## EXTENDED TO MAY 16, 2022

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

A F	or the	= 2020 calendar year, or tax year beginning $$	ng J	UN 30, 2021	
В	heck if	C Name of organization		D Employer identifi	cation number
3	pplicab	GLEN ECHO PARK PARTNERSHIP FOR			
	Addre	ARTS AND CULTURE, INC.			
	Name	Doing business as		38-36503	39
	Initial		n/suite	E Telephone numbe	
	Final	7200 MACADMUID DOULDWARD		(301)634	
	termen		$\overline{}$	G Gross recepts \$	1,803,627.
	Amen			H(a) Is this a group re	
	Applic			for subordinates	
	pendi	SAME AS C ABOVE		H(b) Are all subordinates in	John Co.
$\overline{1}$	9V.6V	empt status: X 501(c)(3)	527		list. See instructions
		te: WWW.GLENECHOPARK.ORG	- 321	H(c) Group exemptio	
_			Vaaro		A State of legal domicile; MD
	art I	Summary	L Teal (	DI TOTTI AUDIT, 2002	M State of legal connicile, MD
-		Briefly describe the organization's mission or most significant activities: THE PAR	שואייי	DOUTD DDECE	NITE VITERANT
Activities & Governance	'	ARTISTIC, CULTURAL, AND EDUCATIONAL OFFERIN	ICC	AT CLEM POU	O DADK AND
28					
ē	1	Check this box I if the organization discontinued its operations or disposed or	or more		
Š		Number of voting members of the governing body (Part VI, line 1a)	100	3	20
45		Number of independent voting members of the governing body (Part VI, line 1b)		4	20
Ges		Total number of individuals employed in calendar year 2020 (Part V, line 2a)		5	41
<u>₹</u>		Total number of volunteers (estimate if necessary)		6	30
₹	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
	ь	Net unrelated business taxable income from Form 990 T, Part I, line 11	والتعويد	7b	0.
			-	Prior Year	Current Year
•	8	Contributions and grants (Part VIII, line 1h)	-	1,236,017.	1,352,508.
Revenue	9	Program service revenue (Part VIII, line 2g)		962,443.	408,737.
<u>8</u>	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		13,828.	451.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		80,712.	41,931.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,293,000.	1,803,627.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ų).	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5:10)		1,182,347.	947,064.
Expenses	ı.	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
8		Total fundraising expenses (Part IX, column (D), line 25) 207,754.	-		2444
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	-	805,782.	650,861.
	i	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,988,129.	1,597,925.
	_	Revenue less expenses. Subtract line 18 from line 12	-	304,871.	205,702.
<u> </u>		Nevertue less expenses. Sciolizact the 18 from line 12	8-4	ginning of Current Year	
Net Assets or Fund Batances	20	Total access (Part V time 1C)	061	2,764,490.	3,207,061.
388 888	20	Total assets (Part X, line 16)	$\vdash$	559,143.	796,012.
E P	21	Total liabilities (Part X, line 26)	$\vdash$	2,205,347.	2,411,049.
_		Net assets or fund balances. Subtract line 21 from line 20 Signature Block	-	2,205,347.	2,411,049.
	_	Ities of perjury, I declare that I have examined this return, including accompanying schedules and	-4-4		
					y knowledge and belief, it is
irue,	correc	1, and complete Packy ation of preparer (other than officer) is based on all information of which pr	reparer	nas any knowledge	/-/
		Signal of the line		Uale /	picc
Sig		, -,		uans /	•
Her	e	KATHARINE BOERNER, EXECUTIVE DIRECTOR Type or print name and title			
_					
		Print/Type preparer's name Preparer's signature		ate Check	PTIN
Paid		NEIL E. BERGER NEIL E. BERGER	<u>[0</u>	5/13/22 selemptoy	P00102223
-	arer	Firm's name ADEPTUS PARTNERS LLC		Firm's EIN	20-1835208
Use	Only	Firm's address 3311 OLNEY SANDY SPRING RD			
_		OLNEY, MD 20832-1411		Phone no. ( 3	01)929-9700
May	the if	RS discuss this return with the preparer shown above? See instructions			X Yes No
0320	01 12-2	3-20 LHA For Paperwork Reduction Act Notice, see the separate instructions.			Form <b>990</b> (2020)

## GLEN ECHO PARK PARTNERSHIP FOR

	n 990 (2020) ARTS AND CULTURE, INC. 38-3650339	Page 2
Pa	rt III Statement of Program Service Accomplishments	-
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Striefly describe the organization's mission: THE PARTNERSHIP PRESENTS VIBRANT ARTISTIC, CULTURAL, AND EDUCATION	B. T.
	OFFERINGS AT GLEN ECHO PARK AND PROMOTES THE PARK AS A UNIQUE	AL
	DESTINATION FOR OUR REGION'S DIVERSE POPULATION. THE PARTNERSHIP	
	NURTURES A DYNAMIC COMMUNITY OF ARTISTS AND PERFORMERS WHILE	
2	Did the organization undertake any significant program services during the year which were not listed on the	
		s 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?	s 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 expens	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses	s, and
_	revenue, if any, for each program service reported.	000
4a	(Code: ) (Expenses \$ 407,765. Actuary graterity ) (Revenue \$ 142 EDUCATION PROGRAM - PRESENTING MORE THAN 800 CLASSES IN ARTS EDUCA	,983. <sub>)</sub>
	FOR ALL AGES TO INCLUDE VISUAL ARTS AND CRAFTS, DANCE/MOVEMENT, MU	
	AND CAMP AND CLASSES FOR YOUTH AND CHILDREN IN THE ARTS AND	BIC,
	ENVIRONMENTAL EDUCATION. ALSO PRESENTING PROGRAMS FOR PARENT/CHIL	n
	PARTICIPANTS IN THE ARTS AND ENVIRONMENTAL EDUCATION.	
	(Code ) (Expenses \$ 254,335 + including grants of \$ ) (Revenue \$ 89	100
4b	(Code ) (Expenses \$ 254,335 including grants of \$ ) (Revenue \$ 89 SOCIAL DANCE AND PUBLIC EVENTS AND EXHIBITIONS - SOCIAL DANCE EVEN	<u>,183.</u> )
	FEATURING LIVE MUSIC, SOCIAL DANCE LESSONS IN A VARIETY OF STYLES	TS
	INCLUDING TANGO, WALTZ, CONTRA DANCES, ZYDECO, SWING DANCE AND OTH	EB
	SOCIAL (PARTNER) DANCES. PUBLIC FESTIVALS AND EVENTS TO INCLUDE	
		THEN
	AND WOW (CLOSING DAY OF THE CAROUSEL), LABOR DAY ART SHOW AND WEEK	END,
	HERITAGE DAYS, LGBTQ FAMILY DAY, WINTER'S EVE, FALL FROLIC AND FRE	E
	CONCERTS THROUGHOUT THE SUMMER. ART EXHIBITIONS IN THE POPCORN	
	GALLERY, THE STONE TOWER, AND THE PARK VIEW GALLERY FEATURING A VA	RIETY
	OF MEDIA BY LOCAL AND REGIONAL ARTISTS.	
4c	(Code: ) (Expenses \$ 623, 133 · including grents of \$ ) (Revenue \$ 218	,502.1
40	ARTS FACILITY MANAGEMENT - FACILITY MANAGEMENT OF NUMEROUS STUDIO	
	ARTS PROGRAM FACILITIES TO INCLUDE THEATERS, DANCE FACILITIES AND	
	PERFORMANCE VENUES, ARTIST STUDIOS, CLASSROOMS FOR THE BENEFIT OF	
	ORGANIZATIONS PROVIDING ARTS PROGRAMMING AND TO PROVIDE VARIOUS	
	PROGRAMS IN THE ARTS AND ENVIRONMENTAL EDUCATION. PROVIDING RENTA	
	PROGRAM TO THE GENERAL PUBLIC AND THE COMMUNITY FOR PUBLIC EVENTS .	
	PRIVATE RECEPTIONS. OVERSEEING FOOD SERVICE PROVIDED BY VENDORS A	
	PARK AS AN AMENITY FOR PARK PROGRAMS AND OPERATIONS. OPERATING AND	
	MAINTAINING THE HISTORIC 1921 DENTZEL CAROUSEL FOR THE BENEFIT OF	THE
	PUBLIC AND AS A PARK AMENITY.	
4d	Other program services (Describe on Schedule O.)	
TU	(Expenses \$ including grants of \$ ) (Neverue \$ )	
4e	1 005 000	
		990 (2020)

Page 3 Part IV | Checklist of Required Schedules Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes." complete Schedule A X X 2 Is the organization required to complete Schedule B. Schedule of Contributors? 2 3 Did the organization engage in direct or indirect political campa gn activities on behalf of or in opposition to candidates for Х public office? If "Yes," complete Schedule C, Part I 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect Х during the tax year? If 'Yes,' complete Schedule C, Part II 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III X 6. Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the notit to Х provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Х R Schedule D. Part III 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? Х If 'Yes,' complete Schedule D, Part IV 9 10 Did the organization, directly or through a related organization, hold assets in donor restricted endowments X or in quasi endowments? If "Yes," complete Schedule D, Part V 10 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Х 11a b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total Х assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c. Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total Х assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII , 11c d. Did the programment an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in X Part X, line 162 if "Yes," complete Schedule D. Part IX. 11d X e. Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 110 f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Х 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Х Schedule D, Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D. Parts XI and XII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 X or more? If "Yes," complete Schedule F, Parts I and IV 14b 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV X 15 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to Х or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX. X column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines Х 1c and 8a? If "Yes," complete Schedule G, Part II 18 19 Did the organization report more than \$15,000 of gross income from garning activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III Y 19 X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

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Х

domestic government on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II

	000 (2000)	3650339	P	age 4
Par	t IV Checklist of Required Schedules (continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		162	NO
6.40	Part IX, column (A), line 2? If Yes, complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's curr	rent		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24 a	Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of	I .		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If 'No," go to line 25a	24a	-	X
	Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?	24b	ļ	
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defeat			
	any tax exempt bonds?	24c 24d	-	
	Did the organization act as an 'on behalf of' ssuer for bonds outstanding at any time during the year?  Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240	<del>                                     </del>	<del>                                     </del>
234	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year a	_		-
~	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complet	1	l	
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employ	/ee		
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% co			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part	t /// 27	-	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part iV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? #			x
_	*Yes, complete Schedule L, Part IV	28a 28b	+	X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV  A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?//	200		<del>  ^</del>
	'Yes,' complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	$\vdash$	Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	n		
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			l
	Schedule N, Part II	32	_	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			l .
	sections 301,7701-2 and 301,7701-3? If "Yes," complete Schedule R, Part I	33	-	X
34	Was the organization related to any tax exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	1	x
25-	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<del> </del>	X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled ent		$\vdash$	+
·	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization.		1	
	If "Yes," complete Schedule R, Part V, line 2	36	1	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
TR-	Note: All Form 990 filers are required to complete Schedule O	38	X	
Ра	rt 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		Tv.	Lin
4 -	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	44	Yes	No
	Enter the number reported in 80x 3 of Form 1096. Enter 0 if not applicable 1a Enter the number of Forms W-2G included in line 1a Enter 0 if not applicable 1b	0		

c. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 41		12	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			**
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			12
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			W
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	$\vdash$	X
	tf "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
<b>б</b> а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	_		v
	any contributions that were not tax deductible as charitable contributions?	6a	<u> </u>	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			v
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a_	-	X
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b_		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			x
	to file Form 8282?	7c		A
d	If "Yes," indicate the number of Forms 8282 filed during the year	7.		x
0	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	$\vdash$	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	-	
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g.		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		-
9	Sponsoring organizations maintaining donor advised funds.	0-		-
	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		$\vdash$
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	30		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			1000
			-0.0	
b				
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders 11a			
	Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources against	-3		
U	amounts due or received from them.)	11.		
125	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	1111		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to Issue qualified health plans	16		
6	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	T	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or		Π	
-	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N			111
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.		1111	
		Forr	n <b>99</b> 0	(2020)

Form 990 (2020) ARTS AND CULTURE, INC. 38-3650339 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response 38-3650339 Page 6 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			لها
Sec	tion A. Governing Body and Management			
	1.1 20		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 20			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body de'egated broad authority to an executive committee or similar committee, explain on Schedule O.			X
b	Enter the number of voting members included on line 1a, above, who are independent . 1b 20			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	_	Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			х
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	$\vdash$	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	<u> </u>	X
6	Did the organization have members or stockholders?	6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	'		х
	more members of the governing body?	7a		┢
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			х
	persons other than the governing body?	7b	<u> </u>	┢
8	Ord the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		x	
	The governing body?	8a	X	-
	Each committee with authority to act on behalf of the governing body?	8b	_A	
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			x
-	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		_ A
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
		40-	Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		1
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
44-	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	Tta	-	
	Did the organization have a written conflict of interest policy? If "No, " go to fine 13	12a	x	l
12a b		12b	X	
_	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe	120		
l,		12c	X	
13	Did the organization have a written whistleblower policy?	13	X	-
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent	<u> </u>	-	
13	persons, comparability data and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	100	-	$\vdash$
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
100	taxable entity duning the year?	16a		Х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its part cipation	100		
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			1
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	7.00		
17	List the states with which a copy of this Form 990 is required to be filed ▶MD			
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 onl	v) avai	lable
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule Q whether (and if so, how) the organization made its governing documents, conflict of interest policy are	nd fina	ncial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	THE ORGANIZATION - 301-634-2255			
	7300 MACARTHUR BOULEVARD, GLEN ECHO, MD 20812			
03200	06 12-23-20	fore	n <b>99</b> 0	(2020

Form 990 (2020) 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 instructions for definition of "key employees."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received report able compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

Check the boy if neither the propriet on nor any related proprieting companyated any current officer, director, or trustee

Check this box if neither the organization n	or any related	orga	iniza	ition	CO	npei	nsat	ed any current officer, of	irector, or trustee	
(A)	(B)				2)			(D)	(E)	(F)
Name and title	Average	(do			ition more	l Bhani	one	Reportable	Reportable	Estimated
	hours per	box,	oox, unless person is both an officer and a director/trusteer		compensation	compensation	amount of			
	week	-			1	1	100,	from	from related	other
	(list any	DE CE	li			1		the	organizations (W 2/1099-MISC)	compensation from the
	hours for related	0.0	8			125		organization (W 2/1099·MISC)	(44 5) 1093-14113C)	organization
	organizations	uste	ST E		82	P P P P		(44 5/ 1033 (4)100)	·	and related
	below	dual	10 PD	_	Oğ.	25.55	) <sub>e</sub>			organizations
	line)	individual trustee or director	institutional drustee	Officer	Key employee	Highest compensated employee	Бенте			
(1) K, BOERNER	40.00	П		Г					_	
EXECUTIVE DIRECTOR				X				135,468.	0.	18,081.
(2) P. FREEHAN	1.00								_	
DIRECTOR	<u> </u>	X				L		0.	0.	0.
(3) A. PRIEDSON	1.00			1						
DIRECTOR		X		$oxed{oxed}$	Ц.	L	$oxed{oxed}$	0.	0.	0.
(4) C, PRONBOLUTI	1.00	i							ا ا	
DIRECTOR		Х		L	_		<u> </u>	0.	0.	0.
(5) D. GREENBAUM	1.00			ŀ						0
DIRECTOR	1 00	Х		╙	$\vdash$	⊢	<u> </u>	0.	0.	0.
(6) P. HAHN	1.00	.,					ļ	_	ا م	0
DIRECTOR	1 00	Х	Ļ	⊢	<u> </u>	<b> </b>	<u> </u>	0.	0.	0.
(7) K, HARTMAN	1.00	х						٥.	0.	0.
DIRECTOR (8) R. KEYS	1.00	Δ		⊢	$\vdash$	⊢	⊢	0.	0.	0.
DIRECTOR	1.00	X			1			0.	٥.	0.
(9) L. MARDIKS	1.00	Α	$\vdash$	$\vdash$	┢	$\vdash$	⊢	0.	· · ·	0.
DIRECTOR	1.00	x					1	0.	٥.	0.
(10) M. MAYOR	1.00	-	$\vdash$	$\vdash$	$\vdash$	╁	├			
DIRECTOR	1100	Х						0.	٥.	0.
(11) N. MISTRY	1.00	-	<del> </del>	$\vdash$		$\vdash$	-	-	-	
DIRECTOR		x				1		0.	0.	0.
(12) S. PAUL	1.00									
DIRECTOR		Х						0.	0.	0.
(13) W. POLAK	1.00				Т	$\vdash$				
DIRECTOR		X	1	١	l			0.	0.	0.
(14) A. RASHUSSEN	1.00		Π		П	1				
DIRECTOR		X						0.	0.	0.
(15) I. SAVAKOVA	1.00				П					
DIRECTOR		Х		$\perp$			$\perp$	0.	0.	0.
(16) F. STANKOVIC	1.00							_		_
DIRECTOR		X	$\vdash$	_	1	$\perp$	$\perp$	0.	0.	0.
(17) M. ZANGWILL	1.00	1								_
DIRECTOR	1	X		$\perp$	$\perp$		<u></u>	0.	0.	0.

032007 12-23-20

ARTS AND CULTURE, INC. 38-3650339 Page 8

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	1005	, an	d Hi	ighe	st C	ompensated Employe	es (continued)			
(A)	(B)				2)			(D)	(E)	1	(F)	
Name and title	Average	Position (do not check more than one					one	Reportable	Reportable		stimate	
	hours per	box, unless person is both an officer and a director/trustee)					h an	compensation	compensation	a	mount	of
	week (list any	-				T	,	from	from related		other	*
	hours for	Individual liusièe or director				L		the organization	organizations (W-2/1099-MISC)	4	npensa rom th	
	related	200	8			rsled		(W-2/1099-MISC)	(44.271093-141130)		anizat	
	organizations	110516	l rustee		Į į	uadu.		(112,1003,11100)		1 '	id relat	
	below	P P P	JIS NO	,	(ogtr	376.50	103	100			anizati	
	line)	India	Institutional	Dilicer	Кеу епірвоуее	Highest compensated employee	Ferre					
(18) B, CASPER	1.00						_					
PRESIDENT		x		Х	ŀ			0.	0	.		0.
(19) M. MORRIS	1.00											
VICE PRESIDENT		X		Х				0.	0	.		0.
(20) S. STERN	1.00											
SECRETARY		Х		X	1			0.	0.	,		0.
(21) D. HANLON	1.00					$\vdash$						
TREASURER		x		x			l	0.	0	.		0.
		-	-	<del>                                     </del>	-	-	<del>  -</del>	<del> </del>		+		
	<b>——</b>		Ĺ									
		┢		$\vdash$	$\vdash$		H	<del>                                     </del>		+-		
	<u> </u>	ł										
		⊢		Н	Н	┢				+		
	<del></del>	1										
	-	⊢	$\vdash$	⊢	-	-	-			+		
		1										
	-	⊢	⊢	⊢	-	⊢	⊢			+		
		1										
	l		<u></u>	<u></u>	ŀ	L	Ļ	135,468.	0	╀╌	8,0	<b>6</b> 1
1b Subtotal						114			0		.0,0	01.
c Total from continuation sheets to Part V								0.	0		0 0	
d Total (add lines 1b and 1c)				_			<u> </u>	135,468.		•   -	8,0	0 I -
2 Total number of individuals (including but r	ot limited to the	1056	ist	ed a	pov	e) w	no r	eceived more than \$100	0,000 of reportable			1
compensation from the organization											T sz	1
											Yes	No
3 Did the organization list any former officer.			key	emp	łoy€	88, O	r hig	ghest compensated emp	oloyee on			7,
line 1a? If "Yes," complete Schedule J for s	uch individual									3	-	Х
4 For any individual listed on line 1a, is the si	um of reportab	le c	omp	ens	atio	n and	d ot	her compensation from	the organization			
and related organizations greater than \$15	0,000? If "Yes,	, cc	mpi	ete :	Sch	edul	e J	for such individual		4	X	
5 Did any person listed on line 1a receive or	accrue compe	nsal	tion	from	าลก	y uni	relai	ted organization or indiv	idual for services			
rendered to the organization? If "Yes," con	plete Schedul	e J	lor s	uch	per:	son				5		X
Section B. Independent Contractors												
<ol> <li>Complete this table for your five highest co</li> </ol>	mpensated in	dep	end	ent c	cont	racti	ors	that received more than	\$100,000 of comper	isation	from	
the organization. Report compensation for	the calendar y	ear	end	ing v	with	Of W	rithi	n the organization's tax	year.			
(A)								(B)			C}	
Name and business	address	N	ON	E				Description of s	services	Comp	ensatio	n _
							Ì		ŀ			
								<u> </u>				
												-
2 Total number of independent contractors	includina but r	not I	imite	ed to	the	se li	ste	d above) who received r	nore than			
\$100,000 of compensation from the organ	_					0						
	-							-		Form	990	(2020)

ARTS AND CULTURE, INC.

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII Revenue excluded Total revenue Related or exempt Unrelated from tax under function revenue business revenue sections 512 - 514 4,687. Contributions, Giffs, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b b Membership dues c Fundraising events 1c d Related organizations 1d 1,058,969. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 288,852. similar amounts not included above 1,599. g Noncash contributions included in lines 1s. 1f. 1g \$ 352,508 h Total. Add lines 1a-1f **Business Code** 243,904. 900099 243,904. 2 a COOPERATOR FEES Program Service Revenue 62,300. 62,300. **b FACILITY RENTALS** 900099 56,938. c CLASS REGISTRATION FEE 900099 56,938. 39,450. d CAROUSEL INCOME 900099 39,450. EVENTS AND COMMISSIONS 900099 6,145. 6,145. f All other program service revenue 408,737. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 451. 451 other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents 6a 6b b Less: rental expenses c Rental income or (loss) 6c d Net rental income or (loss) (li) Other (i) Securities 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses Revenue 7h c Gain or (loss) 7c d Net gain or (loss) Other 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses Bb Net income or floss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** 11 a ART & EDUC MATERIALS 451211 41,931. 41,931. b ¢ d. All other revenue 41,931 e Total. Add lines 11a-11d Ō. 451. ,803,627. 450,668. 12 Total revenue. See instructions Form 990 (2020) Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) X Check if Schedule O contains a response or note to any line In this Part IX (8) Program service (D) Fundraising Do not include amounts reported on lines 6b, Management and general expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, 5,917. 135,324. 111,436. 17,971. trustees, and key employees 6 Compensation not included above to disqual fied persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 688,822. 567,232. 30,116. 91,474. Other salaries and wages Pension plan accruals and contributions (include 15,713 1,728 4,456. 21,897 section 401(k) and 403(b) employer contributions) 3,078. 6,771. 51,707. Other employee benefits 61,556. 39,465. 1,724. 32,500. 5,241. Payroll taxes Fees for services (nonemployees): a Management b Legal 19,900. 19,900. c Accounting ..... e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If Fine 11g amount exceeds 10% of line 25, 181,866 148,096 770 33,000. column (A) amount, list line 11g expenses on Sch O.) 11,264. 11,264. 12 Advertising and promotion 5,544. 6,599. 726. 329 Office expenses 13 33,628. 28,247. 1.682. 3,699. Information technology 14 15 Royalties 16 Occupancy 4. Travel 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 2,287. 1,920. 115. 252. 19 Conferences, conventions, and meetings 4,385. 4,385. 20 Interest 21 Payments to affiliates 92,283. 77,518. 4,614. 10,151. 22 Depreciation, depletion, and amortization 2,873. 26,120. 21,941. 1,306. 23 Insurance 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. EQUIPMENT RENTAL AND MA 78.475. 64,350. 3,138. 10,987. 67,295. 55,181. 2,693. 9,421. SPECIAL EVENT AND FOOD c CONTRACT LABOR 27,271. 13,853. 12,820. 598. d PAYROLL SERVICE FEES 1,224. 2,694. 24,492. 20,574. 7,440. 74,992. 58,153. 9,399. e All other expenses 207,754. 1,597,925. 285,233. 104,938. 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

032010 12-23-20

ARTS AND CULTURE, INC.

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X	777 M. Marian 1920	77 ) y	101
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	958,698.	1	2,259,799.
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	61,564.	4	9,091
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	
ខ្ 7	Notes and loans receivable, net		7	
Assets 9	Inventories for sale or use	17,702.	8	17,601. 22,573.
⋖   9	Prepaid expenses and deferred charges	14,772.	9	22,573.
10a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a 1,207,758.			
b	Less: accumulated depreciation 10b 441,021.	824,935.	10c	766,737.
11	Investments - publicly traded securities		11	
12	Investments - other securities. See Part IV, line 11	881,219.	12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	5,600.	15	131,260.
16	Total assets. Add lines 1 through 15 (must equal line 33)	2,764,490.	16	3,207,061.
17	Accounts payable and accrued expenses	21,945.	17	37,867.
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ម្ល 22	Loans and other payables to any current or former officer, director,			
<u> </u>	trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities 5	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	150,000.	24	150,000
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	387,198.	25	608,145.
26	Total liabilities. Add lines 17 through 25	559,143.	26	796,012
ιA	Organizations that follow FASB ASC 958, check here			
ğ	and complete lines 27, 28, 32, and 33.			
ğ 27	Net assets without donor restrictions	2,118,842.	27	2,309,521.
28	Net assets with donor restrictions	86,505.	28	101,528.
š	Organizations that do not follow FASB ASC 958, check here			
띤	and complete lines 29 through 33.			
Net Assets or Fund Balances 22 22 23 23 23 25 25 25 25 25 25 25 25 25 25 25 25 25	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	2,205,347.	32	2,411,049
33	Total liabilities and net assets/fund balances	2,764,490.	33	3,207,061.

Form 990 (2020)

# GLEN ECHO PARK PARTNERSHIP FOR ARTS AND CULTURE, INC.

Form	990 (2020) ARTS AND CULTURE, INC. 38	3-36503	339	Pa	ge 12
Pai	t 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)				27.
2	Total expenses (must equal Part iX, column (A), line 25)	1,			25.
3	Revenue less expenses. Subtract line 2 from line 1				02.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	2,	, 20.	5,3	47.
5	Net unrealized gains (losses) on investments				
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)				0.
10	Net assets or fund balances at end of year, Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	2,	, 41:	1,0	49.
Pai	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				LX.
	<u> </u>	_		Yes	No
1	Accounting method used to prepare the Form 990.				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	L	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a	a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate bas	sis.			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aux	tit			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedul	e O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single				
	Act and OMB Circular A-133?		За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required a	audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form 990 (2020)

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

Department of the Treasury

## **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.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

GLEN ECHO PARK PARTNERSHIP FOR

Employer identification number

ARTS AND CULTURE, INC. 38-3650339 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 4 A church, convention of churches, or association of churches described in section 170(b) 1)Al(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990 EZ).) 3 A hospital or a cooperative hospital service organization described in section 170/bit IVAVIII). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name. 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) □ An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college. or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. 🔟 Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, 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). (v) is the organization isseed in your governing document? (iii) Type of organization (vi) Amount of other (ii) Name of supported tiil F N (v) Amount of monetary described on lines 1:10 pport (see instructions) organ zation support (see instructional Yes No above (see instructions)) Total

(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.)

Catedary yas (of fixed year beginsting is)    Gitts, grants, contributions, and membership fees received. (Do not include any unusual grants.")  Tar revenues leved for the organization's here of the organization's hereit and either paid to or expended in the organization's hereit and either paid to or expended on its behalf is grants.")  The value of services or facilities furnished by a governmental unit to the organization without charge organization without charge and person (other than a governmental unit to the organization without charge and person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on an eil.  column (f)  Public support. Selective has from mail.  Section B. Total Support  Calledary year (of fiscal year beginning is)   (a) 2016   (b) 2017   (c) 2018   (d) 2019   (e) 2020   (f) Total organization without not person (other than a governmental nother not person (other than a governmental nother nother than a governmental nother nother than a governmental nother than a gov	Sec	tion A. Public Support						
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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								
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	18	Private foundation. If the organization	on did not check a	DUX OR TIME 13, 10	oa, 100, 1/a, 0/ 1/			

Schedule A (Form 990 or 990-EZ) 2020 ARTS AND CULTURE, INC.

[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.)

qualify under the tests listed to	elow, please comp	ete Part II.)				
Section A. Public Support						45 = 1.1
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")	490,455.	902,526.	548,139.	1,236,036.	1,352,508.	4,529,664
2 Gross receipts from admissions, merchandise sold or services per formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	1,541,018.	1,563,471,	1,667,174.	1,082,445.	450,668.	6,304,776
<ol><li>Gross receipts from activities that</li></ol>						
are not an unrelated trade or bus- iness under section 513	ļ					
4 Tax revenues levied for the organ						
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	2,031,473.	2.465,997,	2,215,313.	2,310,481.	1,803,176.	10,834,440
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons	36,675.	46,884.	43,232.	28,969.	28,965.	184,725.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						0.
amount on line 13 for the year	36,675.	46,884.	43,232.	28,969.	28,965.	184,725.
c Add lines 7a and 7b	30,073.	40,004.	27,274,	20,505.	20,505.	10,649,715
B Public support, (Subtraction / Crimmine 6)						10,047,713
Section B. Total Support	T	1			I	
Catendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6	2,031,473.	2,465,997.	2,215,313.	2,318,481.	1,803,176.	10,834,440
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2,412.	2,032.	13,807.	13,828.	451.	32,530
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975				-		
c Add lines 10a and 10b	2,412.	2,032.	13,807.	13,828.	451.	32,530
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part VI.)	0.000.000		2 222 122	0 100 000	4 000 000	10.000.000
13 Total support, (Add Ines 9 10c 11, and 12.)	2,033,885.	2,468,029.		2,332,309.	1,803,627.	10,866,970
14 First 5 years. If the Form 990 is for t check this box and stop here	he organization's f		fourth, or fifth tax	year as a section	501(c)(3) organizat	ion,
Section C. Computation of Pub						
15 Public support percentage for 2020			column (f))	50.00-	15	98.00
16 Public support percentage from 201			***		16	98.05
Section D. Computation of Inve						
17 Investment income percentage for 2				Ew are	17	.30
18 Investment income percentage from					18	.31
19a 33 1/3% support tests - 2020. If the				15 is more than		
more than 33 1/3%, check this box	_					<b>▶</b> [X
	-			_		
b 33 1/3% support tests - 2019. If the	-					a.10
line 18 is not more than 33 1/3%, ch					1	-
20 Private foundation. If the organization	or did not check a	DUX OIL IINE 14, 15	a, OF 190, CHECK (		edule & (Form 99	

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

Section A. All Supporting Organizations

1. Az al of the organization's supported organizations listed by name in the organization's governing documents' in 'No.,' describe in Part VI how the supported organizations are designated if designated by class or purpose, describe the designation. If instonce and confineing relationship, explain.  2. Did the organization have as supported organization that does not have an IRS determination of status under section 509(a)17 or (2)? If 'Yes, 'explain in Part VI how the organization determined that the supported organization are described in section 509(a)17) or (2).  3. Did the organization have a supported organization described in section 501(c)(4), (5), or (6) If 'Yes, 'answer lines' 30 and 3c below.  3. 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)(a)? If 'Yes, 'describe in Part VI when and how the organization made the determination.  2. Did the organization assure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes, 'escribe in Part VI when controls the organization and the bulked States ('foreign supported organization')? If 'Yes, 'escribe in Part VI when controls and discretion of despite being controlled or supervised by or in connection with its supported organization.  3. Did the organization assure that all supported organization was used exclusively for section 170(c)(2)(B) purposes? If you cheeked but 20 or 120 in Part VI how the organization had used to control and discretion despite being controlled or supervised by or in connection with its supported organizations used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.  3. Did the organization assure that all support to gove the organization was used exclusively for section 170(c)(2)(B) purposes.  4. Did the organization and substitution to resolute did part VI, including the tax year? If If 'Yes, 'answe				Yes	No
class or purpose, describe the designation. If instonic and continuing relationship, explain.  Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "res," explain in Part VI how the organization determined that the supported organization assisted the supported organization described in section 501(c)(4), (5), or (6) and satisfied the public supported explain of section 509(a)(2)? If "Yes," describe in Part VI when and how the organization make the determination.  C Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(8) purposes? If "Yes," explain in Part VI what controls the organization put in pileze to ensure such use.  3b. Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(8) purposes? If "Yes," explain in Part VI what controls the organization put in pileze to ensure such use.  3c. Did the organization ensure that all support to such organization put in pileze to ensure such use.  3c. Did the organization and the determination in organization in the funded States ("Greigs supported organization")? If "Yes," explain in Part VI what controls the organization is the foreign supported organization and such control and discretion despite being controlled or supervised by or in connection with its supported organization and such control and discretion despite being controlled or supervised provise supported organization and such control and discretion despite being controlled or supervised by or in connection with its supported organizations and in suspend the foreign supported organization that does not have an IRS determination under sections 501(c)(5) and 509(c)(1) (-2)? If "Fes," explain in Part VI what controls the organization and its ensure that support the foreign supported organization surface and supported organization and supports organization and substitution to resonation and supports organizations and	1	Are all of the organization's supported organizations listed by name in the organization's governing			
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? if "Yes," replain in Part VII how the organization determined that the supported organization was described in section 509(a)(1) or (2).  3 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? if "Yes," answer fines 3b and 2b below.  4 Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? if "Yes," describe in Part VI when and how the organization made the determination.  5 Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(8) purposes? if "Yes," erplain in Part VI what controls the organization put in place to ensure such use.  4 Was any supported organization not organized in the United States (Toreign supported organization)? If "Yes," and you checked both 12s or 12b in Part I, answer lines 4 and 4 c below.  5 Did the organization supported organization in decoration where the to make grants to the foreign supported organization that use control and discretion despite being controlled or supervised by or in connection with its supported organization had such control and discretion despite being controlled or supervised by or in connection with its supported organization supported organization under sections 501(c)(c) and 509(k)(1) or (2)? If "Yes," explain in Part VI when the organization was used exclusively for section 170(c)(2)(8) purposes.  5 Did the organization support with your provide decidal meant VI, including (i) the names and EIN numbers of the supported organization added, substitute, or remove any supported organizations and IRS determination under sections 501(c)(c)) and 509(k)(1) or (2)? If "Yes," explain in Part VI, including (i) the names and EIN numbers of the supported organizations added, substitution, or removed, (ii) the reasons for e		documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization have a supponed organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 30 and 3c below.  3a Did the organization from that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support the support of organization organization made the determination.  5 Did the organization name that all support to such organization put in place to ensure such use.  4 Was any supported organization not toganized in the United States ("foreign supported organization?")? If "Yes," and if you checked box 12 or 12 to in Part I, answer lines 40 and 4c below.  5 Did the organization and the supported organization and discretion in deceiding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.  4b Did the organization support any foreign supported organization had such control and discretion despite being controlled or supervised by or in connection with its supported organization.  4b Did the organization support any foreign supported organization had such control and discretion despite being controlled or supervised by or in connection with its supported organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(8) purposes.  5c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 50 and 5c below (if applicable), Also, provide detail in Part VI, including (i) the names and EliN numbers of the supported organization's organization was seconysticked (such as by mendment to the organization and the organization or solid (ii) the organization or organization solid or substitution the result of an event beyond the organization's con		class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
againtation was described in section 509(e)(1) or (2).  3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6)? If "Yes," answer files 3b and 3c below.  3b 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(e)(2)? If "Yes," describe in Part VI when and how the organization made the determination.  3b Did the organization made the determination.  3c Obit the organization made and organization not organized in the United States ("foreign supported organization")? If "Yes," explain in Part VI what controls the organization by the purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.  3c Obit the organization and the vice of the organization and the properties of the organization of the vice of the organization and the organization has been declared to the organization have ultimate control and discretion in deceling whether to make grants to the foreign supported organization has to granization and discretion despite being controlled or supervised by or in connection with its supported organizations.  4d Obit the organization and support and provide organization has to doe not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed (ii) the reasons for each such action; (iii) the authority under the organization's organization document?  5a Did the organization provide and provide organizations, or (ii) other supporting organization when the organization part of a class already designated in the organization or organizations, or (ii) other supp	2	Did the organization have any supported organization that does not have an IRS determination of status			
Did the organization have a supponed organization described in section 501(c)(4), (5), or (6)? If "Yes," answer times 30 and 3c below.  Bid 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(s)(2)? If "Yes," describe in Part VI when and how the organization made the determination.  Cid the organization ensure that all support to such organization was used exclusively for section 170(c)(2)(8) purposes? If "Yes," edition that all support to such organization purposes? If "Yes," edition that on the organization and the determination.  Did the organization nave utilizate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," edition is supported organization had such control and discretion despite being controlled or supervised by or in connection with its supported organization and discretion despite being controlled or subjectives of the foreign supported organization had such control and discretion despite being controlled or subjectives of the foreign supported organization had such control and discretion despite being controlled or subjectives of 50(4)(1) or (2) If "Yes," edition in a support and organization and such control and discretion despite being controlled or subjectives of 50(4)(1) or (2) If "Yes," edition in Part VI including (i) the names and EIN understand the organization support and organization was used exclusively for section 170(c)(2)(8) purposes.  Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 50 and 5c below (if applicable), Aso, provide detail in Part VI, including (i) the names and EIN unumbers of the supported organization's organization was used exclusively for section 170(c)(2)(8) purposes.  Substitutions only. Was the year members of the organization part of a class already designated in the supported organization's organization part of a class already		under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
bid the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 505(a)(2)? /f. **Pis.** describe in Part VI when and how the organization made the determination.  C bid the organization organization and the determination.  Did the organization appropried organization not organization in the United States ("freeign supported organization")? If **Pis.** explain in Part VI what controls the organization supported organization? If **Pis.** organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization and vigorial organization and organization and discretion despite being controlled or supervised by or in connection with its supported organizations.  C bid the organization and 509(a)(1 or C2)? If **Pis.** explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1 or C2)? If **Piss.** 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)(8) purposes.  5a Did the organization and, substitute, or remove any supported organizations during the tax year? If **Piss.** 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 organizations organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organization supported organizations organization partial part villous organizations organization supported organizations organization partial supported organizations organizations and the organizations organization with the supported organizations, organization and the organizations tha		organization was described in section 509(a)(1) or (2).	2		
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)(?)? If "Piss," describe in Part VI when and how the organization made the determination.  c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(?)(8) purposes. If "Yes," eight in Part VI what controls the organization put in place to ensure such use.  4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," described in Part VI how the organization had such control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion desprite being controlled or supervised by or in connection with its supported organization desprite being controlled or supervised by or in connection with its supported organization desprite being controlled or supervised by or in connection with its supported organization under sections 501(c)(3) and 505(a)(1) or (2)? If "Yes", explain in Part VI what controls the organization under sections 501(c)(3) and 505(a)(1) or (2)? If "Yes", explain in Part VI what controls the organization under sections 501(c)(3) and 505(a)(1) or (2)? If "Yes", explain in Part VI what controls the organization under sections 501(c)(3) and 505(a)(1) or (2)? If "Yes", explain in Part VI what controls the organization under sections 501(c)(3) and 505(a)(1) or (2)? If "Yes", explain in Part VI what control was used exclusively for section 170(c)(2)(8) purposes.  3b Did the organization and 350(a)(3)(1) or (2)? If "Yes", explain in Part VI, including the tax year? If "Yes", answer lines 5 to and 5 c below (if applicable). Also, provide detail in Part VI, including the tax year? If "Yes", and the organization or organization so organiz	3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			,
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## GLEN ECHO PARK PARTNERSHIP FOR

Sche	dule A (Form 990 or 990 EZ) 2020 ARTS AND CULTURE, INC. 38	36503	339	Pa	ge 5
Pai	t IV   Supporting Organizations (continued)				
			Y	'es	No
11	Has the organization accepted a gift or contribution from any of the following persons?		$\top$	一	
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and	i			
	11c below, the governing body of a supported organization?	118	a		
b	A family member of a person described in line 11a above?	111	5		
	A 35% controlled entity of a person described in line 11a or 11b above?If "Yes" to line 11a, 11b, or 11c, provide		$\top$		
	detail in Part VI.	110	c		
Sec	tion B. Type I Supporting Organizations				
			Y	'es	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one	e or		$\Box$	
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office	ers.			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one support	dad			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among t				
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1			
2	Did the organization operate for the benefit of any supported organization other than the supported		Т		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in				
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,				
	supervised, or controlled the supporting organization.	2			
Sec	tion C. Type II Supporting Organizations				
			$\top_{Y}$	'es	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors				
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control				
	or management of the supporting organization was vested in the same persons that controlled or managed				
	the supported organization(s).	1			
Sec	tion D. All Type III Supporting Organizations				
			Ty	'es	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		$\top$		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax				
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the				
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	-1	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		$\neg$		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how				
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		- 1	
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a				
-	significant voice in the organization's investment policies and in directing the use of the organization's		TO I		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			ŀ	
	supported organizations played in this regard.	3		Ì	
Sec	tion E. Type III Functionally Integrated Supporting Organizations				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeatsee instru	ctions).			
а	The organization satisfied the Activities Test, Complete line 2 below				
b	The organization is the parent of each of its supported organizations. Complete line 3 below.				
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity	(see instruc	ctions	).	
2	Activities Test. Answer lines 2a and 2b below.			res	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of				
_	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			- 1	
	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.	24	a		
h	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,	-			
9	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in				
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in				
	these activities but for the organization's involvement	21	,		
3	Parent of Supported Organizations, Answer lines 3a and 3b below.		-		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or				
d	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	34			
-	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	34	-		
S	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	31			
	with antibation wilditerrated in task ansatzes at this falt in tack biglow by the attendence in que todate.	1 3			

GLEN ECHO PARK PARTNERSHIP FOR
Schedule A (Form 990 or 990-EZ) 2020 ARTS AND CULTURE, INC. 38-3650339 Page 6

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orgar	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyr	ng trust on	Nov. 20, 1970 (explain in l	Part VI), See instructions
	All other Type III non functionally integrated supporting organizations must	st complete	Sections A through E.	555
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			1
	maintenance of property held for production of income (see instructions)	6		
7		7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from tine 4)	8		
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt use assets (see instructions for short tax year or assets held for part of year):		_	
_	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non exempt use assets	1c		<u> </u>
	Total (add lines 1a, 1b, and 1c)	1d		<u> </u>
	* · · · · · · · · · · · · · · · · · · ·	10		
0	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):	2		
-	Acquisition indebtedness applicable to non-exempt-use assets	3		<del>                                     </del>
_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		<del> </del>
5	Net value of non-exempt-use assets (subtract line 4 from fine 3)	5	<del></del>	ļ
		6	<del>.</del>	<del> </del>
	Recoveries of prior year distributions	7		<del> </del>
_8_	Minimum Asset Amount (add line 7 to line 6)	8		1
Sec	ion C - Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		I
7	Check here if the current year is the organization's first as a non-function.	ally integrat	ed Type III supporting org	janization (see
	instructions)			

Schedule A (Form 990 or 990-EZ) 2020

GLEN ECHO PARK PARTNERSHIP FOR Schedule A (Form 990 or 990-EZ) 2020 ARTS AND CULTURE, INC. 38-3650339 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 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 - provide details in Part VI) 5 6 Other distributions (describe in Part VI). See instructions. 6 7 7 Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. a Distributable amount for 2020 from Section C, line 6 9 10 Line 8 amount divided by line 9 amount 10 (ii) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2020 Amount for 2020 1 Distributable amount for 2020 from Section C, line 6 2 Underdistributions, if any, for years prior to 2020 (reasonable cause required -explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2020 a From 2015 **b** From 2016 c From 2017 d From 2018 e From 2019 f Total of lines 3a through 3e g Applied to underdistributions of prior years h\_Applied to 2020 distributable amount Carryover from 2015 not applied (see instructions) Remainder, Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2020 from Section D, line 7: a Applied to underdistributions of prior years b Applied to 2020 distributable amount c Remainder, Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. 6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2021. Add lines 3) and 4c. 8 Breakdown of line 7: a Excess from 2016

Schedule A (Form 990 or 990-EZ) 2020

b Excess from 2017 c Excess from 2018 d Excess from 2019 e Excess from 2020

# GLEN ECHO PARK PARTNERSHIP FOR 1990-EZ) 2020 ARTS AND CULTURE, INC.

Schedule A	(Form 990 or 990-EZ) 2020 ARTS AND CULTURE, INC.	38-3650339	Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, line line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Pa Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any add (See instructions.)	or 17b; Part III, line 12; is 1 and 2; Part IV, Section it V, Section B, line 1e; Par	C.
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52		COST CONTRACTOR	11.5
		10 - 129-111	
Section 1			

## Schedule A

# Payments from Disqualified Persons Included on Part III, Line 7a

2020

\*\* Do Not File \*\*

\*\*\* Not Open to Public Inspection \*\*\*

Payer's Name	2016 Amount	2017 Amount	2018 Amount	2019 Amount	2020 Amount
	0.	500.	1,276.	284.	570
Par Commission Survey	2,650.	0.	0.	0.	0
MOST THE PERSON	6,000.	0.	0.	0.	0
PART THE PROPERTY OF	800.	0.	0.	0.	0
N	0.	600.	600.	600.	0
MALE REPORT	35.	3,339.	3,381.	0.	0
Confliction of the Confliction	2,485.	2,350.	0.	0.	
CACS OFFICIAL CONTRACTOR	250.	200.	200.	200.	750
CHARLES THE PARTY OF THE PARTY	500.	600.	0.	0.	C
	2,500.	3,370.	3,250.	0.	(
The state of the s	600.	850.	900.	100.	(
	1,000.	750.	0.	0.	
Demonstration of the same of the	3,250.	0.	0.	0.	1
AN	100.	0.	0.	0.	ı
DEPARTMENT OF THE PARTMENT OF	1,790.	0.	0.	0.	l
	2,430.	400.	500.	0.	52
UBER TAXE C	5,035.	8,440.	5,500.	0.	
AND MANAGEMENT	1,800.	2,700.	2,800.	2,400.	2,10
Make was stated to	3,750.	3,900.	2,420.	3,750.	5,60
EN HADITANIA	200.	2,100.	2,330.	0.	2,50
	1,500.	1,500.	2,000.	1,000.	2,50
	0.	10,625.	11,200.	16,000.	7,50
Miss coloni	0.	35.	435.	335.	3
	0.	1,340.	2,150.	200.	1,50
otal to Schedule A, art III, Line 7a					9 9 9 1 1 1 1 1

023172 04-01 20

## Schedule A

# Payments from Disqualified Persons Included on Part III, Line 7a

2020

\*\* Do Not File \*\*
\*\*\* Not Open to Public Inspection \*\*\*

Payer's Name	2016 Amount	2017 Amount	2018 Amount	2019 Amount	2020 Amount
	0.	1,435.	1,050.	0.	(
	0.	1,850.	500.	0.	30
AND TOO	. 0.	0.	2,740.	2,000.	1,90
	0.	0.	0.	50.	
	0.	0.	0.	250.	18
STEEL OF TRANSPORTED	0.	0.	0.	1,500.	2,25
	0.	0.	0.	50.	
	0.	0.	0.	250.	
and the same ratio	0.	0.	0.	0.	50
	0.	0.	0.	0.	25
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otal to Schedule A,	36,675.	46,884.	43,232.	28,969.	28,96

023172 04-01-26

## Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

## Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545 0047

Employer identification number

2020

Name of the organization

GLEN ECHO PARK PARTNERSHIP FOR ARTS AND CULTURE, INC.

38-3650339

Organization type (check one): Filers of: Section: X 501(c)( 3 ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt chantable 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 or 990 EZ), 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 () 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), it, and iti. 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, chantable, 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, 990-EZ, or 990-PF),

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

cert fy that it doesn't meet the filing requirements of Schedule 8 (Form 990, 990 EZ, or 990 PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization

Employer identification number

GLEN ECHO PARK PARTNERSHIP FOR ARTS AND CULTURE, INC. 38-3650339 Part I Contributors (see Instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** ARTS AND HUMANITIES COUNCIL OF X 1 MONTGOMERY COUNTY Person Payroll 801 ELLSWORTH DRIVE 314,261. Noncash (Complete Part II for SILVER SPRING, MD 20910 noncash contributions.) (c) (d) (a) Type of contribution Name, address, and ZIP + 4 **Total contributions** No. 2 [X] Person Payroll 5,000. Noncash (Complete Part II for WASHINGTON, DC 20016 noncash contributions.) (a) (b) (d) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. X 3 MARYLAND STATE ARTS COUNCIL Person Payroll 175 WEST OSTEND STREET, SUITE E 358,024. Noncash (Complete Part II for BALTIMORE, MD 21230 noncash contributions.) (c) (d) (b) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution CHDIG TO 4 (X) Person **Payroll** 7,500. Noncash (Complete Part II for DC 20015 noncash contributions.) WASHINGTON, (a) (d) Type of contribution Name, address, and ZIP + 4 **Total contributions** No. X 5 MARYLAND HERITAGE AREAS AUTHORITY Person C/O MARYLAND HISTORICAL TRUST 100 Payroll 10,000. COMMUNITY PLACE Noncash (Complete Part II for CROWNSVILLE, MD 21032 noncash contributions.) (a) (b) (c) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. GRITT \*\*\*\*\* 6 Person Payroll ^OR 24,934. X

023452 11-25-20

Noncash X (Complete Part || for

noncash contributions.)

POTOMAC, MD 20854

Name of organization GLEN ECHO PARK PARTNERSHIP FOR Employer identification number

ARTS	AND CULTURE, INC.		<u>-3650339</u>
Part I	Contributors (see instructions). Use duplicate copies of Part Life	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	BETHESDA, MD 20814	s 5,000.	Person X Payroll Noncash (Complete Part I) for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	EBETHESDA, MD 20817	s 5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	SI WASHINGTON, DC 20416	\$ 222,745.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	BI.THESDA, MD 20817	\$ 5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	CHEVY CHASE, MD 20815	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	CLEN FOUR ARD 20042	s	Person X Payroll Noncash (Complete Part II for
023452 11-		Schedule B (Form	noncash contributions.) 1990, 990-EZ, or 990-PF) (202
	2	24	

Name of organization
GLEN ECHO PARK PARTNERSHIP FOR

Employer identification number

	AND CULTURE, INC.	3	8-3650339
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.	BETHESDA, MD 20814	s5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	MONTGOMERY COUNTY, MD  101 MONROE STREET 9TH FLOOR  ROCKVILLE, MD 20850	s 152,190.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroil Complete Part It for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization GLEN ECHO PARK PARTNERSHIP FOR ARTS AND CULTURE, INC.

Employer identification number

38-3650339

Part II	Noncash Property (see instructions). Use duplicate copies of Part I	Il if additional space is needed.	7
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	LEGAL SERVICES	_	
		\$ 24,934.	06/30/21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		_   \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			-
		_	
		\$	
(a) No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received

Name of organization

Employer identification number

GLEN ECHO PARK PARTNERSHIP FOR

ARTS A	AND CULTURE, INC.		38-3650339
Part III	from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively retigious, or	through (e) and the following line entry. F her table: etc., contributions of \$1,000 or less	on 501(c)(7), (8), or (10) that total more than \$1,000 for the year organizations for the year than \$1,000 for the year than year the control of the year.
75VNS T	Use duplicate copies of Part III if additional	space is needed.	
(a) No. from Part 1	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
-	Transferee's name, address, an	od ZIP + 4	Relationship of transferor to transferee
(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, ar	nd ZIP + 4	Relationship of transferor to transferee
(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, ar	nd ZIP + 4	Relationship of transferor to transferee
(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, a	nd ZIP + 4	Relationship of transferor to transferee
023454 11-2	5-29	27	Schedule B (Form 990, 990-EZ, or 990-PF) (2020

## SCHEDULE D

(Form 990)

**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

Department of the Treasury Internal Revenue Service Name of the organization

GLEN ECHO PARK PARTNERSHIP FOR ARTS AND CULTURE, INC.

Employer identification number 38-3650339

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 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Yes No are the organization's property, subject to the organization's exclusive legal control? 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? Part II | Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, ine 7 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 Held at the End of the Tax Year day 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 in (a) 2c d. Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure 24 listed in the National Register. 3. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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 Yes violations, and enforcement of the conservation easements it holds? 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 S 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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 (iii) Assets included in Form 990, Part X ▶ 5 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

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

Schedule D (Form 990) 2020

## GLEN ECHO PARK PARTNERSHIP FOR

Sche	dule D (Form 990) 2020 ARTS AND	CULTURE,	INC.		31	8-36	50339	Page 2
	t III   Organizations Maintaining Co	ollections of Ar	t, Historical Tr	easures, or Oth				
3	Using the organization's acquisition, accessio		-					
	collection items (check all that apply):		_					
a	Public exhibition	d	Loan or exch	nange program				
b	Scholarly research	e	Other					
c	Preservation for future generations							
4	Provide a description of the organization's col	llections and explain	how they further th	ne organization's exe	empt purpose	e in Part	XIII.	
5	During the year, did the organization solicit or	98		_				
	to be sold to raise funds rather than to be mai						Yes	No.
Par	t IV Escrow and Custodial Arrang	ements. Comple	te if the organization	n answered 'Yes' or	n Form 990 I	Part IV,	ine 9, or	
	reported an amount on Form 990, Part	X, line 21						
1a	Is the organization an agent, trustee, custodia	n or other intermed	iary for contribution	s or other assets no	t included			
	on Form 990, Part X?						Yes	X No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the fol	lowing table:					
							Amount	
c	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance		MANAGEMENT OF THE PARTY OF THE		1f			
2a	Did the organization include an amount on Fo	rm 990, Part X, line	21, for escrow or cu	istodial account liab	ility?		Yes	U No
ь	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided on Part XI	II			
Par	t V Endowment Funds. Complete if	the organization and	swered "Yes" on Fo	rm 990, Part V, line	10			
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three year	irs back	(e) Four y	ears back
1a	Beginning of year balance	939,565.	870,223,	693,670.	63	9,685.	5	93,084.
b	Contributions	37,444.	139,145,	228,441.	14-	4,017.	1	03,352.
C	Net investment earnings, gains, and losses							
d	Grants or scholarships		•					
e	Other expenditures for facilities	-	-					
	and programs	46,954.	69,803.	51,888,	9	0,032.		56,751.
f	Administrative expenses							
g	End of year balance	930,055.	939,565.	870,223.	69	3,670.	6	39,685.
2	Provide the estimated percentage of the curre	ent year end balance	e (line 1g, column (a	)) held as:				
а	Board designated or quasi-endowment	100,0000	%					
b	Permanent endowment	%	_					
C	Term endowment > 9	6						
	The percentages on lines 2a, 2b, and 2c shou	uld equal 100%						
За	Are there endowment funds not in the posses	ssion of the organiza	ition that are held a	nd administered for	the organiza	tion		
	by:						Y	es No
	(i) Unrelated organizations						3a(i)	X
	(II) Related organizations						3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organizat	tions listed as requir	ed on Schedule R?				3b	
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds.					
Pai	rt VI   Land, Buildings, and Equipm	ent.	_					
	Complete if the organization answered	Yes on Form 990	, Part IV, line 11a. S	See Form 990, Part )	(, line 10.			
	Description of property	(a) Cost or of	ther (b) Cost	or other (c)	Accumulated		(d) Book	value
		basis (investr	nent) basis	(other) de	epreciation			
1a	Land							
b	Buildings			3,771.	129,11			,654.
С	Leasehold improvements			3,195.	158,76			,431.
d	Equipment			6,665.	80,14			,516.
	Other	.,		4,127.	72,99	1.		,136.
Tota	I. Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part	X, column (B), line	0c.)			766	,737.

Schedule D (Form 990) 2020

ARTS AND CULTURE. INC.

Part VII Investments - Other Securities.	TURE, INC.	20-	Page 3
Complete if the organization answered "Yes" o	n Form 990, Part IV. line	11b. See Form 990, Part X, line 12.	<u> </u>
(a) Description of security or category including name of vector ty	(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)			
(8)		1	
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Fotal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered 'Yes' or	n 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)		<del>                                     </del>	· · · · · · · · · · · · · · · · · · ·
Total. (Co. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" of		11d. See Form 990, Part X, line 15.	
(a) D	escription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total, (Column (b) must equal Form 990, Part X, col. (B) line	15.)	<b>•</b>	
Part X Other Liabilities.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X. line 25.	
(a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) ACCRUED COMPENSATION			118,601.
(3) TUITION PAYMENTS HELD FOR			
(4) DISBURSEMENT			361,649.
(5) TUITION REFUNDS PENDING	· · · · · · · · · · · · · · · · · · ·		26,423.
(6) FACILITY RENTAL DEPOSITS			71,489.
(7) GIFT CERTIFICATES OUTSTAN	DING		800.
(8) TENANT DEPOSITS		-	10,298.
(9) ACCRUED INTEREST			4,385.
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.1		608,145.
Later Leaves to high address our part and the min		militaria.	

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 1 the text of the footnote has been provided in Part XIII Schedule D (Form 990) 2020

> SEE PART XIII FOR CONTINUATIONS 30

11280513 795695 5111-001

GLEN ECHO PARK PARTNERSHIP FOR ARTS AND CULTURE, INC.

Por	t XI Reconciliation of Revenue per Audited Financial Statem	ents With I	Revenue per R	eturn	).
1 6	Complete if the organization answered "Yes" on Form 990, Part IV, I no 12		TOTOLOGO POT T		•
1	Total revenue, gains, and other support per audited financial statements			1	1,833,311.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12;				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	29,684.		
c	Recovenes of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d		.	
A	Add lines 2a through 2d			20	29,684.
3	Subtract line 2e from line 1		Tu 2:	3	1,803,627.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		27		
а	Investment expenses not included on Form 990. Part VIII, line 7b	4a			
b	Other (Describe in Part XIII )	4b			
С	Add lines 4a and 4b			4c	0.
-5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	1,803,627.
Pa	rt XII Reconciliation of Expenses per Audited Financial Stater		Expenses per	Retu	rn.
_	Complete if the organization answered 'Yes' on Form 990, Part IV, line 12:	9			
1	Total expenses and losses per audited financial statements			1	1,627,609.
2	Amounts included on line 1 but not on Form 990 Part IX, line 25				
а	Donated services and use of facilities	2a	29,684.		
b	Prior year adjustments	2b			
¢	Other losses	2c			
d	Other (Describe in Part XIII.)	2d		1	00 604
e	Add lines 2a through 2d			2 <del>e</del>	29,684.
3	Subtract line 2e from line 1			3	1,597,925.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1;	1 1			
а	Investment expenses not included on Form 990, Part V.II, line 7b	4a	_		
þ		4b			0
C	Add lines 4a and 4b			4c	0. 1,597,925.
5				5	1,097,920.
۱۲a					
	rt XIII Supplemental Information.				
Prov	ide the descriptions required for Part II, lines 3-5, and 9; Part III, lines 1a and 4; Pa			4; Part	X, line 2; Part XI,
Prov				4; Part	X, line 2; Part XI,
Prov	ide the descriptions required for Part II, lines 3-5, and 9; Part III, lines 1a and 4; Pa			4; Part	X, line 2; Part XI,
Prov	ide the descriptions required for Part II, lines 3.5, and 9; Part III, lines 1a and 4. Pa 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ac			4; Part	X, line 2; Part XI,
Prov	ide the descriptions required for Part II, lines 3-5, and 9; Part III, lines 1a and 4; Pa			4; Part	X, line 2; Part XI,
Provines	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Pa 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any action of the complete this part to provide any ac	iditional inform	aation		
Provines	ide the descriptions required for Part II, lines 3.5, and 9; Part III, lines 1a and 4. Pa 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ac	iditional inform	aation		
Provines PA	ide the descriptions required for Part II, lines 3 5, and 9; Part III, lines 1a and 4. Part 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any address X , LINE 2:  E ORGANIZATION'S MANAGEMENT EVALUATES TAX	POSITIO	ONS AND RE	COG	NIZES A TAX
Provines PA	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Pa 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any action of the complete this part to provide any ac	POSITIO	ONS AND RE	COG	NIZES A TAX
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Provines PA	ide the descriptions required for Part II, lines 3 5, and 9; Part III, lines 1a and 4. Part 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any address X , LINE 2:  E ORGANIZATION'S MANAGEMENT EVALUATES TAX	POSITION UNCERTA	ONS AND RE	COG	NIZES A TAX
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Provinces PA TH LI LI RE PO UN	ide the descriptions required for Part II, lines 3 5, and 9; Part III, lines 1a and 4. Part 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any accept to the part XII. In the Amagement Evaluates tax ability if the organization has taken an interpretation of the Sustained Upon Venue Service. The organization's management Evaluates tax ability than not would not be sustained upon venue service. The organization's management Sitions, and has concluded that as of Junions.	POSITION POS	ONS AND REIN POSITION ATION BY TANALYZED 021, THERE	COG ON T CHE ITS AR	NIZES A TAX HAT MORE INTERNAL TAX E NO ANIZATION
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# GLEN ECHO PARK PARTNERSHIP FOR 38-3650339 Page 5 ARTS AND CULTURE, INC. Schedule D (Form 990) 2020 ARTS AND CU Part XIII Supplemental Information (continued)

Part X Other Liabilities. See Form 990, Part X, line 25.  (a) Description of liability	
(a) Description of liability	(b) Amount
TENANT SECURITY DEPOSIT	(b) Amount 14,500.
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### SCHEDULE J (Form 990)

Department of the Treasury

## **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.

**Open to Public** Inspection

Employer identification number

OMB No. 1545-0047

lemal Revenue Service Name of the organization

GLEN ECHO PARK PARTNERSHIP FOR

38-3650339 ARTS AND CULTURE, INC.

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

Regulations section 53.4958-6(c)? LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2020

Schedule J (Form 990) 2020 ARTS AND CULTURE, INC.

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

Schedule J (Form 990) 2020	Schedu			ע ר			
							(0)
							(0)
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į							(0)
							(3)
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							(0)
							(ii)
							0
0.	0.	0.	0.	0.	0.	0.	EXECUTIVE DIRECTOR (ii)
0.	153,549.	11,315.	6,766.	0.	0.	135,468.	(1) K. BOERNER (i)
				compensation	compensation	1	
reported as deferred			compensation	(iii) Other	(ii) Bonus &	(i) Base	(A) Name and Title
(F) Compensation in column (B)	(E) Total of columns (B)(0-(D)	(D) Nontaxable	(C) Retirement and		(B) Breakdown of W-2 and/or 1099-MISC compensation	(B) Breakdown of	

90) 2020	Schedule J (Form 990) 2020	
	And the second s	
	Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.	Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a.
Page 3	38-3650339 Page 3	Schedule J (Form 990) 2020 ARTS AND CULTURE, INC.

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

■ Go to www.irs.gov/Form990 for the latest information. GLEN ECHO PARK PARTNERSHIP FOR

Employer identification number 38-3650339

Name of the organization ARTS AND CULTURE, INC.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: PROMOTES THE PARK AS A UNIQUE DESTINATION FOR OUR REGION'S DIVERSE POPULATION. THE PARTNERSHIP NURTURES A DYNAMIC COMMUNITY OF ARTISTS AND PERFORMERS WHILE PRESERVING AND MANAGING HISTORIC FACILITIES WITHIN A NATIONAL PARK.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: PRESERVING AND MANAGING HISTORIC FACILITIES WITHIN A NATIONAL PARK.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

EXHIBITIONS AND GALLERY: DISPLAY AND SALE OF ORIGINAL ART BY ARTISTS IN RESIDENCE AT GLEN ECHO PARK, STUDENTS, INSTRUCTORS, AND OTHER REGIONAL ARTISTS.

PUBLIC FESTIVALS AND EVENTS: ANNUAL EVENTS FOR ARTISTS, FAMILIES, AND LOCAL RESIDENTS INCLUDING FAMILY DAY, THEN AND NOW, AND OTHER SEASONAL EVENTS.

MARKETING: THE ORGANIZATION MARKETED AND PROMOTED GLEN ECHO PARK THROUGH ADVERTISING AND COMMUNITY OUTREACH, HIGHLIGHTING THE PARK'S RICH HISTORY, AND APPEALING TO A BROAD RANGE OF CULTURAL, ETHNIC AND SOCIO-ECONOMIC COMMUNITIES.

CAROUSEL: RESTORATION, OPERATION, AND MAINTENANCE OF THE DENTZEL CAROUSEL LOCATED IN GLEN ECHO PARK.

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

THE DRAFT OF THE 990 IS FIRST REVIEWED BY THE ORGANIZATION'S EXECUTIVE

DIRECTOR, BOOKKEEPER, AND AUDIT COMMITTEE. COMMENTS AND EDITS ARE PROVIDED LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20

Employer identification number 38-3650339

TO THE PREPARER. ONCE THE EDITS HAVE BEEN MADE, A FINAL DRAFT IS SENT TO THE EXECUTIVE DIRECTOR AND THE AUDIT COMMITTEE FOR ANY FINAL FEEDBACK. IF THERE ARE NO CHANGES, A FINAL VERSION OF THE FORM 990 IS SENT TO THE BOARD OF DIRECTORS PRIOR TO FILING.

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

AN INTERESTED PERSON IS UNDER A CONTINUING OBLIGATION TO DISCLOSE ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST, SUCH AS A LIST OF FAMILY MEMBERS, SUBSTANTIAL BUSINESS OR INVESTMENT HOLDINGS, AND OTHER TRANSACTIONS OR AFFILIATIONS WITH BUSINESSES AND OTHER ORGANIZATIONS AND THOSE OF FAMILY MEMBERS, AS SOON AS IT IS KNOWN, OR REASONABLY SHOULD BE KNOWN. ALL DIRECTORS, PRINCIPAL OFFICERS, MEMBERS OF A COMMITTEE WITH BOARD-DELEGATED POWERS, THE EXECUTIVE DIRECTOR, AND ANY STAFF MEMBERS OR VOLUNTEERS WHO ARE IN A POSITION TO EXERCISE SUBSTANTIAL INFLUENCE OVER THE AFFAIRS OF THE CORPORATION SHALL COMPLETE AN ANNUAL DISCLOSURE STATEMENT TO DISCLOSE FULLY AND COMPLETELY THE MATERIAL FACTS ABOUT ANY ACTUAL OR POTENTIAL CONFLICTS OF INTEREST. SUCH DISCLOSURE STATEMENT SHALL AFFIRM THAT SUCH PERSON: A) HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY; B) HAS READ AND UNDERSTANDS THE POLICY; C) HAS AGREED TO COMPLY WITH THE POLICY; AND D) UNDERSTANDS THAT THE CORPORATION IS A CHARITABLE ORGANIZATION AND THAT IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES THAT ACCOMPLISH ONE OR MORE OF ITS TAX EXEMPT PURPOSES. THE INITIAL DISCLOSURE STATEMENT SHALL BE COMPLETED AS SOON AS PRACTICABLE AFTER EACH SUCH PERSON'S ASSOCIATION WITH THE CORPORATION, AND SHALL BE UPDATED ANNUALLY THEREAFTER. AN ADDITIONAL DISCLOSURE STATEMENT SHALL BE FILED AT SUCH TIME AS AN ACTUAL OR POTENTIAL CONFLICT ARISES, IF SUCH CONFLICT IS NOT DISCLOSED IN THE ANNUAL STATEMENT. WHERE AN ACTUAL OR POTENTIAL CONFLICT EXISTS BETWEEN THE INTEREST OF THE CORPORATION AND

INTERESTED PERSON WITH RESPECT TO A SPECIFIC PROPOSED ACTION OR TRANSACTION, THE CORPORATION SHALL REFRAIN FROM THE PROPOSED ACTION OR TRANSACTION UNTIL SUCH TIME AS THE PROPOSED ACTION OR TRANSACTION HAS BEEN APPROVED BY THE DISINTERESTED MEMBER OF THE BOARD OF DIRECTORS OF THE CORPORATION. INTERESTED PERSONS WILL BE REMOVED FROM THE DECISION PROCESS SO THAT THEIR PRESENCE DOES NOT INHIBIT THE BOARD FROM A FULL DELIBERATION. IF THE BOARD OF DIRECTORS OR THE CONFLICTS OF INTEREST COMMITTEE HAS REASONABLE CAUSE TO BELIEVE THAT A MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT SHALL INFORM THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORD THE MEMBER AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. IF, AFTER HEARING THE RESPONSE OF THE MEMBER AND MAKING SUCH FURTHER INVESTIGATION AS MAY BE WARRANTED IN THE CIRCUMSTANCES, THE BOARD OF DIRECTORS OR THE CONFLICTS OF INTEREST COMMITTEE DETERMINES THAT THE MEMBER HAS IN FACT FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION, INCLUDING A RECOMMENDATION OF REMOVAL FROM THE BOARD OF DIRECTORS. THE MINUTES OF THE BOARD OF DIRECTORS AND ALL COMMITTEES WITH BOARD-DELEGATED POWERS SHALL FULLY DOCUMENT THE TRANSACTION SO THAT THE DECISION, AND ALL CONSIDERATIONS, MAY BE SHARED WITH ANYONE WHO QUESTIONS THE TRANSACTIONS.

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

THE PROCESS FOR DETERMINING COMPENSATION IS AS FOLLOWS: 1) DATA IS COLLECTED ABOUT THE MARKET AVERAGES FOR EQUIVALENT POSITIONS IN NONPROFIT ORGANIZATIONS IN THE WASHINGTON DC METROPOLITAN AREA, 2) PAST COMPENSATION AND PERFORMANCE OF THE INDIVIDUAL IS REVIEWED, 3) COMPENSATION IS DETERMINED BASED ON PERFORMANCE COMBINED WITH COMPENSATION LEVEL AND THE ORGANIZATION'S FINANCIAL ABILITY TO PROVIDE INCREASE OR PAY AT THE MARKET 032212 11-20-20 Schedule O (Form 990 or 990-EZ) 2020

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Employer identification number 38-3650339

COMPENSATION LEVEL. FOR THE EXECUTIVE DIRECTOR, THE COMPENSATION AND PERFORMANCE REVIEW IS CONDUCTED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS IN COLLABORATION WITH THE FULL BOARD WHO WILL ALSO PROVIDE COMMENTS. AN EXECUTIVE SESSION MEETING IS HELD TO DISCUSS RECOMMENDATIONS AND APPROVALS, FOLLOWED BY NOTIFICATION OF THE BOARD OF DIRECTORS. FOR TOP MANAGEMENT OFFICIALS, THE EXECUTIVE DIRECTOR CONDUCTS THE COMPENSATION EVALUATION. THE MEMBERS OF THE BOARD OF DIRECTORS AND THE ELECTED OFFICERS OF THE CORPORATION SHALL SERVE WITHOUT COMPENSATION FOR THEIR SERVICES AS BOARD MEMBERS OR OFFICERS. HOWEVER, A DIRECTOR CAN RECEIVE COMPENSATION FOR HIS/HER SERVICE TO THE CORPORATION IN SOME OTHER CAPACITY. A VOTING MEMBER OF THE BOARD OF DIRECTORS, OR OF ANY COMMITTEE WHOSE JURISDICTION INCLUDES COMPENSATION MATTERS, AND WHO RECEIVES COMPENSATION, DIRECTLY OR INDIRECTLY, FROM THE CORPORATION FOR SERVICES, IS PRECLUDED FROM VOTING ON MATTERS PERTAINING TO THAT MEMBER'S COMPENSATION. CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION ARE DOCUMENTED IN THE MINUTES OF THE GOVERNING BOARD AND THE ORGANIZATION WILL REPORT THE COMPENSATION ON AN ORIGINAL FEDERAL TAX INFORMATION RETURN.

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

GOVERNING DOCUMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE. THE CONFLICT OF INTEREST POLICY IS AVAILABLE UPON REQUEST. THE AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE AND UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONSULTING:

032212 11-20-20

PROGRAM SERVICE EXPENSES

9,766.

MANAGEMENT AND GENERAL EXPENSES

770.

Schedule O (Form 990 or 990-EZ) 2020

Schedule O (Form 990 or 990-EZ) 2020  Name of the organization GLEN ECHO PARK PARTNERSHIP FOR ARTS AND CULTURE, INC.	Page 2 Employer identification number 38 - 3650339
FUNDRAISING EXPENSES	33,000.
TOTAL EXPENSES	43,536.
PROPERTY SERVICES:	
PROGRAM SERVICE EXPENSES	119,921.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	119,921.
OTHER PROFESSIONAL FEES:	
PROGRAM SERVICE EXPENSES	18,409.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	18,409.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	181,866.
FORM 990, PAGE 12, PART XII, LINE 2C	
THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBI	LITY FOR THE
OVERSIGHT OF THE AUDIT AND OF ITS FINANCIAL STATEMENTS A	ND THE
SELECTION OF AN INDEPENDENT ACCOUNTANT. THIS PROCESS HAS	NOT CHANGED
FROM THE PRIOR YEAR.	3.