097, 5636 CONNECTICUT AVE WASHINGTON, DC 20015	84-2249627	501C3	6,500.	0.			GENERAL SUPPORT
NEWPORT CENTRAL CATHOLIC HIGH SCHOOL - 13 CAROTHERS RD. - NEWPORT, KY 41071	61-0444746	501C3	50,000.	0.			GENERAL SUPPORT
NORTHERN VIRGINIA COMMUNITY COLLEGE - 8333 LITTLE RIVER TURNPIKE, COLLEGE FINANCIAL AID OFFICE, CA BUILDING, ROOM -	51-0249730	501C3	6,000.	0.			EDUCATION

Schedule I (Form 990)

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NORTHERN VIRGINIA CONSERVATION TRUST - 4022 HUMMER RD - ANNANDALE, VA 22003	54-1724626	501C3	9,987.	0.			ENVIRONMENT
OAR OF ARLINGTON, ALEXANDRIA, AND FALLS CHURCH - PO BOX 41030 - ARLINGTON, VA 22204	54-1024562	501C3	9,000.	0.			LEGAL SERVICES
PACK SHACK OF NORTHWEST ARKANSAS 1091 E LOWELL AVE CAVE SPRINGS, AR 72718	46-3323793	501C3	49,900.	0.			GENERAL SUPPORT
PATHFORWARD 2020-A 14TH ST N ARLINGTON, VA 22201	54-1615993	501C3	44,100.	0.			HOUSING & SHELTER
PHOENIX BIKES 909 S DINWIDDIE ST ARLINGTON, VA 22204-2983	20-8842260	501C3	7,806.	0.			RECREATION, SPORTS, LEISURE, ATHLETICS
PIANO & MORE 5877 WASHINGTON BLVD #5262 ARLINGTON, VA 22205	38-4077902	501C3	5,113.	0.			GENERAL SUPPORT
PLANNED PARENTHOOD FEDERATION OF AMERICA - 123 WILLIAM STREET 10TH FLOOR - NEW YORK, NY 10038	13-1644147	501C3	5,500.	0.			EQUITY & JUSTICE
PLANNED PARENTHOOD OF METROPOLITAN WASHINGTON DC, INC. - 1225 4TH STREET NE - WASHINGTON, DC 20002	53-0204621	501C3	55,500.	0.			EQUITY & JUSTICE
PROVINCE OF ST. AUGUSTINE OF THE CAPUCHIN ORDER - 220 37TH STREET - PITTSBURGH, PA 15201	25-6028798	501C3	10,000.	0.			RELIGIOUS/FAITH-BASED

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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RANDOLPH-MACON COLLEGE OFFICE OF FINANCIAL AID, P.O. BOX 5 ASHLAND, VA 23005	54-0505940	501C3	12,500.	0.			GENERAL SUPPORT
READ EARLY AND DAILY (R.E.A.D.) 113 N GALVESTON ST. ARLINGTON, VA 22203	82-3345797	501C3	5,050.	0.			GENERAL SUPPORT
ROMAN CATHOLIC ARCHDIOCESE OF WASHINGTON, DC - PO BOX 29260 - WASHINGTON, DC 20017	53-0196550	501C3	10,000.	0.			RELIGIOUS/FAITH-BASED
SECOND HARVEST FOOD BANK OF METROLINA INC - 500B SPRATT STREET - CHARLOTTE, NC 28206	56-1352593	501C3	25,000.	0.			GENERAL SUPPORT
SHARE OUR STRENGTH 1030 15TH ST NW, SUITE 1100 W WASHINGTON, DC 20005	52-1367538	501C3	10,000.	0.			GENERAL SUPPORT
SHIRLINGTON EMPLOYMENT & EDUCATION CENTER (SEEC) - 2701 S. NELSON STREET - ARLINGTON, VA 22206	54-2036192	501C3	6,500.	0.			GENERAL SUPPORT
SIGNATURE THEATRE 4200 CAMPBELL AVENUE ARLINGTON, VA 22206	62-1417785	501C3	39,966.	0.			ARTS, CULTURE & HUMANITIES
SISTERS, SERVANTS OF THE IMMACULATE HEART OF MARY, SCRANTON, PENNSYLVANIA - 2300 ADAMS AVENUE - SCRANTON, PA 18509	24-0795454	501C3	10,000.	0.			GENERAL SUPPORT
ST. GEORGE'S EPISCOPAL CHURCH (ARLINGTON) - 915 N. OAKLAND ST. - ARLINGTON, VA 22203	54-0630773	501C3	25,000.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST. MARY'S FOOD BANK 2831 N 31ST AVE PHOENIX, AZ 85009	23-7353532	501C3	110,000.	0.			FOOD AND NUTRITION
STUDENT CONSERVATION ASSOCIATION, INC. - 4245 N. FAIRFAX AVE, STE 825 - ARLINGTON, VA 22203	91-0880684	501C3	25,000.	0.			GENERAL SUPPORT
TEMPLE RODEF SHALOM 2100 WESTMORELAND ST. FALLS CHURCH, VA 22043	54-0733866	501C3	9,387.	0.			RELIGIOUS/FAITH-BASED
THE LEADVILLE INSTITUTE 121 S. TEJON ST., SUITE 900 COLORADO SPRINGS, CO 80903	27-1521706	501C3	16,000.	0.			EDUCATION
THE NATURE CONSERVANCY 4245 FAIRFAX DR STE 100 ARLINGTON, VA 22203-1637	53-0242652	501C3	5,300.	0.			ENVIRONMENT
TOUGH2GETHER FOUNDATION 1600 POYNTZ AVE MANHATTAN, KS 66547	92-1204987	501C3	70,500.	0.			HEALTH CARE
TRUE GROUND HOUSING PARTNERS, INC 4318 N CARLIN SPRINGS RD ARLINGTON, VA 22203-2006	54-1515133	501C3	81,776.	0.			HOUSING & SHELTER
TRUSTEES OF BOSTON UNIVERSITY 72 EAST CONCORD ST. BOSTON, MA 02118	04-2103547	501C3	20,000.	0.			EDUCATION
UNITED WAY OF CENTRAL & SOUTHERN UTAH - 148 N 100 W - PROVO, UT 84601	94-2851681	501C3	5,200.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF THE PIEDMONT, INC. PO BOX 5624 SPARTANBURG, SC 29304	57-0314377	501C3	25,000.	0.			GENERAL SUPPORT
UNIVERSITY OF MIAMI 1306 STANFORD DRIVE, UC 209 MIAMI, FL 33146	59-0624458	501C3	12,500.	0.			GENERAL SUPPORT
VA TECH FOUNDATION INC. 902 PRICES FORK ROAD BLACKSBURG, VA 24061	54-0721690	501C3	6,000.	0.			EDUCATION
VHC HEALTH FOUNDATION 1701 NORTH GEORGE MASON DRIVE ARLINGTON, VA 22205	20-4129901	501C3	8,450.	0.			HEALTH CARE
WARRIOR CANINE CONNECTION 14934 SCHAEFFER ROAD BOYDS, MD 20841	45-2981579	501C3	11,600.	0.			VETERANS SUPPORT
WEST LOUISVILLE TENNIS CLUB INC. PO BOX 11220 LOUISVILLE, KY 40251	31-1093766	501C3	20,000.	0.			GENERAL SUPPORT
WESTERN RESERVE ACADEMY 115 COLLEGE STREET HUDSON, OH 44236	34-0714390	501C3	10,001.	0.			GENERAL SUPPORT
WORLD CENTRAL KITCHEN 200 MASSACHUSETTS AVE NW, 7TH FLOOR WASHINGTON, DC 20001	27-3521132	501C3	36,000.	0.			FOOD AND NUTRITION
YMCA OF METROPOLITAN WASHINGTON / ARLINGTON BRANCH - 3422 N. 13TH STREET - ARLINGTON, VA 22201	53-0207403	501C3	15,700.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
EDUCATIONAL ASSISTANCE	278	556,400.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

WE SEND A GRANT LETTER THAT OUTLINES THE PURPOSE OF THE DONATION (IF OTHER THAN GENERAL SUPPORT) AND DIRECTS THE ORGANIZATION TO ACCEPT THE GRANT ONLY IF THEY INTEND TO USE IT FOR THAT PURPOSE. THEY ARE ALL ELIGIBLE TO RECEIVE TAX-DEDUCTIBLE GIFTS.

THE ORGANIZATION DISTRIBUTES SCHOLARSHIP GRANT FUNDS DIRECTLY TO THE SCHOOL ATTENDED BY THE GRANT RECIPIENT TO ENSURE THE FUNDS ARE USED ONLY FOR QUALIFYING EDUCATIONAL EXPENSES. GRANTS TO OTHER ORGANIZATIONS ARE DISBURSED WITH A LETTER WHICH OUTLINES THE USE OF THE FUNDS AND INDICATES THAT ACCEPTANCE OF THE FUNDS CONSTITUTES THE RECIPIENT'S AGREEMENT WITH THE TERMS.

**SCHEDULE J
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization ARLINGTON COMMUNITY FOUNDATION	Employer identification number 54-1602838
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Part I Questions Regarding Compensation

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

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

Schedule J (Form 990) (Rev. 12-2024)

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JENNIFER OWENS PRESIDENT & CEO	(i)	215,274.	35,000.	0.	9,379.	21,266.	280,919.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CHRISTINA COLE DIR OF PHILANTHROPY	(i)	149,231.	0.	0.	4,477.	0.	153,708.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2024

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.
Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization: **ARLINGTON COMMUNITY FOUNDATION**
Employer identification number: **54-1602838**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	44	5,048,071. FMV	
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2024

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

ARLINGTON COMMUNITY FOUNDATION

Employer identification number

54-1602838

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

LEADERSHIP AND DONOR SERVICES, WE ALIGN PHILANTHROPIC RESOURCES WITH
HIGH-IMPACT, LOCALLY DRIVEN EFFORTS.

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

POST-SECONDARY EDUCATION FOR ARLINGTON-AREA STUDENTS AND REFLECTS THE
COMMUNITY'S COLLECTIVE INVESTMENT IN EDUCATIONAL OPPORTUNITY.

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

THE FORM 990 IS PROVIDED TO THE MEMBERS OF THE FINANCE COMMITTEE FOR
INITIAL REVIEW AND THEN TO THE ENTIRE BOARD FOR FINAL REVIEW.

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

THE CONFLICT OF INTEREST POLICY COVERS ALL MEMBERS OF THE BOARD OF
TRUSTEES; ITS COMMITTEES AND ALL OFFICERS, AND IS MONITORED BY ANNUAL
WRITTEN INFORMATION FORM DISTRIBUTED BY STAFF WHICH ARE REVIEWED AND
MAINTAINED BY STAFF. THE ENTIRE BOARD REVIEWS EACH TRANSACTION TO COME
BEFORE THE BOARD FOR POTENTIAL OR ACTUAL CONFLICTS OF INTEREST. IF
POTENTIAL OR ACTUAL CONFLICTS PAST, PRESENT OR FUTURE ARE IDENTIFIED THEN
THE PERSON DETERMINED TO HAVE A CONFLICT IS RECUSED FROM DELIBERATIONS OR
VOTING OR BOTH AS APPROPRIATE. THE IDENTIFIED CONFLICTS OF INTEREST AND
APPROPRIATE RECUSALS ARE DOCUMENTED IN THE MINUTES OF EACH BOARD OR
COMMITTEE MEETING.

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

GOVERNANCE COMMITTEE PERFORMS THE RESEARCH, THEN FORWARDS RECOMMENDATIONS
TO THE EXECUTIVE COMMITTEE WHICH MAKES THE PERFORMANCE RATING AND
COMPENSATION DECISIONS, AND THEN HAS THE FULL BOARD VALIDATE AND APPROVE.

COMPARABILITY DATA USED IN THE REVIEW PROCESS IS OBTAINED FROM NATIONAL AND
LOCAL SURVEY INFORMATION GATHERED FROM THE CHRONICLE OF PHILANTHROPY AND
THE COUNCIL ON FOUNDATIONS. THE DELIBERATIONS AND DECISIONS ARE DOCUMENTED
IN THE MINUTES OF THE APPLICABLE COMMITTEE AND/OR BOARD MEETING.

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

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS
ARE MADE AVAILABLE TO THE PUBLIC ON THE ORGANIZATION'S WEBSITE AND UPON
REQUEST.