			** PUBLIC DISCLOSURE COP	Y **		
	0	00	Return of Organization Exempt Fr	rom Ir	ncome Tax	OMB No. 1545-0047
Forr	пY	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue C			15) 2021
	•	•••	Do not enter social security numbers on this form as			Open to Public
Depa Interr	rtment al Reve	of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and the second seco	-		Inspection
AF	or th	e 2021 calenda			EP 30, 2022	
	heck if	C Name of	organization		D Employer identifie	cation number
	⊐ Addre					
	chang Name		DER CIRCLE, INC		50 00451	
	_chang	ge Doing bu	usiness as		52-23451	
	_returr]Final	n Number		oom/suite	E Telephone number	
		y 9139	BROOKVILLE ROAD		(301) 60	
	ated ⊐Amer		own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	9,844,613.
	_returr Appli		ER SPRING, MD 20910		H(a) Is this a group re	
	_ tion pend	F Name a	nd address of principal officer: AMY S JAVAID		for subordinates	
<u> </u>			AS C ABOVE		H(b) Are all subordinates in	
		empt status:		527	1	list. See instructions
					H(c) Group exemptio	
	orm o art l	f organization: [Summary	X Corporation Trust Association Other ►	L Year (of formation: 2001	State of legal domicile: MD
1 6		•	e the organization's mission or most significant activities: $\frac{ ext{THE}}{ ext{ML}}$	TCCTO		
e	1		POVERTY. OUR HOLISTIC APPROACH INTE			
ano						
Governance	2		★ ▶ if the organization discontinued its operations or disposed incompared of the gauge incompared (Dort)(1, line 1c)			23
ğ	3					23
	4 5		ependent voting members of the governing body (Part VI, line 1b) of individuals employed in calendar year 2021 (Part V, line 2a)			92
ties	6					9000
Activities &			of volunteers (estimate if necessary) d business revenue from Part VIII, column (C), line 12			0.
A			business taxable income from Form 990-T, Part I, line 11			0.
		Net unrelated			Prior Year	Current Year
	8	Contributions	and grants (Part VIII, line 1h)		9,285,436.	9,280,425.
Revenue	9		ce revenue (Part VIII, line 2g)		0.	0.
ver	10	•	come (Part VIII, column (A), lines 3, 4, and 7d)		4,839.	2,554.
Å	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		11,521.	290,510.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		9,301,796.	9,573,489.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)		1,281,294.	106,410.
	14		o or for members (Part IX, column (A), line 4)		0.	0.
	40	0	(1) = (1) + (1)		3,594,683.	3,955,950.
see	16a	Professional fu	undraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	Ь	Total fundraisi	and raising fees (Part IX, column (A), lines 5-10) ng expenses (Part IX, column (D), line 25) \blacktriangleright 508,720	0.		
ш	17	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)		2,962,145.	5,503,722.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)		7,838,122.	9,566,082.
_	19		expenses. Subtract line 18 from line 12		1,463,674.	7,407.
or es					ginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (F	Part X, line 16)		9,165,754.	8,569,408.
Ass	21	-	(Part X, line 26)		3,664,685.	3,077,286.
Net	22		und balances. Subtract line 21 from line 20		5,501,069.	5,492,122.
	irt II					
Und	er pen	alties of perjury,	declare that I have examined this return, including accompanying schedules a	ind stateme	nts, and to the best of my	v knowledge and belief, it is
true.	corre	ct, and complete.	Declaration of preparer (other than officer) is based on all information of which	h preparer	has any knowledge.	

	i ind completer beclaration of preparer (ether than ether	n) ie baeea en an internation et inten propart	in mae any i	l
Sign Here	Signature of officer <u>AMY S JAVAID, PRESIDEN</u> Type or print name and title	T AND CEO		Date
Paid	Print/Type preparer's name PAMELA GRAY	Preparer's signature	Date	Check PTIN if self-employed P01237506
Preparer	Firm's name 🕒 SB & COMPANY			Firm's EIN ▶ 20-2153727
Use Only	Firm's address 10200 GRAND CENT	RAL AVE., SUITE 250		
	OWINGS MILLS, MD	21117		Phone no. (410)5840060
May the IF	RS discuss this return with the preparer shown abo	ve? See instructions		X Yes No
132001 12-0	9-21 LHA For Paperwork Reduction Act Notic	ce, see the separate instructions.		Form 990 (2021)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form		-2345144	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	. <u></u>	Х
1	Briefly describe the organization's mission:		
	THE MISSION OF A WIDER CIRCLE IS TO END POVERTY. OUR HOLIST		СН
	INTEGRATES ON-THE-GROUND SERVICES FOR THE CREATION OF STABLE		
	WORKFORCE DEVELOPMENT, AND NEIGHBORHOOD REVITALIZATION. WE A		
	TO DEVELOP LARGE-SCALE SOLUTIONS THAT INCORPORATE GREATER AV	VARENESS	
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes	XNo
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	XNo
	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	red by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the	total expenses, a	nd
	revenue, if any, for each program service reported.		
4a)
	ESSENTIAL SUPPORT: SPECIFIC ASSISTANCE TO NEEDY INDIVIDUALS	IN THE F	ORM
	OF FURNITURE, BABY ITEMS AND HOUSEHOLD GOODS. COST AND DONAT	ED VALUE	OF
	ITEMS ARE ESTIMATED BASED ON MARKET VALUE RESEARCH. 10,000	PEOPLE	
	BENEFITTED.		
4h	(Code:) (Expenses \$1, 420, 838. including grants of \$) (Revenue \$))
10	NEIGHBORHOOD PARTNERSHIPS: PLACE BASED PROGRAMMING IN COMMUN	JITIES IN	/
	WASHINGTON DC. VARIOUS SERVICES AND PROGRAMS OFFERED BASED		
	NEEDS INCLUDING COOKING CLASSES, WORKFORCE DEVELOPMENT PROGR		
	WELLNESS AND CREATIVITY WORKSHOPS, AND PROVISION OF BASIC NE	· · · · · · · · · · · · · · · · · · ·	•
	1,000 PEOPLE BENEFITTED.		•
40	(Code:) (Expenses \$ 919,366. including grants of \$) (Revenue \$)
40	WORKFORCE DEVELOPMENT: PROGRAM IN SUPPORT OF JOB READINESS	THROUGH T	<u>не</u> ,
	PROVISION OF CLASSES, TRAININGS AND INDIVIDUAL SUPPORT ON IT		
	RESUMES, INTERVIEW PREP, CONFLICT RESOLUTION, PROBLEM SOLVIN		110
	NETWORKING AND NAVIGATION OF THE LABOR MARKET. 1,000 PEOPLE	-	ED
	METWORKING AND NAVIGATION OF THE DADOR MARKET: 1,000 TEOTHE	DENEFIT	• 48
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 8,357,868.	;	00
		Form S	990 (2021)
132002	2 12-09-21		
	3		

10510713 138138 AWC001

2021.06000 A WIDER CIRCLE, INC AWC001_1

Form	aan	(2021
гош	990	12021

 Form 990 (2021)
 A WIDER CIRCLE, INC

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			77
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
•	Schedule D, Part III	8		<u> </u>
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?			x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10	х	
44	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	<u>_</u>	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
•	as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
d		11a	х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a	- 23	
D.	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
Ŭ	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		<u> </u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		_X_
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	X 000	(a.a · ·
132003	3 12-09-21	Form	220	(2021)

132003 12-09-21

4

Form	990	(2021)
	330	(2021)

 Form 990 (2021)
 A WIDER CIRCLE, INC

 Part IV
 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
_	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
132004	↓ 12-09-21	Form	990	(2021)

5 2021.06000 A WIDER CIRCLE, INC AWC001_1

_	990 (2021) A WIDER CIRCLE, INC		52-2345	144	Р	age 5
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)					
_					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		92			
h	filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax return	2a		2b	Х	
D	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to $e_{-fi/e}$. See instruction			20		
3a				3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a					
	financial account in a foreign country (such as a bank account, securities account, or other financial a			4a		х
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 A	ccounts	; (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	ction?		5b		Х
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	e organ	ization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributi	ons or g	gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices pro	ovided to the payor?	7a		
				7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			_		
	to file Form 8282?	1 1		7c		
	If "Yes," indicate the number of Forms 8282 filed during the year	7d		_		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or	0		7e		
t	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	-		7f		
g L	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g 7b		
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		a Fumi 1096-0?	7h		
0		-		8		
9	Sponsoring organizations maintaining donor advised funds.			0		
a				9a		
				9b		
0	Section 501(c)(7) organizations. Enter:					
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
1	Section 501(c)(12) organizations. Enter:	· · · ·		1		
а	Gross income from members or shareholders	11a				
	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
3	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c				
				14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14b		
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					
	excess parachute payment(s) during the year?			15		Х
~	If "Yes," see the instructions and file Form 4720, Schedule N.		0			v
6	Is the organization an educational institution subject to the section 4968 excise tax on net investment	tincome	97	16		X
	If "Yes," complete Form 4720, Schedule O.					
-						
7	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in			4-		
7	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.			17		

10310/13 130130 1100001	10510713	138138	AWC001
-------------------------	----------	--------	--------

Form 990 (2	2021
-------------	------

105

X

 Form 990 (2021)
 A WIDER CIRCLE, INC
 52-2345144
 Page

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

 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI	
Section A. Governing Body and Management	

					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	23			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	23			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with an	y other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	direct s	upervision			
	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 99			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's asso	ets?		5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap					
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockhold	ers, or			
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		0			
а	The governing body?			<u>8a</u>	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
Э	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X
ec	ion B. Policies (This Section B requests information about policies not required by the Internal Rev	venue C	ode.)			
					Yes	N
	Did the organization have local chapters, branches, or affiliates?			10a	\mid	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such cha	apters, a	ıffiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes? \dots			10b		
la	Has the organization provided a complete copy of this Form 990 to all members of its governing body	before	filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.					
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conflic	.ts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	'es," des	cribe			
	on Schedule O how this was done			12c	X	
3	Did the organization have a written whistleblower policy?			13		X
1	Did the organization have a written document retention and destruction policy?			14	X	
5	Did the process for determining compensation of the following persons include a review and approval	l by inde	pendent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b	x	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	nent with	a			
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi					
	exempt status with respect to such arrangements?		<u></u>	16b		
_	ion C. Disclosure					
7	List the states with which a copy of this Form 990 is required to be filed MD					
3	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, an	nd 990-T	(section 501(c)(3)s	only)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.					
_	Own website Another's website X Upon request Other (explain		,			
)	Describe on Schedule O whether (and if so, how) the organization made its governing documents, con	nflict of i	nterest policy, and	financ	cial	
	statements available to the public during the tax year.					
0	State the name, address, and telephone number of the person who possesses the organization's boo	ks and r	ecords 🕨			
	AMY S JAVAID - (301) 608-3504 9159 BROOKVILLE ROAD, SILVER SPRING, MD 20910					
	YINY BROOKVILLE ROAD SILVER SPRING MD 20910					
	12-09-21				9 90	100-

Form 990 (2021) A WIDER CIRCLE, INC	52-2345144 Page 7				
Part VII Compensation of Officers, Directors, Trustees, Key En	ployees, Highest Compensated				
Employees, and Independent Contractors					
Check if Schedule O contains a response or note to any line in this Part VII					
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees					
1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.					

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

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

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

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

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

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do			ition	l than c	ane	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		cer ar I	id a d	Irecto	r/trus [:]	tee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		ee	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	ual tr	tional		yolqr	vee Vee	_	1099-1420)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) MARTY DURBIN	1.00			0	×	Ξæ	ш			
CHAIR		x		x				0.	Ο.	0.
(2) JASON DAHL	1.00								•••	
TREASURER		x		x				0.	Ο.	0.
(3) DAVID WHITE	1.00								•••	
SECRETARY		x		x				0.	0.	0.
(4) JOE JUDGE	1.00									
VICE CHAIR		x		x				0.	Ο.	0.
(5) STEVE AUCAMP	1.00									
MEMBER		x						0.	0.	0.
(6) ERIKA BAKKAR	1.00									
MEMBER		x						0.	0.	0.
(7) AL DOMINICK	1.00									
MEMBER		х						0.	Ο.	0.
(8) PAM FEINSTEIN	1.00									
PAST CHAIR		х						0.	Ο.	0.
(9) SEAN FROMM	1.00									
MEMBER		X						0.	Ο.	0.
(10) DERIECE HARRINGTON	1.00									
MEMBER		Х						0.	0.	0.
(11) CHINTIMINI KEITH	1.00									
MEMBER		Х						0.	0.	0.
(12) BRIAN KENNEDY	1.00									
MEMBER		Х						0.	0.	0.
(13) TERRENCE KENNY	1.00									
MEMBER		Х						0.	0.	0.
(14) ALFRED MOTTUR	1.00									
MEMBER		Х						0.	0.	0.
(15) JOANNA SMITH-RAMANI	1.00									
MEMBER		Х						0.	0.	0.
(16) ALLISON SOLOMON	1.00									
MEMBER		Х						0.	0.	0.
(17) STEVE STATON	1.00									
MEMBER		Х						0.	0.	0.
132007 12-09-21		_	_	_	_	_	_			Form 990 (2021)

8

132007 12-09-21

52-23/51//

Form 990 (2021

A WIDER CIRCLE, INC

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	d Hig	ghes	st C	ompensated Employee	s (continued)				
(A)	(B)			•	C)			(D)	(E)			(F)	
Name and title	Average	(do	not c		itior more		one	Reportable	Reportable		Es	stimate	ed
	hours per	box	, unle cer ar	ss pe	rson i	is botł	n an	compensation	compensation			nount	of
	week (list any					1	,	- from	from related			other	4:
	hours for	direct						the organization	organizations (W-2/1099-MIS			pensa om th	
	related	e or	stee			nsated		(W-2/1099-MISC/	1099-NEC)	<i>°</i>		anizat	
	organizations	truste	al tru		yee	ompei		1099-NEC)	,		•	d relat	
	below	ndividual trustee or director	nstitutional trustee	Ser	Key employee	Highest compensated employee	ner				orga	anizati	ons
	line)	Indi	Insti	Officer	Key	High	Former						
(18) LISA STRANSKY	1.00												
MEMBER		Х						0.		0.			0.
(19) BILL STRATHMANN	1.00												
MEMBER		Х						0.		0.			0.
(20) DAVID WALKER	1.00												
MEMBER		Х						0.		0.			0.
(21) JIM WALSH	1.00												
MEMBER		Х						0.		0.			0.
(22) KATHLEEN WILKS	1.00												
MEMBER		Х						0.		0.			0.
(23) SHAWN YANCY	1.00												
MEMBER		Х						0.		0.			0.
(24) EMMY TORRUELLAS	40.00												
FUNDRAISING CONSULTANT						X		129,769.		0.			0.
(25) AMY S JAVAID	40.00												_
PRESIDENT & CEO						X		161,667.		0.			0.
		_											
								291,436.		0.			0.
1b Subtotal								291,430.		0.			0.
c Total from continuation sheets to Part VI								291,436.		0.			0.
 d Total (add lines 1b and 1c) 2 Total number of individuals (including but n 									000 of reportable				0.
compensation from the organization		lose	iiste	u ai	JOVE	<i>)</i> wi	0 Te	eceived more than \$100,	000 of reportable				2
												Yes	No
3 Did the organization list any former officer,	director trust	مم ل		mn		0 0r	hia	hest compensated empl		ſ		100	
					•		-		-		3		х
line 1a? If "Yes," complete Schedule J for sFor any individual listed on line 1a, is the su										····			
and related organizations greater than \$150											4	х	
5 Did any person listed on line 1a receive or a										····			
rendered to the organization? If "Yes." com								•			5		х
Section B. Independent Contractors			01 30		06/3	011							
1 Complete this table for your five highest co	mpensated inc	lepe	nder	nt co	ontra	acto	rs th	nat received more than \$	100,000 of comp	ensat	ion fro	om	
the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith o	or wi	thin	the organization's tax y	ear.				
(A)								(B)			(0)	
Name and business	address	N	ONE	3				Description of s	ervices	С	ompe		n
2 Total number of independent contractors (in	ncluding but n	ot lir	nited	d to	thos	se lis	ted	above) who received mo	ore than				

\$100,000 of compensation from the organization \blacktriangleright 0

Form 990 (2021)

132008 12-09-21

Pa	rt VII	Statement of Revenue						
		Check if Schedule O contains	a response c	or note to any lin	e in this Part VIII	(B)	(0)	
					(A) Total revenue	(B) Related or exempt	Unrelated	(D) Revenue excluded
					Total revenue	function revenue	business revenue	from tax under
								sections 512 - 514
tt st	1 a	Federated campaigns						
arar our	b	Membership dues						
j ∂°	с	Fundraising events	1c					
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations						
s, C	e	Government grants (contributions)	1e	960,642.				
rior	f	All other contributions, gifts, grants, ar						
but		similar amounts not included above		319,783.				
Ö	g	Noncash contributions included in lines 1a-1f	1g \$3,	124,991.				
a C	h	Total. Add lines 1a-1f		►	9,280,425.			
				Business Code				
Ð	2 a							
, vic	b							
Program Service Revenue	c							
E	d							
2 B C C C C C C C C C C C C C C C C C C	e							
Pro	f	All other program service revenue						
		Total. Add lines 2a-2f	-					
	3	Investment income (including divid						
		other similar amounts)			2,554.			2,554.
	4	Income from investment of tax-exe						
	5	Royalties	• •	-				
			(i) Real	(ii) Personal				
	6 a	Gross rents 6a 3	7,500.					
	b	Less: rental expenses 6b	0.					
	с		7,500.					
	d				37,500.			37,500.
			Securities	(ii) Other				
		assets other than inventory 7a						
	b	Less: cost or other basis						
e		and sales expenses 7b						
Revenue	с	Gain or (loss) 7c						
ş		Net gain or (loss)						
		Gross income from fundraising events		P				
Other	_	including \$ 34, 950						
-		contributions reported on line 1c).	_					
		Part IV, line 18		522,134.				
	b	Less: direct expenses		271,124.				
		Net income or (loss) from fundraisi			251,010.			251,010.
	9 a	Gross income from gaming activiti	es. See					
		Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gaming a		►				
		Gross sales of inventory, less retur						
		and allowances	10a					
	b	Less: cost of goods sold						
		Net income or (loss) from sales of i						
				Business Code				
sno	11 a	REBATES		900099	2,000.	2,000.		
ane	b							
scellaneo Revenue	с							
Miscellaneous Revenue	d	All other revenue						
2		Total. Add lines 11a-11d			2,000.			
	12	Total revenue. See instructions		►	9,573,489.	2,000.	0.	
13200	9 12-09-	-21						Form 990 (2021

A WIDER CIRCLE, INC

Form 990 (2021)

AWC001_1

52-2345144 Page 9

A WIDER CIRCLE, INC Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respons	e or note to any line in t	his Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	106,410.	106,410.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			10 664	
	trustees, and key employees	442,402.	358,346.	48,664.	35,392
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
	persons described in section 4958(c)(3)(B)		0 425 005	220 700	240 501
7	Other salaries and wages	3,007,265.	2,435,885.	330,799.	240,581
8	Pension plan accruals and contributions (include	JJ EJO	19,066.	2 500	1 000
~	section 401(k) and 403(b) employer contributions)	23,538. 230,511.	19,066.	<u>2,589</u> . 25,356.	<u> </u>
9	Other employee benefits	252,234.	204,309.	25,356.	20,179
10	Payroll taxes	252,254.	204,309.	27,740.	20,179
11	Fees for services (nonemployees):				
a L		32,624.	26,425.	3,589.	2,610
b	F	118,914.	96,320.	13,081.	9,513
с с	F	110,914.	50,5201	15,001.	5,515
d					
e f	Investment management fees				
g					
9	column (A), amount, list line 11g expenses on Sch 0.)	602,163.	467,535.	77,942.	56,686
12	Advertising and promotion	00272030	10775551	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
13	Office expenses	3,403,609.	3,346,948.	32,804.	23,857
14	Information technology	86,327.	69,925.	9,496.	6,906
15	Royalties				
16	Occupancy	497,124.	402,670.	54,684.	39,770.
17	Travel	1,305.	1,057.	144.	104
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	94,927.	94,927.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	313,513.	253,946.	34,486.	25,081
23	Insurance	56,729.	45,951.	6,240.	4,538
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)				
а		89,839.	72,770.	9,882.	7,187.
b		80,145.	64,917.	8,816.	6,412.
с	PROPERTY TAXES	53,743.	43,532.	5,912.	4,299
d	NON CAPITALIZED EQUIPME	11,248.	9,111.	1,237.	900
е	All other expenses	61,512.	51,104.	6,027.	4,381
25	Total functional expenses. Add lines 1 through 24e	9,566,082.	8,357,868.	699,494.	508,720
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

11 2021.06000 A WIDER CIRCLE, INC

10510713 138138 AWC001

Cash - non-interest-bearing Savings and temporary cash investments Pledges and grants receivable, net

4 Accounts receivable, net 4 5 Lans 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 Lans and other receivables from other disqualified persons (as defined under section 4958(f(11), and persons described in section 4958(c)(3)(B) 6 7 7 Notes and loans receivable, net 7 7 8 Inventories for sale or use 391, 020. 8 448, 000 9 Prepaid expenses and defered charges 23, 535. 9 76, 422 10a T, 418, 656. 0 11 1182, 552 11 Investments - publicy traded securities 10a 7, 418, 656. 0 11 Investments - program-related. See Part IV, line 11 12 11 1182, 552 12 Investments - program-related. See Part IV, line 11 10, 0, 070. 15 10, 50, 504 13 Investments - publicy and securities 338, 283. 17 244, 62 14 Itangible assets 338, 283. 17 244, 62 15 Other assets. See Part IV, line 11 10, 0, 070.		_			· · · · · · · · · · · · · · · · · · ·			
9 Accounts receivable, net 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons (as defined under section 4958(0(11)), and persons described in section 4958(0(3)(8) 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(0(11)), and persons described in section 4958(0(3)(8) 7 7 Notes and loans receivable, net 391, 020. 8 4488, 00 9 Prepaid expenses and deferred charges 23, 535. 9 76, 42 10a Land, buildings, and equipoment, cost or other basis. Complete Part VI of Schedule D 10a 7, 418, 655. 11 Investments - publicly traded securities 122, 937. 11 182, 55 11 Investments - publicly traded securities 10, 070. 15 10, 0, 50 11 Investments - publicly traded securities 338, 283. 17 2444, 62 11 Scounts payable and accrued expenses 338, 283. 17 2444, 62 12 Loss and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 2, 416, 402. 23 2, 3, 077, 28 12		3	Pledges and grants receivable, net			191,101.	3	710,515.
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(c)(3)(8) 7 7 Notes and loans receivable, net 391, 020. 8 8 invertories for sale or use 391, 020. 8 4488, 00 9 Prepaid expenses and deferred charges 23, 535. 9 76, 42 10a Land, buildings, and equipment cost or other 10a 7, 418, 655. 5 11 Investments - publicly traded securities 122, 937. 11 182, 55 12 Investments - publicly traded securities 10a, 1, 183, 860. 6, 534, 680. 10c 6, 234, 75 13 Investments - publicly traded securities 11 12 11 11 12 12 14 Interstinets - program-related. See Part IV, line 11 10, 0, 070. 15 10, 55 754. 16 8, 569, 44 16 Total assets. Add lines 1 through 15 (must equal line 33) 9, 165, 754. 16 8, 569, 44 16		4					4	
source of any of these persons 5 6 Lans and other receivables from other disqualified persons (as defined under section 4958(c)(3)(B) 7 Notes and loans receivable, net 7 391,0 220. 8 10a 10a 10a 10a 7,418,656. 10a 10a <td colspa<="" th=""><th></th><th>5</th><td></td><td></td><td></td><td></td></td>	<th></th> <th>5</th> <td></td> <td></td> <td></td> <td></td>		5					
6 Loans and other receivables from other disqualified persons (as defined under section 4958(p(1)), and persons described in section 4958(p(3)(B) 6 7 Notes and loans receivable, net 391,020.8 448,00 9 Prepaid expenses and deferred charges 23,535.9 76,42 10a Long duptment: cost or other basis. Complete Part VI of Schedule D 10a 7,418,656. b Less: accumulated depreciation 10a 7,418,656. 11 Investments - publicity raded securities 122,937.11 11822,55 12 Investments - publicity raded securities 122,937.11 182,55 13 Investments - publicity raded securities 122,937.11 182,55 14 Intangible assets 6,534,680.10c 6,534,680.10c 15 Other assets. See Part IV, line 11 12 10,070.15 10,0,50 16 Total assets. Add lines 1 through 15 (must equal line 33) 9,165,754.16 8,559,40 16 Total assets. Add lines 1 through 15 (must equal line 34) 910,000.18 490,00 18 Tak-exempt bond liabilities 22 22 23 23,232,25 24 12 Escrow or custodial accou			trustee, key employee, creator or founder, subst	antial cor	ntributor, or 35%			
geg under section 4958(r)(1), and persons described in section 4958(c)(3)(B) 6 7 Notes and ioans receivable, net 7 8 Inventories for sale or use. 391,020. 8 448,00 9 Prepaid expenses and deferred charges 23,535. 9 76,42 10a Land, buildings, and equipment: cost or other 10a 7,418,655. 10b 1.183,860. 6,534,680. 10c 6,234,75 11 Investments - other securities. See Part IV, line 11 11 12 12 1.22,937. 11 1.82,56 12 Investments - other securities. See Part IV, line 11 13 14 10,070. 15 10,550 13 Investments - other assets. See Part IV, line 11 13 14 10,070. 16 10,050 16 Total assets. Add lines 1 through 15 (must equal line 33) 9,165,754. 16 8,569,44 19 Deferred revenue 19 10,000. 18 490,00 19 Deferred revenue 19 20 22 22 23 2,342,65 24 21 Exorow or oxtodial acocount liability. Compl			controlled entity or family member of any of thes	e person	s		5	
989 7 Notes and loans receivable, net 7 9 inventories for sale or use 391,020. 8 448,00 9 Prepaid expenses and defered charges 23,535. 9 76,42 10a Land, buildings, and equipment: cost or other basis. Complete Part Vi of Schedule D 10a 7,418,656. 122,937. 11 182,758. 11 Investments - publicly traded securities 12,183,860. 6,534,680. 10c 6,234,75 11 Investments - publicly traded securities 12,2,937. 11 182,55 12 Investments - publicly traded securities 12,0,070. 15 10,50 13 Investments - program-telated. See Part IV, line 11 13 14 14 15 Other assets. See Part IV, line 11 10,070. 15 10,50 16 Total sessets. Add lines 1 through 15 (must equal line 33) 9,165,754. 16 8,569,40 18 Grants payable and accrued expenses 338,283. 17 244,62 19 Defered revenue 910,000. 18 490,000 19 Defered revenue 21 22		6	Loans and other receivables from other disqualif	ied perso	ons (as defined			
8 Inventories for sale or use 391,020. s 448,00 9 Prepaid expenses and deferred charges 23,535. 9 76,42 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 7,418,656. b Less: accumulated depreciation 10a 7,418,656. 00 11 Investments - publicly traded securities 122,937. 11 182,55 12 Investments - program-related. See Part IV, line 11 13 14 122,937. 11 182,55 13 Investments - program-related. See Part IV, line 11 13 10,070. 15 10,507 14 Intagible assets			under section 4958(f)(1)), and persons described	l in sectio	on 4958(c)(3)(B)		6	
8 Inventories for sale or use 391,020. s 448,00 9 Prepaid expenses and deferred charges 23,535. 9 76,42 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 7,418,656. b Less: accumulated depreciation 10a 7,418,656. 00 11 Investments - publicly traded securities 122,937. 11 182,55 12 Investments - program-related. See Part IV, line 11 13 14 122,937. 11 182,55 13 Investments - program-related. See Part IV, line 11 13 10,070. 15 10,507 14 Intagible assets	s	7	Notes and loans receivable, net				7	
3 Trepade scapendes and equipment: cost or other basis. Complete Part VI of Schedule D 10a 7,418,656. 6,534,680. 10c 6,234,75 10 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b 1,183,860. 6,534,680. 10c 6,234,75 11 Investments - publicly traded securities. 122,937. 11 182,937. 11 11 10,070. 15 10,0,50. 10,070. 15 10,0,50. 10,070. 15 10,0,57. 10,070. 10,070. 10,070. 10,070. 10,070. 10,070. 10,070. 10,070. 10,070. 10,070. 10,070. 10,070. 10,070. 10,	set	8				391,020.	8	448,000.
basis. Complete Part VI of Schedule D 10a 7,418,656. 0 10 1,183,860. 6,534,680. 10c 6,234,79 11 Investments - publicly traded securities 122,937. 11 182,55 12 Investments - other securities. See Part IV, line 11 12 12 12 13 Investments - other securities. See Part IV, line 11 13 14 14 Intragible assets 10,070. 15 10,500 16 Total assets. Add lines 1 through 15 (must equal line 33) 9,165,754. 16 8,569,400 19 Deferred revenue 910,000. 18 490,000 19 Deferred revenue 19 20 21 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 23 2,342,65 24 Unsecured nots and other payable to unrelated third parties 2,416,402. 23 2,342,65 25 Total assets with othor restrictions 5,200,132. 27 5,044,55 26 Total liabilities (including federa	۶ ۲	9				23,535.	9	76,422.
11 Investments - publicly traded securities 122,937.11 182,55 12 Investments - other securities. See Part IV, line 11 13 14 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets 10,0770.15 10,075 15 Other assets. Add lines 1 through 15 (must equal line 33) 9,165,754.16 8,569,40 16 Total assets. Add lines 1 through 15 (must equal line 33) 9,105,754.16 8,569,40 16 Total assets. Add lines 1 through 15 (must equal line 33) 9,105,754.16 8,569,40 17 Accounts payable and accrued expenses 338,283.17 7244,65 10 Deferred revenue 19 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any ot these persons 2,416,402.2 2,2,342,65 24 Unsecured notes and loans payable to unrelated third parties 2,416,402.2 2,50 3,664,685.2 3,077,26 25 Other liabilities not included on lines 17:24). C		10a	Land, buildings, and equipment: cost or other					
11 Investments - publicly traded securities 122,937.11 182,55 12 Investments - other securities. See Part IV, line 11 13 14 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets 10,0770.15 10,075 15 Other assets. Add lines 1 through 15 (must equal line 33) 9,165,754.16 8,569,40 16 Total assets. Add lines 1 through 15 (must equal line 33) 9,105,754.16 8,569,40 16 Total assets. Add lines 1 through 15 (must equal line 33) 9,105,754.16 8,569,40 17 Accounts payable and accrued expenses 338,283.17 7244,65 10 Deferred revenue 19 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any ot these persons 2,416,402.2 2,2,342,65 24 Unsecured notes and loans payable to unrelated third parties 2,416,402.2 2,50 3,664,685.2 3,077,26 25 Other liabilities not included on lines 17:24). C			basis. Complete Part VI of Schedule D	10a	7,418,656.			
11 Investments - publicly traded securities 122,937.11 182,55 12 Investments - other securities. See Part IV, line 11 13 14 13 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 10,0770.15 10,0770. 15 Other assets. Add lines 1 through 15 (must equal line 33) 9,165,754.16 8,569,40 16 Total assets. Add lines 1 through 15 (must equal line 33) 9,165,754.16 8,569,40 16 Total assets. Add lines 1 through 15 (must equal line 33) 9,165,754.16 8,569,40 17 Accounts payable and accrued expenses 338,283.17 7244,65 18 Grants payable 910,000.18 490,00 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payable to unrelated third parties 2,416,402.2 22,2,342,65 23 Secured motigages and notes payable to unrelated third parties 24 24 24 Unsecured notes and loans payable to unrelated third parties 24 25 2		b	Less: accumulated depreciation	10b	1,183,860.	6,534,680.	10c	6,234,796.
12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intagible assets 14 15 Other assets. See Part IV, line 11 10,070. 15 10,500 16 Total assets. See Part IV, line 11 10,070. 15 10,500 16 Total assets. Add lines 1 through 15 (must equal line 33) 9,165,754. 16 8,569,400 17 Accounts payable and accrued expenses 338,283. 17 244,652 19 Deferred revenue 19 10 000. 18 490,000 20 Tax-exempt bond liabilities 200 21 22 20 21 21 Escrew or custodial account liability. Complete Part IV of Schedule D 21 22 23 24 20 22 23 24 24 24 24 24 24 24 24 25 25 26 3,664,685. 26 3,077,26 3,00,937. 28 300,937. 28 300,937. 28 300,937. 28 300,937. 28 24,75						122,937.	11	182,583.
14 Intangible assets 14 15 Other assets. See Part IV, line 11 10,070.15 10,50 16 Total assets. Add lines 1 through 15 (must equal line 33) 9,165,754.16 8,569,40 17 Accounts payable and accrued expenses 338,283.17 244,62 18 Grants payable 910,000.18 490,000 19 Deferred revenue 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22,416,402.23 2,342,65 24 Unsecured notes and loans payable to unrelated third parties 24 24 25 25 Other liabilities. Add lines 17 through 25 3,664,685.26 3,077,26 300,937.28 447,55 27 Net assets with donor restrictions 5,200,132.27 5,044,53 300,937.28 447,55 28 Organizations that do not follow FASB ASC 958, check here		12					12	
15 Other assets. See Part IV, line 11 10,070.15 10,50 16 Total assets. Add lines 1 through 15 (must equal line 33) 9,165,754.16 8,569,40 17 Accounts payable and accrued expenses 338,283.17 244,62 18 Grants payable 910,000.18 490,000 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 20 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortagages and notes payable to unrelated third parties 2,416,402.23 2,342,65 24 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 3,664,685.26 3,077,28 27 Net assets with donor restrictions 5,200,132.27 27,5,044,533 300,937.28 447,563 28 Net assets with donor restrictions 29 29		13					13	
15 Other assets. See Part IV, line 11 10,070.15 10,50 16 Total assets. Add lines 1 through 15 (must equal line 33) 9,165,754.16 8,569,40 17 Accounts payable and accrued expenses 338,283.17 244,62 18 Grants payable 910,000.18 490,000 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 20 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortagages and notes payable to unrelated third parties 2,416,402.23 2,342,65 24 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 3,664,685.26 3,077,28 27 Net assets with donor restrictions 5,200,132.27 27,5,044,533 300,937.28 447,563 28 Net assets with donor restrictions 29 29		14	Intangible assets				14	
16 Total assets. Add lines 1 through 15 (must equal line 33) 9,165,754. 16 8,569,40 17 Accounts payable and accrued expenses 338,283. 17 244,62 18 Grants payable 910,000. 18 490,00 19 Deferred revenue 19 19 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payable to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 2,416,402. 23 2,342,65 24 Unsecured notes and loans payable to unrelated third parties 2,416,402. 25 26 26 Total liabilities not included on lines 17-24). Complete Part X of Schedule D 25 3,664,685. 26 3,077,28 27 Net assets without donor restrictions 5,200,132. 27 5,044,53 300,937. 28 447,56 28 Net assets with donor restrictions 29 300,937.		15	Other assets. See Part IV, line 11				15	10,500.
18 Grants payable 910,000. 18 490,000 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 20 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 2,416,402.23 2,342,65 24 Unsecured notes and loans payable to unrelated third parties 24 25 25 Other liabilities not included on lines 17.24). Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 3,664,685.26 3,077,26 0rganizations that follow FASB ASC 958, check here 300,937.28 447,56 0rganizations that do not follow FASB ASC 958, check here 300,937.28 447,56 011 Organizations that do not follow FASB ASC 958, check here 300,937.28 447,56 27 Net assets with donor restrictions 29 29 29 28 Net assets with don or li		16				9,165,754.	16	8,569,408.
19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 2,416,402.23 2,342,65 24 Unsecured notes and loans payable to unrelated third parties 24 25 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 25 3,664,685.26 3,077,28 26 Total liabilities. Add lines 17 through 25. 3,664,685.26 3,077,28 27 Net assets without donor restrictions 5,200,132.27 5,044,53 28 Net assets with donor restrictions 5,200,132.27 5,044,53 29 Capital stock or trust principal, or current funds 29 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 Retained earnings, endowment, accumulated income, or other funds 31		17	Accounts payable and accrued expenses				17	244,627.
19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 2,416,402. 23 2,342,65 24 Unsecured notes and loans payable to unrelated third parties 24 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 3,664,685. 26 3,077,28 27 Net assets without donor restrictions 5,200,132. 27 5,044,53 28 Net assets with donor restrictions 5,200,937. 28 447,58 29 Capital stock or trust principal, or current funds 29 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 32 Total net assets or fund balances 5,501,069. 32 5,492,12 31 <th></th> <th>18</th> <td></td> <td></td> <td></td> <td>910,000.</td> <td>18</td> <td>490,000.</td>		18				910,000.	18	490,000.
21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 2,416,402.23 2,342,65 24 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17:24). Complete Part X of Schedule D 25 3,664,685.26 3,077,28 26 Total liabilities. Add lines 17 through 25 3,664,685.26 3,077,28 3,00,937.28 447,58 28 Net assets with donor restrictions 5,200,132.27 5,044,53 300,937.28 447,58 29 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 29 29 29 29 Paid-in or capital stock or trust principal, or current funds 30 31 31 32 Total net assets or fund balances 5,501,069,32 5,492,12 5,492,12		19					19	
21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 2,416,402.23 2,342,65 24 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17:24). Complete Part X of Schedule D 25 3,664,685.26 3,077,28 26 Total liabilities. Add lines 17 through 25 3,664,685.26 3,077,28 3,00,937.28 447,58 28 Net assets with donor restrictions 5,200,132.27 5,044,53 300,937.28 447,58 29 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 29 29 29 29 Paid-in or capital stock or trust principal, or current funds 30 31 31 32 Total net assets or fund balances 5,501,069,32 5,492,12 5,492,12		20	Tax-exempt bond liabilities		20			
generative trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 2,416,402.23 2,342,65 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17.24). Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 3,664,685.26 3,077,28 Organizations that follow FASB ASC 958, check here X 300,937.28 447,58 27 Net assets with donor restrictions 5,200,132.27 5,044,53 28 Net assets with donor restrictions 5,200,132.27 5,044,53 29 Capital stock or trust principal, or current funds 29 29 29 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 5,501,069.32 5,492,12		21	Escrow or custodial account liability. Complete F	Part IV of	Schedule D		21	
23 Sected a finite gases and holes payable to unrelated third parties 24 25 24 24 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 3, 664, 685. 26 0rganizations that follow FASB ASC 958, check here X 300, 937. 28 27 Net assets with donor restrictions 5, 200, 132. 27 5, 044, 53 28 Net assets with donor restrictions 300, 937. 28 447, 56 0rganizations that do not follow FASB ASC 958, check here □ 30 30 29 Capital stock or trust principal, or current funds 29 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 31 Retained earnings, endowment, accumulated income, or other funds 31 5, 501, 069. 32 5, 492, 12	ŝ	22	Loans and other payables to any current or form	er officer	, director,			
23 Sected a finite gases and holes payable to unrelated third parties 24 25 24 24 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 3, 664, 685. 26 0rganizations that follow FASB ASC 958, check here X 300, 937. 28 27 Net assets with donor restrictions 5, 200, 132. 27 5, 044, 53 28 Net assets with donor restrictions 300, 937. 28 447, 56 0rganizations that do not follow FASB ASC 958, check here □ 30 30 29 Capital stock or trust principal, or current funds 29 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 31 Retained earnings, endowment, accumulated income, or other funds 31 5, 501, 069. 32 5, 492, 12	litie		trustee, key employee, creator or founder, subst	antial cor	ntributor, or 35%			
23 Sected a finite gases and holes payable to unrelated third parties 24 25 24 24 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 3, 664, 685. 26 0rganizations that follow FASB ASC 958, check here X 300, 937. 28 27 Net assets with donor restrictions 5, 200, 132. 27 5, 044, 53 28 Net assets with donor restrictions 300, 937. 28 447, 56 0rganizations that do not follow FASB ASC 958, check here □ 30 30 29 Capital stock or trust principal, or current funds 29 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 31 Retained earnings, endowment, accumulated income, or other funds 31 5, 501, 069. 32 5, 492, 12	abi		controlled entity or family member of any of thes	e person	s		22	
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 25 26 Total liabilities. Add lines 17 through 25 3,664,685. 26 3,077,28 27 Net assets without donor restrictions 5,200,132. 27 5,044,53 28 Net assets with donor restrictions 5,200,132. 27 5,044,53 28 Net assets with donor restrictions 300,937. 28 447,58 Organizations that follow FASB ASC 958, check here		23	Secured mortgages and notes payable to unrela	ted third	parties	2,416,402.	23	2,342,659.
parties, and other liabilities not included on lines 17-24). Complete Part X 25 of Schedule D 25 26 Total liabilities. Add lines 17 through 25 3,664,685. 26 3,077,28 Organizations that follow FASB ASC 958, check here ▶ X 3,664,685. 26 3,077,28 and complete lines 27, 28, 32, and 33. 5,200,132. 27 5,044,53 27 Net assets with donor restrictions 5,200,132. 27 5,044,53 28 Net assets with donor restrictions 300,937. 28 447,58 Organizations that do not follow FASB ASC 958, check here ▶ 30 29 29 and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 31 Retained earnings, endowment, accumulated income, or other funds 31 31 32 Total net assets or fund balances 5,501,069. 32 5,492,12		24	Unsecured notes and loans payable to unrelated	rties		24		
of Schedule D 25 26 Total liabilities. Add lines 17 through 25 3,664,685. 26 3,077,28 Organizations that follow FASB ASC 958, check here ▶ X and complete lines 27, 28, 32, and 33. 27 5,200,132. 27 5,044,53 28 Net assets with donor restrictions 5,200,132. 27 5,044,53 0rganizations that do not follow FASB ASC 958, check here ▶ 300,937. 28 447,58 0rganizations that do not follow FASB ASC 958, check here ▶ 300,937. 28 447,58 0rganizations that do not follow FASB ASC 958, check here ▶ 300,937. 28 447,58 0rganizations that do not follow FASB ASC 958, check here ▶ 300,937. 29 447,58 0rganizations that do not follow FASB ASC 958, check here ▶ 300,937. 29 447,58 0rganizations that do not follow FASB ASC 958, check here ▶ 30 30 30 1 Retained earnings, endowment, accumulated income, or other funds 30 31 32 32 Total net assets or fund balances 5,501,069. 32 5,492,12		25	Other liabilities (including federal income tax, page	yables to	related third			
26 Total liabilities. Add lines 17 through 25 3,664,685.26 3,077,28 Organizations that follow FASB ASC 958, check here ▶ X and complete lines 27, 28, 32, and 33. 5,200,132.27 5,044,53 27 Net assets with donor restrictions 5,200,132.27 5,044,53 28 Net assets with donor restrictions 300,937.28 447,58 Organizations that do not follow FASB ASC 958, check here ▶ 300,937.28 447,58 Organizations that do not follow FASB ASC 958, check here ▶ 300,937.28 447,58 Organizations that do not follow FASB ASC 958, check here ▶ 300,937.28 447,58 Organizations that do not follow FASB ASC 958, check here ▶ 300,937.28 447,58 Organizations that do not follow FASB ASC 958, check here ▶ 300,937.28 447,58 Organizations that do not follow FASB ASC 958, check here ▶ 30 300,937.28 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 5,501,069.32 5,492,12			parties, and other liabilities not included on lines	17-24). (Complete Part X			
Source of the sector of th			of Schedule D				25	
and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 28 Net assets with donor restrictions 0rganizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 29 30 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances		26	<u> </u>			3,664,685.	26	3,077,286.
Organizations that do not follow FASB ASC 958, check here ▶□ and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances			Organizations that follow FASB ASC 958, che	ck here				
Organizations that do not follow FASB ASC 958, check here ▶□ and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances	See		and complete lines 27, 28, 32, and 33.					
Organizations that do not follow FASB ASC 958, check here ▶□ and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances	lan	27			F			5,044,539.
and complete lines 29 through 33.2929Capital stock or trust principal, or current funds2930Paid-in or capital surplus, or land, building, or equipment fund3031Retained earnings, endowment, accumulated income, or other funds3132Total net assets or fund balances5,501,069.32	_	28				300,937.	28	447,583.
	pun		Organizations that do not follow FASB ASC 9	58, checl	khere 🕨 🛄			
	ш ч							
	ts o	29						
	se	30						
	t Å	31		other funds	E E01 050		F 400 400	
33 Total liabilities and net assets/fund balances	e S							5,492,122.
		33	Total liabilities and net assets/fund balances			9,165,754.	33	8,569,408.

(B) End of year

906,592.

(A) Beginning of year

1,892,411.

1

2

1

2

A WIDER CIRCLE, INC

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

Part X Balance Sheet

Form **990** (2021)

AWC001_1

Form	A WIDER CIRCLE, INC	52-	2345144	Page	12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			<u></u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,573		
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,566		
3	Revenue less expenses. Subtract line 2 from line 1	3		7,407	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,501		
5	Net unrealized gains (losses) on investments	5),354	
6	Donated services and use of facilities	6	24	1,000	<u>).</u>
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9		0	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	5,492	<u>2,122</u>	2.
Pa	rt XII Financial Statements and Reporting			_	
	Check if Schedule O contains a response or note to any line in this Part XII			L	X
				Yes N	No_
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	<u> </u>	<u>x</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			x	
b	b Were the organization's financial statements audited by an independent accountant?				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule C	.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Auc	lit		
	Act and OMB Circular A-133?		За	Σ	<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red aud	it 📔		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				
			_	DON /00	

Form **990** (2021)

132012 12-09-21

990	(2021)	

Department of the Treasury Internal Revenue Service

(Form 990)

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

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

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

OMB No. 1545-0047
2021
Open to Public Inspection

Name of the	organization
-------------	--------------

Nar	ne o	of th	ne organization							identification number
D				DER CIRCLE						2-2345144
	art		Reason for Public (ee instruction	S.	
	org		zation is not a private found							
1			A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	l)(A)(i).		
2			A school described in section	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	ו 990).)				
3		_	A hospital or a cooperative					•		
4			A medical research organize	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,
	_	_	city, and state:							
5			An organization operated for		lege or university owned	l or operat	ed by a go	overnmental u	nit describe	ed in
		_	section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		_	A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7	X		An organization that norma	lly receives a substa	ntial part of its support fr	om a gove	ernmental	unit or from th	ne general j	oublic described in
		_	section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8			A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9			An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	land-grant	college
			or university or a non-land-g	rant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or
		_	university:							
10			An organization that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts from
			activities related to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its	s support f	rom gross investment
			income and unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	fter June 30, 1975.
	_	_	See section 509(a)(2). (Cor	mplete Part III.)						
11			An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50)9(a)(4).		
12			An organization organized a	and operated exclusi	vely for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or
			more publicly supported or	ganizations describe	d in section 509(a)(1) d	r section	509(a)(2).	See section &	509(a)(3). (Check the box on
	-		lines 12a through 12d that	describes the type o	f supporting organizatior	n and com	plete lines	12e, 12f, and	12g.	
а	1		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), ty	pically by	giving
			the supported organization	on(s) the power to req	gularly appoint or elect a	majority c	of the direc	tors or trustee	es of the su	Ipporting
	-		organization. You must o	complete Part IV, Se	ections A and B.					
b			Type II. A supporting org	anization supervised	or controlled in connect	ion with it	s supporte	ed organization	n(s), by hav	ving
			control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manaç	ge the supp	ported
	г		organization(s). You mus							
C	; [Type III functionally inte						ly integrate	d with,
	г		its supported organization		-					
c			Type III non-functionally						-	
			that is not functionally int			•		-	an attentiv	/eness
	г		requirement (see instructi		-					
e)		Check this box if the orga					Туре I, Туре	II, Type III	
_			functionally integrated, or		nally integrated supporting	ng organiz	ation.			[]
			r the number of supported o	J						
ç	J P		ide the following information Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed	(v) Amount of	monetarv	(vi) Amount of other
		• • •	organization	.,	(described on lines 1-10	in your governi Yes	ng document?	support (see ir		support (see instructions)
					above (see instructions))	100				
Tota	al									
-										

Schedule A	(Form	990) 202
Joing addie / (000	1 202

A WIDER CIRCLE, INC

52-2345144	Page 2
------------	--------

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	4172962.	18704103.	19243588.	9285436.	9531435.	60937524.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						<u> </u>
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	4172962.	18704103.	19243588.	9285436.	9531435.	60937524.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						60937524.
	ction B. Total Support				1	1	
	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	
	Amounts from line 4	4172962.	18704103.	19243588.	9285436.	9531435.	60937524.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,		445 944	4 - 004			
	and income from similar sources \dots	111,610.	145,364.	15,024.	4,839.	2,554.	279,391.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	10 500	40.450	11 100			
	assets (Explain in Part VI.)	13,592.	13,178.	11,188.	11,521.	2,000.	
	Total support. Add lines 7 through 10						61268394.
	Gross receipts from related activities,	-				12	
13	First 5 years. If the Form 990 is for the	0		, ,		()()	. —
0.00	organization, check this box and stop						
	tion C. Computation of Publi						00 16
	Public support percentage for 2021 (I		•	<i>()</i>		14	<u>99.46</u> % 99.05%
	Public support percentage from 2020					15	
108	33 1/3% support test - 2021. If the c						
h	stop here. The organization qualifies33 1/3% support test - 2020. If the organization		-		line 15 is 22 1/20/		
U							
170	and stop here. The organization qual		• •		12 160 or 16b o		
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact			-	ranization	-	
Ŀ	meets the facts-and-circumstances te	-	-		-	Za and line 15 is	
a	10% -facts-and-circumstances test	-					
	more, and if the organization meets the						
19	organization meets the facts-and-circu Private foundation. If the organization		•		• •		
10	Fivate foundation. If the organizatio	T UIU HUL CHECK A		a, 100, 17a, 01 170	, ONEON THIS DOX A		<u>s</u> ▶ <u> </u>
						Conedule A	1. 5111 550/ 2021

132022 01-04-22

A WIDER CIRCLE, 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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")					l	
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5						_
7a	Amounts included on lines 1, 2, and 3 received from disgualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organizat	tion,
	check this box and stop here	-			-	-	
Sec	tion C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2021 (I	ine 8, column (f), d	livided by line 13, o	column (f))		15	%
	Public support percentage from 2020					16	%
Sec	tion D. Computation of Inves	stment Income	e Percentage				
17	Investment income percentage for 20)21 (line 10c, colur	nn (f), divided by li	ne 13, column (f))		17	%
18	Investment income percentage from	2020 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2021. If the	organization did r	ot check the box	on line 14, and lin	e 15 is more than 3	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a	nd stop here. The	organization quali	fies as a publicly	supported organiza	ation	
b	33 1/3% support tests - 2020. If the	organization did r	ot check a box or	line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	nization qualifies	as a publicly supp	orted organization	• ▶□
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in		▶□
13202	3 01-04-22					Schedule	A (Form 990) 2021
			16				

2021.06000 A WIDER CIRCLE, INC

A WIDER CIRCLE, INC

1

2

3a

3b

3c

4a

4b

4c

Yes No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? // "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- **5a** Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 6 anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in Part VI.
- c Did a disgualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes." provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

132024 01-04-21

10510713 138138 AWC001

5a 5b 5c 6 7 8 9a 9b 9c 10a 10b Schedule A (Form 990) 2021

17

Schedule A	(Form 990) 2021	A	WIDER	CIRCLE,	INC
Part IV	Supporting O	rganizatio	ns _{(contin}	ued)	

1

2

1

Yes No

V. N

Yes No

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c	l	
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			

	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
2	Did the organization operate for the benefit of any supported organization other than the supported
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated.

supervised or controlled the supporting organization

Section C. Type II Supporting Organizations	

Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 1 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).

Section D. All Type III Supporting Organizations	

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

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method t	hat the organization used to satisf	v the Integral Part Test durin	a the year (see instructions).
•		nal line organization used to satisi	, וווכ ווווכקומו ז מונ ז ככו טעוווי	

- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. h

с		The organization supported a governmental entity.	Describe in Part VI how	you supported a d	overnmental entity	(see instructions)	
---	--	---	-------------------------	-------------------	--------------------	--------------------	--

18

- Activities Test. Answer lines 2a and 2b below. 2
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard. 132025 01-04-22

3b Schedule A (Form 990) 2021

INC

2a

2b

3a

10510713 138138 AWC001

2021.06000 A WIDER CIRCLE,

AWC001_1

1	Check here if the organization satisfied the Integral Part Test as a qualifyin	ng trust on	Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	st complete	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7		llyintegrat	ad Turne III our porting area	

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

Schedule A (Form 990) 2021

132026 01-04-22

 Schedule A (Form 990) 2021
 A WIDER CIRCLE, INC

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

20

6 Other distributions (describe in Part VI). See instructions. 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 9 Distributable amount for 2021 from Section C, line 6 10 **10** Line 8 amount divided by line 9 amount (i) (ii) (iii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2021 Amount for 2021 Distributable amount for 2021 from Section C, line 6 1 2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2021 a From 2016 **b** From 2017 c From 2018 d From 2019 e From 2020 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2021 distributable amount i Carryover from 2016 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2021 from Section D, line 7: \$ a Applied to underdistributions of prior years b Applied to 2021 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions 6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2022. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2017 b Excess from 2018 c Excess from 2019 d Excess from 2020

2

3

4

6

7

8

9

Schedule A (Form 990) 2021

organizations, in excess of income from activity

Amounts paid to acquire exempt-use assets

Section D - Distributions

Amounts paid to perform activity that directly furthers exempt purposes of supported

5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)

Administrative expenses paid to accomplish exempt purposes of supported organizations

1

2

3

4

5

Current Year

AWC001 1

Schedule A (Form 990) 2021

e Excess from 2021

	Form 990) 2021		ER CIRCL				52-2345144	
	Part IV, Section A,	lines 1, 2, 3b, 3c, 4 ion D, lines 2 and 3	b, 4c, 5a, 6, 9a 3; Part IV, Sectio	, 9b, 9c, 11a, 11 on E, lines 1c, 2	b, and 11c; Part IV, a, 2b, 3a, and 3b; P	Section B, lines 1 art V, line 1; Part V,	17b; Part III, line 12; and 2; Part IV, Sectio Section B, line 1e; F al information	on C,
	(See instructions.)		, cootion 2, int					
							Oshadidi A /T	000
28 01-04-22							Schedule A (Form	n 990) 🕯

Schedule B

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2021

Employer identification number

2-2345144

	A WIDER CIRCLE, INC	52-2
Organization type (chec	sk one):	
Filers of:	Section:	
Form 990 or 990-EZ	\fbox{X} 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	

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

General Rule

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

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year $\dots \longrightarrow$

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

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

Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021)

Name of organization

Employer identification number

52-2345144

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$1,130,177.	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
2		\$ <u>325,000.</u>	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
3		\$225,000.	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
		\$	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.)
123452 11-11-	21		Schedule B (Form 990) (2021)

A WIDER CIRCLE, INC

Name of organization

Employer identification number

52 - 2345144

A WIDER CIRCLE, INC

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(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. irom 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
3453 11-11-21		\$	Schedule B (Form 990) (;

24

10510713 138138 AWC001

2021.06000 A WIDER CIRCLE, INC

AWC001_1

Name of o	organization		Employer identification number					
מ אדש	ER CIRCLE, INC		52-2345144					
Part III	Exclusively religious, charitable, etc., contribution	utions to organizations described in se	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the year					
	from any one contributor. Complete columns completing Part III, enter the total of exclusively religious	, charitable, etc., contributions of \$1,000 or	less for the year. (Enter this info. once.) \$					
(a) No	Use duplicate copies of Part III if additiona	al space is needed.						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		(e) Transfer of gif	*					
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee					
		[
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I								
		(e) Transfer of gif	t					
	Transferee's name, address,	and 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 gif	<u> </u>					
	Transferee's name, address,	and 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 gif	*					
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee					
		[
123454 11-1	1-21	~-	Schedule B (Form 990) (2021					
		25						

2021.06000 A WIDER CIRCLE, INC

SCHEDULE D (Form 990) Department of the Treasury Internal Revenue Service Service Service Service Service Supplemental Financial Complete if the organization answered Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11c Service Service					on Form 990, 1f, 12a, or 12	b.		2	0. 1545- 02 en to Pu pection	1
-	e of the organizati						Emp	loyer identific		umber
		A WIDER CIRCLE, INC						52-234		1
Par		ations Maintaining Donor Advise		r Simi	lar Funds	or Ac	coun	ts. Complete	e if the	
	organizatio	n answered "Yes" on Form 990, Part IV, lin	(a) Donor adv	visod fu	inde	()		ds and other a	counte	
4	Total number at o	ad of year				, , , , , , , , , , , , , , , , , , ,) i un		counts	
1 2		nd of year f contributions to (during year)								
3		f grants from (during year)								
4		t end of year								
5		on inform all donors and donor advisors in v	writing that the assets	s held ir	n donor advise	ed fund	s			
	are the organization	on's property, subject to the organization's	exclusive legal contro	l?				🗌 Ye	s 🗌	No
6	Did the organization	on inform all grantees, donors, and donor a	dvisors in writing that	grant f	unds can be i	used or	ıly			
	for charitable purp	ooses and not for the benefit of the donor o	r donor advisor, or fo	r any ot	her purpose o	conferrir	ng		_	_
Par	impermissible priv							Ye	s	No
1		ation Easements. Complete if the org			n Form 990, F	Part IV,	line 7.			
		of land for public use (for example, recrea		<u> </u>	reservation of	a histo	rically	mportant land	area	
		of natural habitat					-	toric structure		
		n of open space				a oortii				
2		through 2d if the organization held a qualif	fied conservation con	tributio	n in the form o	of a con	servat	ion easement	on the la	ast
	day of the tax yea					[Held at the End		
а	Total number of co	onservation easements					2a			
b	Total acreage rest	ricted by conservation easements					2b			
С	Number of conser	vation easements on a certified historic stru	ucture included in (a)				2c			
d		vation easements included in (c) acquired a								
		nal Register					2d			
3		vation easements modified, transferred, rel	eased, extinguished,	or term	inated by the	organiz	ation o	during the tax		
4	year	 where property subject to conservation eas	amont in located							
4 5		tion have a written policy regarding the per			handling of					
Ŭ	-	orcement of the conservation easements it	la a lala O					Ye	s [No
6	,	r hours devoted to monitoring, inspecting,						······· — · · ·		
-	•	с, т с,	5	,	5			5	,	
7	Amount of expense	es incurred in monitoring, inspecting, hanc	lling of violations, and	enforc	ing conservat	ion eas	ement	s during the ye	ear	
	▶\$									
8	Does each conser	vation easement reported on line 2(d) abov	e satisfy the requirem	ents of	section 170(h	n)(4)(B)(i)			
)(4)(B)(ii)?							s	No
9		be how the organization reports conservation								
		d include, if applicable, the text of the footr	note to the organization	n's fina	ancial stateme	ents tha	t desc	ribes the		
Par	t III Organization's acc	ounting for conservation easements. ations Maintaining Collections of	Art Historical T	reasi	ires or Ot	her Si	milar	Assets		
1 41		f the organization answered "Yes" on Form		leade			mai	Accelo.		
1a	· · · ·	elected, as permitted under FASB ASC 95		revenue	e statement a	nd bala	nce sh	eet works		
14	U U	easures, or other similar assets held for put	•							
		Part XIII the text of the footnote to its finar								
b	If the organization	elected, as permitted under FASB ASC 95	8, to report in its reve	nue sta	tement and b	alance	sheet	works of		
	art, historical treas	sures, or other similar assets held for public	exhibition, educatior	, or res	earch in furth	erance	of pub	lic service,		
	provide the follow	ing amounts relating to these items:								
		ded on Form 990, Part VIII, line 1					► \$	\$		
		ed in Form 990, Part X						S		
2	If the organization	received or held works of art, historical treat	asures, or other simila	ar asset	s for financial	gain, p	rovide			
	•	unts required to be reported under FASB A	•							
		on Form 990, Part VIII, line 1						§		
b	Assets included in	Form 990, Part X						6		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 132051 10-28-21

Schedule D (Form 990) 2021

10510713 138138 AWC001

26 2021.06000 A WIDER CIRCLE, INC

Sche		CIRCLE, IN					52-23			age 2
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	easures, o	r Othe	r Simila	r Assets	contii	nued)	
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	following that	t make s	ignificant ι	use of its			
	collection items (check all that apply):									
а	Public exhibition	d	Loan or exc	hange progra	am					
b	Scholarly research	e	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and explain	how they further th	ne organizatio	on's exer	mpt purpo	se in Part	XIII.		
5	During the year, did the organization solicit or				er similar	assets		_		_
	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arrang		te if the organizatio	n answered '	"Yes" on	Form 990	, Part IV,	ine 9, or		
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodia							-		-
	on Form 990, Part X?						L	Yes		No
b	If "Yes," explain the arrangement in Part XIII a	and complete the foll	owing table:							
								Amoun	τ	
	Beginning balance									
	Additions during the year									
	Distributions during the year									
	Ending balance Did the organization include an amount on Fo							Yes		
	If "Yes," explain the arrangement in Part XIII.						L			_ No □
Par										<u></u>
		(a) Current year	(b) Prior year	(c) Two year			ears back	(e) Fou	r vears	back
1a	Beginning of year balance	122,937.	60,462.			((-)	, <u>, , , , , , , , , , , , , , , , , , </u>	
	Contributions	100,000.	40,000.		5,000.					
	Net investment earnings, gains, and losses	-40,354.	22,475.		, 5,462.					
	Grants or scholarships	,								
	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
	End of year balance	182,583.	122,937.	6(0,462.					
2	Provide the estimated percentage of the curr	ent year end balance	(line 1g, column (a)) held as:						
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%	_							
с	Term endowment 100	%								
	The percentages on lines 2a, 2b, and 2c should be a should be should be a should be a should be a should be should be a should	uld equal 100%.								
3a	Are there endowment funds not in the posses	ssion of the organizat	tion that are held ar	nd administer	ed for th	ne organiza	ation			
	by:								Yes	No
	(i) Unrelated organizations							3a(i)		Х
	(ii) Related organizations							3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organization	tions listed as require	ed on Schedule R?					3b		
4	Describe in Part XIII the intended uses of the		vment funds.							
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answered									
	Description of property	(a) Cost or ot basis (investm	• • •	or other (other)		ccumulate preciation	ed	(d) Boo	k valu	e
1a	Land			6,701.				2,86		
b	Buildings			1,767.		307,9		2,61		
с	Leasehold improvements			3,808.		436,6			7,1	
d	Equipment		58	6,380.		439,28	85.	14	7,0	95.
	Other								<u> </u>	
Tota	. Add lines 1a through 1e. (Column (d) must ea	gual Form 990, Part X	(, column (B), line 1	0c.)	<u></u>			6,23	4,7	96.
										0004

Schedule D (Form 990) 2021

10510713 138138 AWC001

A WIDER CIRCLE, INC Schedule D (Form 990) 2021 Part VII Investments - Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (b) Book value (c) Method of valuation: Cost or end-of-year market value (a) Description of security or category (including name of security) (1) Financial derivatives (2) Closely held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) 🕨 Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ► Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability (b) Book value 1 (1) Federal income taxes

(2)(3) (4) (5) (6) (7) (8) (9) ► Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

Schedule D (Form 990) 2021

132053 10-28-21

Sche	dule D (Form 990) 2021 A WIDER CIRCLE, INC			52-2	2345144	Page 4
	t XI Reconciliation of Revenue per Audited Financial Statemer	nts With I	Revenue per Re			<u> </u>
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total revenue, gains, and other support per audited financial statements			1	9,557	135.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	-40,354.			
b	Donated services and use of facilities		24,000.			
с	Recoveries of prior year grants					
d						
е	Add lines 2a through 2d			2e	-16	354.
3	Subtract line 2e from line 1			3	9,573	489.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		<u></u>	5	9,573,	489.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	ents With	Expenses per F	Returr	า.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			· · · ·		
1	Total expenses and losses per audited financial statements			1	9,566,	,082.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	9,566	,082.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	9,566	,082.
Pa	rt XIII Supplemental Information.					

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

PART X, LINE 2:

THE ORGANIZATION IS A NOT-FOR-PR	OFIT ORGANIZATION THAT IS EXEMPT FROM
FEDERAL INCOME TAXES UNDER SECTI	ON 501(C)(3) OF THE UNITED STATES INTERNAL
REVENUE CODE AND IS RECOGNIZED A	S SUCH BY THE INTERNAL REVENUE SERVICE.
THE PROVISIONS INCLUDED IN ACCOU	NTING PRINCIPLES GENERALLY ACCEPTED IN THE
UNITED STATES OF AMERICA PROVIDE	CONSISTENT GUIDANCE FOR THE ACCOUNTING
FOR UNCERTAINTY IN INCOME TAXES	RECOGNIZED IN AN ENTITY'S FINANCIAL
STATEMENTS AND PRESCRIBE A THRES	HOLD OF "MORE LIKELY THAN NOT" FOR
RECOGNITION OF TAX POSITIONS TAK	EN OR EXPECTED TO BE TAKEN IN A TAX
RETURN. THE ORGANIZATION PERFORM	ED AN EVALUATION OF UNCERTAIN TAX
POSITIONS AS OF SEPTEMBER 30, 20	22 AND DETERMINED THAT THERE WERE NO
MATTERS THAT WOULD REQUIRE RECOG	NITION IN THE FINANCIAL STATEMENTS OR
132054 10-28-21	Schedule D (Form 990) 2021 29
10510713 138138 AWC001	2021.06000 A WIDER CIRCLE, INC AWC001_1

Schedule D (Form 990) 2021 A WIDER CIRCLE, Part XIII Supplemental Information (continued)	INC	52-2345144	Page 5
WHICH MAY HAVE ANY EFFECT ON ITS TAX	-EXEMPT STATU	JS. AS OF SEPTEMBER 30,	
2022, THE STATUTE OF LIMITATIONS FOR	FISCAL YEARS	5 2019 THROUGH 2022	
REMAINS OPEN FOR THE U.S. FEDERAL JU	RISDICTION TA	AX RETURNS. IT IS THE	
ORGANIZATION'S POLICY TO RECOGNIZE IN	NTEREST AND/C	OR PENALTIES RELATED TO	
UNCERTAIN TAX POSITIONS, IF ANY, IN 3	INCOME TAX EX	CPENSE.	
132055 10-28-21	30	Schedule D (Form	990) 2021
	J U		

10510713 138138 AWC001

2021.06000 A WIDER CIRCLE, INC AWC001_1

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctiv	ities	OMB No. 1545-0047
(Form 990)		e organization answered "Yes" on organization entered more than \$1				r 19,	or if the	2021
Department of the Treasury		Attach to Form 990						Open to Public
Internal Revenue Service		to www.irs.gov/Form990 for instr	uction	s and	the latest informati	on.	I.	Inspection
Name of the organization		CIRCLE, INC					Employer id	entification number 5144
	ing Activities. complete this part	Complete if the organization answe	ered "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-E	Z filers are not
		ed funds through any of the followin	g activ	vities.	Check all that apply.			
a Mail solicitat					overnment grants			
b Internet and c Phone solici	email solicitations tations	s f Solicita g Special			nment grants events			
d 🗌 In-person so		3 1						
		or oral agreement with any individual				tees,		
		art VII) or entity in connection with p <i>r</i> iduals or entities (fundraisers) pursu			÷	ne fur	draiser is to h	
compensated at le				ugreer				
			(iii)	Did		(v)	Amount paid	() Amount poid
(i) Name and addres or entity (func		(ii) Activity	(iii) fundr have c	aiser ustody itrol of	(iv) Gross receipts from activity	tò (c	or retained by) fundraiser	to (or retained by)
			contrib	utions?		lis	ted in col. (i)	organization
			Yes	No	-			
Total								
	ch the organizatio	n is registered or licensed to solicit o	contrib	utions	or has been notified	it is e	exempt from r	egistration
or licensing.								
	aduction Act Not	ca see the Instructions for Form	000 ~~	000 -	7		Sahad	le G (Form 990) 2021
	SUCTION ACT NOT	ce, see the Instructions for Form S	50 Or	330-E	. £ .1		Schedu	ie a (fuitti 990) 2021
132081 10-21-21								

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

			(a) Event #1 NEIGHBOR TO NEIGHBOR DAY		(c) Other events NONE	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
	1	Gross receipts	72,841.	484,243.		557,084
	2	Less: Contributions	642.	34,308.		34,950
	3	Gross income (line 1 minus line 2)	72,199.	449,935.		522,134
	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages		23,173.		23,173
Ξ	8	Entertainment				
	9	Other direct expenses		236,207.		247,951
	10	Direct expense summary. Add lines 4 throug	h 9 in column (d)		►	271,124
_		Net income summary. Subtract line 10 from				251,010
	rt I	Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	990, Part IV, line 19, or re	eported more than	
			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (d
Ĕ	1	Gross revenue				
2020	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	│	└── Yes % │	Yes %	
	1	Direct expense summary. Add lines 2 throug	n 5 in column (a)		►	
	~	Net gaming income summary. Subtract line 7	7 from line 1, column (d)		►	
	8					
		er the state(s) in which the organization cond	ucts gaming activities:			
а	Ent Is tl	er the state(s) in which the organization cond he organization licensed to conduct gaming a	ctivities in each of these s			Yes N
а	Ent Is tl	er the state(s) in which the organization cond	ctivities in each of these s			Yes N
a b a	Ent Is ti If "I 	er the state(s) in which the organization cond he organization licensed to conduct gaming a No," explain: re any of the organization's gaming licenses r	evoked, suspended, or te	rminated during the tax ye		
a b a	Ent Is ti If "I 	er the state(s) in which the organization cond he organization licensed to conduct gaming a No," explain:	evoked, suspended, or te	rminated during the tax ye		

Sch	edule G (Form 990) 2021	A WIDER	CIRCLE,	INC	52-2	2345144	Page 3
11	Does the organization conduct	gaming activities w	ith nonmembers			Yes	No
12	Is the organization a grantor, be	neficiary or trustee	of a trust, or a	nember of a partnership	o or other entity formed		
						Yes	No No
13	Indicate the percentage of game	ing activity conduct	ed in:			1 1	
						13a	%
						13b	%
14	Enter the name and address of	the person who pre	pares the orgar	nization's gaming/specia	al events books and records:		
	Name						
	Address 🕨						
15a	Does the organization have a co	ontract with a third	party from who	n the organization recei	ves gaming revenue?	Ves	No No
b	If "Yes," enter the amount of ga	ming revenue recei	ved by the orga	nization 🕨 \$	and the amount		
с	If "Yes," enter name and addres	s of the third party	:				
	Name						
	Address						
16	Gaming manager information:						
	Nama						
	Gaming manager compensation	n►\$					
	Address						
		-					
		Employee	—	Independent contract	or		
					-		
17	Mandatory distributions:						
а	Is the organization required und	ler state law to mak	e charitable dis	tributions from the gami	ing proceeds to		_
						Yes	No No
b		•		stributed to other exemp	pt organizations or spent in the		
Pa				and required by Dart L lin	no 2h. columna (iii) and (v); and Da	rt III, linco Q	0h 10h
ľŭ						nt III, III les 9, 1	90, 100,
	155, 156, 16, and 175,	as applicable. Also	provide any add				
						h.h. 0 /7	000) 000 :
13208	33 10-21-21			33	Sched	lule G (Form	990) 2021
			~				

10510713 138138 AWC001

2021.06000 A WIDER CIRCLE, INC AWC001_1

	i (Form 990)			CIRCLE,	INC
Part IV	Supplemental Info	ormat	ion _{(contin}	ued)	

100004 11 10 01		Schedule G (Form 990)
132084 11-18-21	2.4	

10510713 138138 AWC001

SCHEDULE I (Form 990)	Form 990) Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.									
Department of the Treasury Internal Revenue Service		Co to www.ir			nation		Open to Public Inspection			
Name of the organization	TRCLE IN		3.gov/1 0111000 10				Employer identification number 52-2345144			
Part I General Information on Grants ar		6					52 2313111			
criteria used to award the grants or assis	Operation of answered "Yes" on Form 990, Part IV, line 21 or 22. > Attach to Form 990. Is to to www.irs.gov/Form990 for the latest information. Image: Colspan="2">Image: Colspan="2" Image: Colspan="2" Image: Colspan="2" Image: Colspan="2" Image: Colspan="2" Image: Colspan="2" Image: Colspan="2" Image: Colspan="2" Image: Colspan="2" Image: Colspan="2" Image: Colspan="2" Image: Colspan="2" Image: Colspan="2" Image: Colspan="2"									
	-				anization answered "Y	′es" on Form 990, Part	IV, line 21, for any			
1 (a) Name and address of organization or government	(b) EIN		1	noncash	valuation (book, FMV, appraisal,		(h) Purpose of grant or assistance			
SO WHAT ELSE ONE PRESERVE PARKWAY ROCKVILLE, MD 20852	27-1219231	501 (C)(3)	0.	55,000.			IMPLEMENTATION AND COORDINATION OF THREE MONTH FOOD SUPPLEMENTATION PROGRAM			
ARTWORKS NOW 4800 RHODE ISLAND AVENUE HYATTSVILLE, MD 20781	27-5122542	501 (C)(3)	0.	50,000.			PROGRAMMING ON HEALTH, WELLNESS, AND COMMUNITY BUILDING AT OUR WARD 8 WASHINGTON DC HUB			
3 Enter total number of other organizations	s listed in the line	1 table	e line 1 table				2 .			

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) 2021

A WIDER CIRCLE, INC

52-2345144 Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	ditional information.	
PART I, LINE 2:					
A WIDER CIRCLE REVIEWS PROGRAM PRIC	ORITIES A	ND COMMUNI	TY PARTNER	S WITH WHOM	
THEY COULD WORK TO ACHIEVE CORE OBJ	JECTIVES	AND IMPACT	. A SCOPE	OF WORK IS	
DEVELOPED BETWEEN A WIDER CIRCLE AN	ND THE PA	RTNER/SUBG	RANTEE ALO	NG WITH AN	

ASSOCIATED BUDGET AND A TIMELINE FOR COMPLETION. SUBGRANTEES ASSIGN A

PRIMARY POINT OF CONTACT AND CHECK IN REGULARLY WITH A WIDER CIRCLE STAFF.

PAYMENTS, IF IN INSTALLMENTS, ARE ISSUED WHEN KEY MILESTONES ARE MET AND

DATA IS PROVIDED. REGULAR AND/OR FINAL REPORTING IS UNDERTAKEN TO ENSURE

IMPACT WAS ACHIEVED, OBJECTIVES MET, AND SPENDING UNDERTAKEN IN ALIGNMENT

Schedule I	(Form 99	0)			А	WIDER	CIRCLE,	INC
		-		-				

Part IV Supplemental Information

WITH BUDGET AND AGREED UPON TERMS. RENEWALS OR ADDITIONAL FUNDING OPTIONS

ARE ONLY CONSIDERED IF ALL GOALS AND DELIVERABLES ARE MET ON TIME AND

WITHIN SCOPE.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: SO WHAT ELSE

(H) PURPOSE OF GRANT OR ASSISTANCE: IMPLEMENTATION AND COORDINATION OF

THREE MONTH FOOD SUPPLEMENTATION PROGRAM FOR OUR PARTNERSHIP TO

INDEPENDENCE PARTICIPANTS

Schedule I (Form 990)

132291 04-01-21

SC	HEDULE J	Compensation Information	I	OMB No. 1	545-004	47				
(Fo	rm 990)	- For certain Officers, Directors, Trustees, Key Employees, and Highest		20	71					
		Compensated Employees		20		1				
Depa	tment of the Treasury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to Public						
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe	ction					
Nan	ne of the organization	1		identificatio		mber				
		A WIDER CIRCLE, INC	52-2	234514	4					
Pa	rt I Question	s Regarding Compensation								
					Yes	No				
1a	Check the appropri	ate 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 c	harter travel Housing allowance or residence for perso	nal use							
	Travel for com	panions Payments for business use of personal re	sidence							
	_	ation and gross-up payments	S							
	Discretionary	spending account Personal services (such as maid, chauffer	ur, chef)							
b	•	on line 1a are checked, did the organization follow a written policy regarding payment or								
	•	rovision of all of the expenses described above? If "No," complete Part III to explain		1b						
2	•	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,								
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		<u> </u>				
•										
3		ny, of the following the organization used to establish the compensation of the organization's								
		ector. Check all that apply. Do not check any boxes for methods used by a related organization	on to							
	·	ation of the CEO/Executive Director, but explain in Part III.								
	Compensatior									
	·	ompensation consultant								
		ther organizations Approval by the board or compensation c	ommittee							
4	During the year die	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing								
4	organization or a re									
а	-			4a		x				
b		e payment or change-or-control payment? eive payment from a supplemental nonqualified retirement plan?				X				
		eive payment from an equity-based compensation arrangement?				X				
Ũ	-	les 4a-c, list the persons and provide the applicable amounts for each item in Part III.				<u> </u>				
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.								
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n							
	contingent on the r									
а	•			5a		X				
		ation?				X				
		or 5b, describe in Part III.								
6	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n							
	contingent on the r									
а	The organization?			6a		X				
		ation?				X				
		or 6b, describe in Part III.								
7	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	;							
	not described on lir	nes 5 and 6? If "Yes," describe in Part III		7		X				
8	Were any amounts	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th	ıe							
	initial contract exce	ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X				
9		id the organization also follow the rebuttable presumption procedure described in								
	Regulations section	1 53.4958-6(c)?	<u></u>	9						
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Scheo	dule J (Forn	n 990)) 2021				

132111 11-02-21

52-2345144

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) AMY S JAVAID	(i)	161,667.	0.	0.	0.	0.	161,667.	0.	
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Schedule J (Form 990) 2021

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2021

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

ſ

Department of the Treasury
Internal Revenue Service

Part I

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

1 ZUZ **Open to Public** Inspection

Name c	of the	organizatio)

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

organization								Employer identification number
	A WID	ER	CIRCI	ĿΕ,	INC			52-2345144
Types of P	roperty							
				(a		(b)	(c)	(d)

		Check if applicable	Number of contributions or		h contribution ts reported on		hod of deter 1 contributio	-	te
		applicable	items contributed	Form 990	, Part VIII, line 1g	HUHCasi	Contributio	n amoun	
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods	X		3	<u>,125,991.</u>	THRIFT	STORE	VALU	E
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded								
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other \dots								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ► ()								
26	Other ► ()								
27	Other ► ()								
28	Other 🕨 ()								
29	Number of Forms 8283 received by the organiz	-			s				
	for which the organization completed Form 828	83, Part V, D	onee Acknowledg	ement	29				
							_	Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Pa	rt I, lines 1 throug	h 28, that it			
	must hold for at least three years from the date	e of the initia	l contribution, and	which isn'	t required to be u	sed for			
	exempt purposes for the entire holding period?	?						0a	X
	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance p	policy that re	equires the review of	of any nons	standard contribu	tions?		31	<u> </u>

32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash	
	contributions?	32a
b	If "Yes," describe in Part II.	
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,	
	describe in Part II.	

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

132141 11-17-21

Х

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

10713 138138 AWC001	42 2021.06000 A WIDER CIRCI	LE, INC AWC0
132142 11-17-21		Schedule M (Form 990) 202

SCHE	DULE	0
(Form	990)	

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



A WIDER CIRCLE, INC

52-2345144

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SERVICES FOR THE CREATION OF STABLE HOMES, WORKFORCE DEVELOPMENT, AND

NEIGHBORHOOD REVITALIZATION. WE ALSO SEEK TO DEVELOP LARGE-SCALE

SOLUTIONS THAT INCORPORATE GREATER AWARENESS AND ENGAGEMENT BY THE

COMMUNITY.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AND ENGAGEMENT BY THE COMMUNITY.

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

THE FORM 990 IS REVIEWED BY THE CHAIR OF THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS.

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

BOARD MEMBERS MUST DISCLOSE IMMEDIATELY WHEN THERE IS A CONFLICT OF

INTEREST OR AN APPEARANCE OF CONFLICT OF INTEREST.

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

THE ORGANIZATION DID A COMPARISON DATA AND SPOKE WITH OTHERS - NOT APPROVAL

FOR INDEPENDENT PERSONS THOUGH.

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

ARE AVAILABLE UPON REQUEST. THE AUDITED FINANCIAL STATEMENT ARE POSTED ON

THE ORGANIZATION'S WEBSITE.

PART XII, LINE 2C

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 132211 11-11-21 43 Schedule O (Form 990) 2021

INC

ame of the organization A WIDER CIRCLE	E. INC	Page Employer identification number 52-2345144
		52 2545144
IE PROCESS HAS NOT CHANGED	FROM THE PRIOR YEAR.	
212 11-11-21		Schedule O (Form 990) 202
)713 138138 AWC001	44 2021 06000 2 MT	DER CIRCLE, INC AWC0(

10