

Return of Organization Exempt From Income Tax

Form 990

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2021

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning JUL 1, 2021 and ending JUN 30, 2022

Form header section containing organization name (NATIONAL SCLERODERMA FOUNDATION, INC.), address (300 ROSEWOOD DRIVE, DANVERS, MA 01923), and identification numbers.

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include mission statement, governance metrics, revenue (Total: 4,581,467), expenses (Total: 6,210,712), and net assets (Total: 8,549,621).

Part II Signature Block

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

Signature block section with fields for officer signature (MARY J. WHEATLEY), preparer name (MATTHEW KALIL), and firm information (BAKER TILLY US, LLP).

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: THE NATIONAL SCLERODERMA FOUNDATION'S MISSION IS TO ADVANCE MEDICAL RESEARCH, PROMOTE DISEASE AWARENESS, AND PROVIDE SUPPORT AND EDUCATION TO PEOPLE WITH SCLERODERMA, THEIR FAMILIES AND SUPPORT NETWORKS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code: ) (Expenses \$ 2,074,271. including grants of \$ ) (Revenue \$ ) A RELENTLESS FORCE IN FINDING A CURE AND IMPROVING THE LIVES OF PEOPLE AFFECTED BY SCLERODERMA, THE NATIONAL SCLERODERMA FOUNDATION ADVANCES MEDICAL RESEARCH, PROMOTES DISEASE AWARENESS, AND PROVIDES SUPPORT AND EDUCATION TO PEOPLE WITH SCLERODERMA, THEIR FAMILIES AND SUPPORT NETWORKS. SUPPORTED BY A NETWORK OF THOUSANDS OF INDIVIDUALS ACROSS THE UNITED STATES, THE FOUNDATION IS THE LEADING NONPROFIT FUNDER OF PEER-REVIEWED RESEARCH TO DISCOVER THE CAUSE, UNDERSTAND THE MECHANISMS, AND OVERCOME SCLERODERMA FOREVER.

SUPPORT: THE FOUNDATION SERVES PEOPLE LIVING WITH SCLERODERMA, AS WELL AS THEIR CAREGIVERS AND FAMILY MEMBERS BY PROVIDING ACCESS TO SUPPORT GROUPS. IN THE WAKE OF THE PANDEMIC, THE FOUNDATION PIVOTED FROM

4b (Code: ) (Expenses \$ 2,747,437. including grants of \$ 2,425,000. ) (Revenue \$ ) RESEARCH: IN 2021, THE FOUNDATION MADE A COMMITMENT TO MORE THAN DOUBLE ITS RESEARCH FUNDING, (ITS SINGLE LARGEST EXPENSE) COMMITTING \$2.4 MILLION IN FY 2022. THIS FUNDING AIMS TO STIMULATE AND SUPPORT RESEARCH TO BETTER UNDERSTAND THE MECHANISMS THAT CAUSE THE DISEASE, HOW TO PREVENT AND ACCURATELY DIAGNOSIS AND TREAT THE DISEASE, AND ULTIMATELY FIND A CURE FOR SCLERODERMA. EACH AWARD IS \$200,000 SPREAD OVER MULTIPLE YEARS. IN FY 2022, FIVE AWARDS WERE TWO-YEAR ESTABLISHED INVESTIGATOR AWARDS, AND SEVEN AWARDS WERE THREE-YEAR NEW INVESTIGATOR AWARDS. NEW INVESTIGATOR AWARDS ARE INTENDED TO HELP EMERGING SCIENTISTS GATHER SUFFICIENT DATA TO DEMONSTRATE THE VALUE OF THEIR AREA OF INVESTIGATION AND ATTRACT LARGER FUNDING FROM OTHER SOURCES. THE FOUNDATION'S PEER

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

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

4e Total program service expenses 4,821,708.

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> 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? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> 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? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> 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? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? .....	X	

**Note:** All Form 990 filers are required to complete Schedule O

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

	Yes	No
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .....		
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .....		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	X	

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (12), 1b (12), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

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

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MICHAEL B. HYDE COO/CFO	40.00			X				129,165.	0.	30,215.
(2) MARY J. WHEATLEY CEO (SINCE JULY 1, 2021)	40.00			X				101,145.	0.	6,901.
(3) ROBERT J. RIGGS CEO (UNTIL DEC 2021)	40.00			X				83,028.	0.	11,946.
(4) KEVIN BOYANOWSKI DIRECTOR	2.00	X						0.	0.	0.
(5) COURTNEY CALIENDO DIRECTOR	2.00	X						0.	0.	0.
(6) CHRISTINA LOCCKE DIRECTOR	2.00	X						0.	0.	0.
(7) MARY BLADES DIRECTOR	2.00	X						0.	0.	0.
(8) JEANNE THEISSEN DIRECTOR (SINCE JUL 2021)	2.00	X						0.	0.	0.
(9) MARK OROZCO DIRECTOR	2.00	X						0.	0.	0.
(10) LINDA BAUM DIRECTOR	2.00	X						0.	0.	0.
(11) MARCIA WALKER DIRECTOR	2.00	X						0.	0.	0.
(12) COS MALLOZZI CHAIR	2.00	X		X				0.	0.	0.
(13) CAROL FEGHALI-BOSTWICK, PH.D. VICE CHAIR	2.00	X		X				0.	0.	0.
(14) MIKE LEVENGOOD SECRETARY	2.00	X		X				0.	0.	0.
(15) CYNDY BESSELIEVRE TREASURER (SINCE JUL 2021)	2.00	X		X				0.	0.	0.
(16) GREG MARION TREASURER (UNTIL JUL 2021)	2.00	X		X				0.	0.	0.

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes subtotal rows for 1b, 1c, and 1d.

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

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Lists BLACKBAUD INC. and ROBERT HALF/ACCOUNTemps.

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



**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b>	Federated campaigns	<b>1a</b>				
	<b>b</b>	Membership dues	<b>1b</b>				
	<b>c</b>	Fundraising events	<b>1c</b>	443,271.			
	<b>d</b>	Related organizations	<b>1d</b>				
	<b>e</b>	Government grants (contributions)	<b>1e</b>	249,960.			
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	3,769,199.			
	<b>g</b>	Noncash contributions included in lines 1a-1f	<b>1g</b>	\$			
	<b>h</b>	<b>Total.</b> Add lines 1a-1f		4,462,430.			
Program Service Revenue	<b>2 a</b>		<b>Business Code</b>				
	<b>b</b>						
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b>	All other program service revenue					
	<b>g</b>	<b>Total.</b> Add lines 2a-2f					
Other Revenue	<b>3</b>	Investment income (including dividends, interest, and other similar amounts)		175,431.		175,431.	
	<b>4</b>	Income from investment of tax-exempt bond proceeds					
	<b>5</b>	Royalties					
	<b>6 a</b>	Gross rents	(i) Real				
			(ii) Personal				
	<b>b</b>	Less: rental expenses	<b>6b</b>				
	<b>c</b>	Rental income or (loss)	<b>6c</b>				
	<b>d</b>	Net rental income or (loss)					
	<b>7 a</b>	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
				2,015,843.			
	<b>b</b>	Less: cost or other basis and sales expenses	<b>7b</b>	2,072,237.			
	<b>c</b>	Gain or (loss)	<b>7c</b>	-56,394.			
<b>d</b>	Net gain or (loss)		-56,394.		-56,394.		
<b>8 a</b>	Gross income from fundraising events (not including \$ 443,271. of contributions reported on line 1c). See Part IV, line 18		85,687.				
		<b>8a</b>	85,687.				
<b>b</b>	Less: direct expenses	<b>8b</b>	85,687.				
<b>c</b>	Net income or (loss) from fundraising events		0.				
<b>9 a</b>	Gross income from gaming activities. See Part IV, line 19						
		<b>9a</b>					
<b>b</b>	Less: direct expenses	<b>9b</b>					
<b>c</b>	Net income or (loss) from gaming activities						
<b>10 a</b>	Gross sales of inventory, less returns and allowances						
		<b>10a</b>					
		<b>10b</b>					
<b>b</b>	Less: cost of goods sold						
<b>c</b>	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	<b>11 a</b>		<b>Business Code</b>				
	<b>b</b>						
	<b>c</b>						
	<b>d</b>	All other revenue					
	<b>e</b>	<b>Total.</b> Add lines 11a-11d					
<b>12</b>	<b>Total revenue.</b> See instructions		4,581,467.	0.	0.	119,037.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	2,425,000.	2,425,000.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....	419,642.	145,067.	249,564.	25,011.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
<b>7</b> Other salaries and wages .....	1,348,328.	999,695.	235,225.	113,408.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	17,145.	14,428.	1,137.	1,580.
<b>9</b> Other employee benefits .....	89,123.	77,337.	2,919.	8,867.
<b>10</b> Payroll taxes .....	137,959.	91,018.	35,983.	10,958.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....				
<b>b</b> Legal .....	60,000.	7,923.	52,077.	
<b>c</b> Accounting .....	47,550.		47,550.	
<b>d</b> Lobbying .....				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees .....	25,203.		25,203.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	456,014.	353,887.		102,127.
<b>12</b> Advertising and promotion .....	21,037.	11,756.	1,910.	7,371.
<b>13</b> Office expenses .....	172,177.	81,553.	13,857.	76,767.
<b>14</b> Information technology .....	371,766.	223,060.	74,353.	74,353.
<b>15</b> Royalties .....				
<b>16</b> Occupancy .....	192,742.	116,058.	38,342.	38,342.
<b>17</b> Travel .....	65,808.	39,500.	13,154.	13,154.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....	113,863.	107,013.	3,488.	3,362.
<b>20</b> Interest .....				
<b>21</b> Payments to affiliates .....				
<b>22</b> Depreciation, depletion, and amortization .....	15,701.	9,421.	3,140.	3,140.
<b>23</b> Insurance .....	77,111.	46,267.	15,422.	15,422.
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a FEES AND LICENSES</b>	140,247.	68,280.	22,760.	49,207.
<b>b OUTREACH</b>	14,296.	4,445.	0.	9,851.
<b>c</b> _____				
<b>d</b> _____				
<b>e</b> All other expenses _____				
<b>25 Total functional expenses.</b> Add lines 1 through 24e	6,210,712.	4,821,708.	836,084.	552,920.
<b>26 Joint costs.</b> 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)

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	2,533,564.	<b>1</b>	2,683,332.
	<b>2</b> Savings and temporary cash investments .....	156,814.	<b>2</b>	
	<b>3</b> Pledges and grants receivable, net .....	406,750.	<b>3</b>	635,411.
	<b>4</b> Accounts receivable, net .....		<b>4</b>	
	<b>5</b> 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	215,013.	<b>9</b>	185,646.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 236,757.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 206,770.	21,456.	<b>10c</b> 29,987.
	<b>11</b> Investments - publicly traded securities .....	10,105,147.	<b>11</b>	7,887,043.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	53,527.	<b>15</b>	41,655.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	13,492,271.	<b>16</b>	11,463,074.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	235,306.	<b>17</b>	208,675.
	<b>18</b> Grants payable .....	1,525,000.	<b>18</b>	2,620,835.
	<b>19</b> Deferred revenue .....	11,051.	<b>19</b>	4,529.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	249,960.	<b>24</b>	
	<b>25</b> 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 .....	72,264.	<b>25</b>	79,414.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	2,093,581.	<b>26</b>	2,913,453.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	9,261,793.	<b>27</b>	6,893,709.
	<b>28</b> Net assets with donor restrictions .....	2,136,897.	<b>28</b>	1,655,912.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	11,398,690.	<b>32</b>	8,549,621.
	<b>33</b> Total liabilities and net assets/fund balances .....	13,492,271.	<b>33</b>	11,463,074.

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,581,467.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,210,712.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,629,245.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	11,398,690.
5	Net unrealized gains (losses) on investments	5	-1,219,824.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	8,549,621.

**Part XII Financial Statements and Reporting**

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

- 1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
 If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant? .....  
 If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant? .....  
 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....  
 If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .....

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

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization: NATIONAL SCLERODERMA FOUNDATION, INC. Employer identification number: 52-1375827

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii).
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 A community trust described in section 170(b)(1)(A)(vi).
9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture.
10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions...
11 An organization organized and operated exclusively to test for public safety.
12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s)...
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s)...
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s)...
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated...
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations
g Provide the following information about the supported organization(s).

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

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	4193403.	4326448.	3405450.	3721793.	4462430.	20109524.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	4193403.	4326448.	3405450.	3721793.	4462430.	20109524.
<b>5</b> 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) .....						1811669.
<b>6 Public support.</b> Subtract line 5 from line 4.						18297855.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>7</b> Amounts from line 4 .....	4193403.	4326448.	3405450.	3721793.	4462430.	20109524.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	169,963.	175,015.	180,407.	167,751.	175,431.	868,567.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						20978091.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	332,742.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	87.22	%
<b>15</b> Public support percentage from 2020 Schedule A, Part II, line 14 .....	<b>15</b>	87.28	%
<b>16a 33 1/3% support test - 2021.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input checked="" type="checkbox"/>		
<b>b 33 1/3% support test - 2020.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>		
<b>17a 10% -facts-and-circumstances test - 2021.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>		
<b>b 10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....	<input type="checkbox"/>		

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ..... ►

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2020 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2021</b> (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2020</b> Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2021.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ..... ►

**b 33 1/3% support tests - 2020.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ..... ►

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

**Part IV Supporting Organizations**

(Complete only if you checked a box 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**

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



**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
<b>b</b> A family member of a person described on line 11a above?		
<b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
<b>1</b>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b> By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>1</b>		
<b>2</b>		
<b>3</b>		

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

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

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

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( *explain in Part VI*). **See instructions.**  
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A - Adjusted Net Income</b>		(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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
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	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

<b>Section C - Distributable Amount</b>			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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

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

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6		
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	<b>Total</b> 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	<b>Excess distributions carryover to 2022.</b> 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		
e	Excess from 2021		



SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization: NATIONAL SCLERODERMA FOUNDATION, INC. Employer identification number: 52-1375827

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? (Yes/No), 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? (Yes/No)

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of a historically important land area, Preservation of a certified historic structure. 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 2a Total number of conservation easements, 2b Total acreage restricted by conservation easements, 2c Number of conservation easements on a certified historic structure included in (a), 2d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register. 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year. 4 Number of states where property subject to conservation easement is located. 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? (Yes/No). 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year. 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year. 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? (Yes/No). 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Revenue, Assets. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,881,204.	1,658,720.	1,627,038.	1,662,877.	1,916,225.
b Contributions			31,682.		
c Net investment earnings, gains, and losses	-155,307.	293,349.	101,713.	115,953.	65,063.
d Grants or scholarships					
e Other expenditures for facilities and programs	69,985.	70,865.	101,713.	151,792.	318,411.
f Administrative expenses					
g End of year balance	1,655,912.	1,881,204.	1,658,720.	1,627,038.	1,662,877.

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

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		12,343.	8,913.	3,430.
d Equipment		137,386.	118,804.	18,582.
e Other		87,028.	79,053.	7,975.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				29,987.

**Part VII Investments - Other Securities.**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely held equity interests .....		
(3) Other .....		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (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)		
<b>Total.</b> (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)	
<b>Total.</b> (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.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) <b>DUE TO AFFILIATES</b>	<b>79,414.</b>
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	<b>79,414.</b>

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	3,336,440.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-1,219,824.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	-1,219,824.	
3	Subtract line 2e from line 1	3	4,556,264.	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	25,203.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	25,203.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	4,581,467.	

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

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

1	Total expenses and losses per audited financial statements		1	6,185,509.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	0.	
3	Subtract line 2e from line 1	3	6,185,509.	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	25,203.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c	25,203.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	6,210,712.	

**Part XIII Supplemental Information.**

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

**PART V, LINE 4:**

THE ENDOWMENT CONSISTS OF FUNDS RESTRICTED IN PERPETUITY ESTABLISHED IN 2007 AND BOARD DESIGNATED ENDOWMENT FUNDS. THE ENDOWMENT IS TO SUPPORT SCLERODERMA RESEARCH .

**PART X, LINE 2:**

THE ORGANIZATION IS A NONPROFIT ORGANIZATION AS DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS EXEMPT FROM FEDERAL AND STATE INCOME TAXES ON TRADE OR BUSINESS PROFITS GENERATED BY ACTIVITIES RELATED TO THE ORGANIZATION'S EXEMPT FUNCTION. THE ORGANIZATION MAY BE SUBJECT TO FEDERAL AND STATE INCOME TAXES FOR PROFITS GENERATED FROM TRADE OR BUSINESS ACTIVITIES UNRELATED TO THE ORGANIZATION'S EXEMPT FUNCTION.



**Part XIII** Supplemental Information (continued)

AS OF JUNE 30, 2022, MANAGEMENT BELIEVES THAT THE ORGANIZATION HAS NOT GENERATED ANY UNRELATED BUSINESS TAXABLE INCOME.

THE ORGANIZATION ASSESSES THE RECORDING OF UNCERTAIN TAX POSITIONS BY EVALUATING THE MINIMUM RECOGNITION THRESHOLD AND MEASUREMENT REQUIREMENTS A TAX POSITION MUST MEET BEFORE BEING RECOGNIZED AS A BENEFIT IN THE FINANCIAL STATEMENTS. THE ORGANIZATION'S POLICY IS TO RECOGNIZE INTEREST AND PENALTIES ACCRUED ON ANY UNCERTAIN TAX POSITIONS AS A COMPONENT OF INCOME TAX EXPENSE, IF ANY, IN ITS STATEMENT OF ACTIVITIES. THE ORGANIZATION HAS NOT RECOGNIZED ANY LIABILITIES FOR UNCERTAIN TAX POSITIONS OR UNRECOGNIZED BENEFITS AS OF JUNE 30, 2022. THE ORGANIZATION DOES NOT EXPECT ANY MATERIAL CHANGE IN UNCERTAIN TAX BENEFITS WITHIN THE NEXT 12 MONTHS.



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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		COCONUT CREEK FL STE (event type)	DETROIT STEPPING OUT (event type)	46 (total number)		
Revenue	1	Gross receipts	50,192.	36,398.	442,368.	528,958.
	2	Less: Contributions	42,061.	30,502.	370,708.	443,271.
	3	Gross income (line 1 minus line 2)	8,131.	5,896.	71,660.	85,687.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	8,131.	5,896.	71,660.	85,687.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				85,687.
11	Net income summary. Subtract line 10 from line 3, column (d)				0.	

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

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

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No

b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No

b If "Yes," explain: \_\_\_\_\_





**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

Name of the organization **NATIONAL SCLERODERMA FOUNDATION, INC.** Employer identification number **52-1375827**

**Part I General Information on Grants and Assistance**

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

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

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
TRUSTEES OF BOSTON UNIVERSITY, BUMC - BOSTON UNIVERSITY GRANTS RECEIVABLES, P.O. BOX 28763 - NEW YORK, NY 10087	04-2103547	501(C)3	200,000.	0.			RESEARCH
UNIVERSITY OF NEW MEXICO HEALTH SCIENCES CENTER - ATTN: JASON GALLOWAY, MSC09 5300. 1 UNIVERSITY OF NEW MEXICO - ALBUQUERQUE, NM	85-6000642	501(C)3	200,000.	0.			RESEARCH
UNIVERSITY OF PITTSBURGH ATTN: 371220, 500 ROSS STREET 154-0 PITTSBURGH, PA 15262	25-0965591	501(C)3	200,000.	0.			RESEARCH
UNIVERSITY OF PITTSBURGH ATTN: 371220, 500 ROSS STREET 154-0 PITTSBURGH, PA 15262	25-0965591	501(C)3	200,000.	0.			RESEARCH
JOHNS HOPKINS UNIVERSITY CENTRAL LOCKBOX, BANK OF AMERICA, 12529 COLLECTIONS CENTER DRIVE - CHICAGO,	52-0595110	501(C)3	200,000.	0.			RESEARCH
WEILL MEDICAL COLLEGE OF CORNELL UNIVERSITY - MELISSA PARAY ASST DIR., ATTN: GRANT & CONTRACT ACCT, PO BOX 22371 - NEW YORK, NY 10087	13-1623978	501(C)3	200,000.	0.			RESEARCH

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶ 13.**
- 3** Enter total number of other organizations listed in the line 1 table **▶ 0.**

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

Schedule I (Form 990) 2021

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF KANSAS MEDICAL CENTER RESEARCH INSTITUTE - ATTN: PAUL TOLER, DEPUTY DIR OF FINANCE, MSN 1039, 3901 RAINBOW BLVD -	48-1108830	501(C)3	200,000.	0.			RESEARCH
REGENTS OF THE UNIVERSITY OF MICHIGAN - C/O BNY MELLON, BOX 223131 - PITTSBURGH, PA 15251	38-6006309	501(C)3	200,000.	0.			RESEARCH
ROCHESTER INSTITUTE OF TECHNOLOGY SFS, C/O DR. KARIN WUERTZ-KOZAK, 25 LOMB MEMORIAL DR. - ROCHESTER, NY 14623	16-0743140	501(C)3	200,000.	0.			RESEARCH
UNIVERSITY OF PITTSBURGH ATTN: 371220, 500 ROSS STREET 154-0 PITTSBURGH, PA 15262	25-0965591	501(C)3	200,000.	0.			RESEARCH
UNIVERSITY OF TOLEDO P.O. BOX 72327 CLEVELAND, OH 44192	34-6555110	501(C)3	200,000.	0.			RESEARCH
MEDICAL UNIVERSITY OF SOUTH CAROLINA - MUSC UNIVERSITY BURSAR, 1 SOUTH PARK CIRCLE BUILDING 1, SUITE 402 - CHARLESTON, SC 29407	57-6028985	501(C)3	200,000.	0.			RESEARCH
INTERNATIONAL WORKSHOP ON SCLERODERMA RESEARCH CORPORATION - C/O KATE BRENNAN, 6 SUMMER HILL CIRCLE - ARLINGTON, MA 02474	81-4302337	501(C)3	25,000.	0.			SUPPORT FOR 17TH INTERNATIONAL WORKSHOP ON SCLERODERMA RESEARCH

**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 required in Part I, line 2; Part III, column (b); and any other additional information.

**PART I, LINE 2:**

THE FOUNDATION IS THE LEADING NONPROFIT FUNDING SCLERODERMA RESEARCH IN THE UNITED STATES. THROUGH THIS PROGRAM, THE FOUNDATION IS COMMITTED TO DISCOVERING THE CAUSE OF THIS DISEASE, UNDERSTANDING THE MECHANISMS BEHIND IT, AND OVERCOMING SCLERODERMA FOREVER. SINCE ITS INCEPTION, THE FOUNDATION HAS COMMITTED \$30 MILLION TO THIS MISSION PRIORITY. THROUGH ITS PEER REVIEWED RESEARCH GRANTS PROGRAM, THE NATIONAL SCLERODERMA FOUNDATION FOSTERS THE DEVELOPMENT OF INNOVATIVE, HIGH-QUALITY RESEARCH BY NEW AND ESTABLISHED INVESTIGATORS IN FIELDS RELATED TO SCLERODERMA. TO THAT END,





**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

OMB No. 1545-0047

**2021**

Open to Public Inspection

Name of the organization

**NATIONAL SCLERODERMA FOUNDATION, INC.**

Employer identification number

**52-1375827**

**Part I Questions Regarding Compensation**

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

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

Schedule J (Form 990) 2021

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) MICHAEL B. HYDE COO/CFO	(i)	129,165.	0.	0.	3,894.	26,321.	159,380.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							



**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization

NATIONAL SCLERODERMA FOUNDATION, INC.

Employer identification number

52-1375827

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

AWARENESS, AND PROVIDE SUPPORT AND EDUCATION TO PEOPLE WITH  
SCLERODERMA, THEIR FAMILIES AND SUPPORT NETWORKS.

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

IN-PERSON TO VIRTUAL COMMUNITY SUPPORT, ALLOWING FOR MEMBERS OF THE  
SCLERODERMA COMMUNITY TO CONNECT NO MATTER WHERE THEY WERE IN THE  
COUNTRY. THIS ALSO ALLOWED FOR THE CREATION OF MORE TARGETED, TOPICAL  
SUPPORT GROUPS SUCH AS ONE FOR MEN, WHICH MAKE UP JUST 20% OF THE  
POPULATION IMPACTED BY SCLERODERMA, AND BIPOC, AS WELL AS YOUNG ADULTS.

EDUCATION: THE FOUNDATION PROVIDES EDUCATION ABOUT HOW TO LIVE BETTER  
WITH SCLERODERMA FOR THOSE AFFECTED BY THE DISEASE, AS WELL AS THEIR  
CAREGIVERS, FAMILIES AND SUPPORT NETWORKS. THE FOUNDATION IS ALSO A CME  
AND CNE PROVIDER, EDUCATING HEALTHCARE PROVIDERS ABOUT SIGNS AND  
SYMPTOMS, TIMELY DIAGNOSIS, AND CUTTING-EDGE TREATMENTS AND THERAPIES.  
THE NATIONAL SCLERODERMA CONFERENCE ATTRACTS MORE THAN 500 PARTICIPANTS  
ANNUALLY. IN THE WAKE OF THE PANDEMIC, THE FOUNDATION PIVOTED FROM  
IN-PERSON TO VIRTUAL COMMUNITY SUPPORT, PROVIDING WORLD CLASS EDUCATION  
AND NETWORKING OPPORTUNITIES FOR THE COMMUNITY VIA A NATIONAL WEBINAR  
SERIES THAT WAS, FOR THE FIRST TIME, OFFERED VIRTUALLY. THE WEBINARS  
OFFERED EDUCATION AND NETWORKING OPPORTUNITIES FOR PEOPLE LIVING WITH  
SCLERODERMA, CAREGIVERS, FAMILY MEMBERS AND FRIENDS. IT ALSO WAS AN  
EXCELLENT RESOURCE FOR PHYSICIANS AND OTHER HEALTHCARE PROFESSIONALS,  
WHO ALSO NEED COMPREHENSIVE INFORMATION ABOUT THE DISEASE.

Name of the organization

NATIONAL SCLERODERMA FOUNDATION, INC.

Employer identification number

52-1375827

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

REVIEWED RESEARCH GRANTS PROGRAM PRIORITIZES SCIENTIFIC MERIT AND IS ADMINISTERED BY THE FOUNDATION'S RESEARCH COMMITTEE. THIS COMMITTEE, COMPOSED OF SCLERODERMA EXPERTS FROM ACROSS THE COUNTRY, MAKES FUNDING RECOMMENDATIONS TO THE BOARD OF DIRECTORS ANNUALLY AFTER A RIGOROUS PEER REVIEW PROCESS.

EACH GRANT APPLICATION CONTAINS VERY SPECIFIC ELIGIBILITY AND REVIEW CRITERIA. DETAILS REGARDING THESE REQUIREMENTS ARE AVAILABLE AT WWW.SCLERODERMA.ORG. ALL APPLICATIONS UNDERGO RIGOROUS PEER REVIEW BY HIGHLY RESPECTED SCIENTIFIC EXPERTS IN THE FIELD. ONLY PROJECTS OF SIGNIFICANT SCIENTIFIC MERIT ARE RECOMMENDED FOR FUNDING. PEER REVIEW RANKINGS ARE SENT TO THE FOUNDATION'S RESEARCH COMMITTEE FOR QUALIFICATION BEFORE BEING PRESENTED TO THE FOUNDATION BOARD OF DIRECTORS FOR FINAL APPROVAL AND FUNDING. AFTER THE AWARDS ARE MADE, ALL RECIPIENTS ARE REQUIRED TO COMPLETE FUNDING CONTRACTS WITH INSTITUTIONAL SIGN-OFF AND MUST ALSO SUBMIT ANNUAL REPORTS ON THEIR PROGRESS. ALL REPORTS ARE REVIEWED BY THE FOUNDATION'S RESEARCH COMMITTEE TO ENSURE COMPLIANCE WITH PROGRAMMATIC, SCIENTIFIC, AND FISCAL AND ADMINISTRATIVE POLICES AND REQUIREMENTS.

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

PRIOR TO FILING, THE FORM 990 IS GIVEN TO ALL BOARD MEMBERS FOR REVIEW. ANY QUESTIONS ARE ANSWERED BY EITHER MANGEMENT OF THE ORGANIZATION OR THE INDEPENDENT AUDITOR.

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

ALL MEMBERS OF THE BOARD OF DIRECTORS SUBMIT ANNUAL DISCLOSURE STATEMENTS,

Name of the organization NATIONAL SCLERODERMA FOUNDATION, INC.	Employer identification number 52-1375827
-------------------------------------------------------------------	----------------------------------------------

WHICH ARE THEN REVIEWED BY THE COMMITTEE ON CORPORATE GOVERNANCE AND NOMINATIONS AND FILED WITH LEGAL COUNSEL. ANY MEMBER WHO GIVES NOTICE OF POTENTIAL CONFLICT IS ADVISED TO ABSTAIN FROM PARTICIPATING IN ANY ITEM OF BUSINESS RELATED TO THAT CONFLICT(S) WHICH MAY COME BEFORE THE BOARD.

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

THE BOARD OF DIRECTORS OF THE ORGANIZATION VOTES AND APPROVES THE COMPENSATION OF THE CHIEF EXECUTIVE OFFICER (CEO).

THE CEO ESTABLISHES THE COMPENSATION FOR ALL OTHER EMPLOYEES OF THE ORGANIZATION.

NO BOARD MEMBERS ARE COMPENSATED.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH  
OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI, NV

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

THE ORGANIZATION'S FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE ORGANIZATION'S WEBSITE.

FORM 990, PART X, COLUMN A, LINE 27 AND LINE 28

PRIOR YEAR NET ASSETS WITHOUT DONOR RESTRICTIONS WERE RESTATED FOR THE YEAR ENDING JUNE 30, 2022 FROM \$9,600,665 TO \$9,261,793. PRIOR YEAR

Name of the organization

NATIONAL SCLERODERMA FOUNDATION, INC.

Employer identification number

52-1375827

NET ASSETS WITH DONOR RESTRICTIONS WERE RESTATED FOR THE YEAR ENDING  
JUNE 30, 2022 FROM \$1,798,025 TO \$2,136,897.

FORM 990, PART XII, LINE 2C:

THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR  
OVERSIGHT FOR THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN  
INDEPENDENT ACCOUNTANT. THIS PROCESS HAS NOT CHANGED DURING THE YEAR.



# TAX RETURN FILING INSTRUCTIONS

MASSACHUSETTS FORM PC

**FOR THE YEAR ENDING**

June 30, 2022

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**Prepared For:**

National Scleroderma Foundation, Inc.  
300 Rosewood Drive 105  
Danvers, MA 01923

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**Prepared By:**

Baker Tilly US, LLP  
1 Highwood Drive  
Tewksbury, MA 01876

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**Amount of Tax:**

Balance due of \$500

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**Make Check Payable To:**

Not applicable

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**Mail Tax Return To:**

Non-Profit Org/Public Charities Div  
Office of the Attorney General  
One Ashburton Place  
Boston, MA 02108

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**Return Must Be Mailed On Or Before:**

May 15, 2023

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**Special Instructions:**

The report should be signed and dated by an authorized individual(s).

Payment for the balance due must be made electronically via the Commonwealth of Massachusetts website at:

<https://www.paybill.com/maagocharities>

All the necessary attachments should be included with Form PC before filing.

Office Use Only: Fiscal Year

THE COMMONWEALTH OF MASSACHUSETTS
OFFICE OF THE ATTORNEY GENERAL
NON-PROFIT ORGANIZATIONS/PUBLIC CHARITIES DIVISION
ONE ASHBURTON PLACE
BOSTON, MASSACHUSETTS 02108

(617) 727-2200, ext. 2101
www.mass.gov/ago/charities

Form PC

Report for the Fiscal Period: 07/01/21 to 06/30/22

AG Account #: 031283 Federal ID #: 52-1375827

Electronic Payment Confirmation #: 348006
Attach printout of electronic payment confirmation.

Electronic Payment Date: 12/14/2022

When did the organization first engage in charitable work in Massachusetts? 04/16/1993

Has the organization applied for or been granted IRS tax exempt status? [X] Yes [ ] No

If yes, date of application OR date of determination letter: 08/15/2001

IRS Exemption under 501(c): 3

If exempt under 501(c), are contributions to the organization tax deductible as charitable contributions? [X] Yes [ ] No

Check all items attached (if applicable)
[X] Filing Fee or Printout of Electronic Payment Confirmation
[X] Copy of IRS Return
[X] Audited Financial Statements/Review
[ ] Amended Articles/By-Laws
[X] Schedule A-1
[X] Schedule A-2
[X] Schedule RO
[ ] Schedule VCO
[ ] Probate Account

Organization Data

Name: NATIONAL SCLERODERMA FOUNDATION, INC.

Mailing Address: 300 ROSEWOOD DRIVE, 105

City: DANVERS State: MA ZIP: 01923

Phone Number: 800-722-4673 Fax Number: 978-463-5809

Email: MWHEATLEY@SCLERODERMA.ORG Website: WWW.SCLERODERMA.ORG

In the table below, please enter the appropriate codes from the corresponding tables found in the instructions. Enter up to 2 codes from Table 3 for your organization's main purpose(s)

Table with 4 columns: Category, Code, Category, Code. Rows include County (Table 1) with code 5, and Type of Organization (Table 2) with code 5. Organization Purpose Code 1 is 21, and Organization Purpose Code 2 is 59.

Please check box if final return prior to dissolution: [ ]

Office Use Only: Payment Received

All questions must be completed in their entirety whether or not similar questions are answered in an attached federal form. See instructions and definition section for guidance.

- On what date was the organization created? 04/16/1993
- Where was the organization created? ILLINOIS
- What is the form of organization? (check one)

Corporation <input checked="" type="checkbox"/>	Testamentary Trust <input type="checkbox"/>
Unincorporated Association <input type="checkbox"/>	Inter Vivos Trust <input type="checkbox"/>

Other (please describe): \_\_\_\_\_

- Was your organization related to any other organization(s) during the reporting year (see definition "Related Organization")? *If yes, please complete the Schedule RO on pages 13 and 14.*  Yes  No

5. Enter your summary of financial data:

Financial Data		Amounts
A.	Contributions, gifts, grants, and similar amounts received	4,462,430.
B.	Gross support and revenue	4,637,861.
C.	Program services and similar amounts paid out	4,821,708.
D.	Fundraising expenses	552,920.
E.	Management and general expenses	836,084.
F.	Payments to affiliates	0.
G.	Total expenses	6,210,712.
H.	Net assets or fund balances at the end of the year	8,549,621.

6. List the total compensation you provided to your five highest paid employees:

	Name/Title	Hrs/Week	Salary and Other Income	Benefit Plans	Other Compensation
1.	MICHAEL B. HYDE COO/CFO	40.00	129,165.	30,215.	0.
2.	MARY J. WHEATLEY CEO	40.00	101,145.	6,900.	0.
3.	JESSICA ROSE HAAS GREUS SR. DIRECTOR, EXTERNAL RELATIONS	40.00	98,162.	21,123.	0.
4.	KERRI CONNOLLY NAT. DIRECTOR OF PROGRAMS & SERV	40.00	97,177.	12,595.	0.
5.	ROBERT J. RIGGS CEO	40.00	83,028.	11,947.	0.

- Was any compensation provided to any of the individuals listed in question 6 above which was not quantified in your response to 6? *If yes, please provide explanation (attach separate sheet).*  Yes  No

8. List the name, amount of compensation paid, and the nature of services rendered by each of the organization's five highest paid consultants providing professional services (e.g. attorneys, architects, accountants, management companies, investment advisors, professional solicitors, professional fundraising counsel).

	Name/Title	Amount of Compensation	Type(s) of Service
1.	BLACKBAUD, INC.	185,025.	WEBSITE SUPPORT
2.	MARKSTEIN CONSULTING, LLC	123,085.	STRATEGY & COMMUNICATIONS
3.	CATHEXIS PARTNERS LLC	76,204.	LUMINATE SUPPORT
4.	ROBERT HALF	58,562.	TEMPORARY STAFFING SERVICES
5.	BROGAN & PARTNERS	51,345.	EVENT AND EDUCATION

9. Bank(s) in which the organization's funds are deposited (include bank addresses and phone number) :

Bank	Address	Phone Number
THE HUNTINGTON NAT BANK	PO BOX 1558, COLUMBUS, OH 43216	216-515-0260
BANK OF AMERICA	P.O. BOX 15284, WILMINGTON, DE 19850	888-400-9009

10. What is the organization's accounting method?  Cash  Accrual

Other (specify): \_\_\_\_\_

11. If organization's mailing address is a P.O. Box, list the organization's full street address:

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

12. Contact Person Name: MARY J. WHEATLEY, IOM, CAE

Street Address: 300 ROSEWOOD DRIVE, SUITE 105

City: DANVERS State: MA ZIP Code: 01923

Phone Number: 800-722-4673

13. During the fiscal year reported here, did your organization solicit contributions or have funds solicited on its behalf?  Yes  No

14. At any time during the fiscal year following the year reported here, will your organization, or others acting on its behalf, solicit contributions?  Yes  No

*If you answered yes to Question 13 or 14, you must complete Schedule A-1 and/or Schedule A-2 unless you are exempt from the solicitation certificate requirement.*

15. If you are claiming an exemption from the solicitation certificate requirement, please indicate by checking the box to the right to identify which exemption applies to your organization.

a religious organization <input type="checkbox"/>
an organization which: (a) does not raise more than \$5,000 during a calendar year OR does not receive contributions from more than ten persons during a calendar year; AND (b) carries out all of its activities, including fundraising, through unpaid volunteers. <i>(The conditions at both (a) and (b) must be met for your organization to qualify for this exemption.)</i> <input type="checkbox"/>

16. Attach a list of names, addresses (street and/or mailing), and telephone numbers of other offices/chapters/branches/affiliates.

**STATEMENT 1**

17. Attach a list of names, titles, and addresses (street and/or mailing) of officers, directors, trustees, and the principal salaried executives of organization.

**STATEMENT 2**

18. Attach a list of names, titles, and addresses (street and/or mailing) of any individual(s) authorized to sign checks, and any individual(s) responsible for: custody of funds; distribution of funds; fundraising; and custody of financial records.

**STATEMENT 3**

19. Has this organization or any of its officers, directors, employees or fundraisers solicited funds in any other state?  Yes  No

**STATEMENT 4**

*If yes attach list of states where solicitation was conducted, including registered agency, dates of registration, registration numbers, any other names under which the organization was/is registered, and the dates and type (mail, telephone, door to door, special events, etc.) of the solicitation conducted.*

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FORM PC	NAME, ADDRESS, PHONE OF OTHER OFFICES	STATEMENT 1
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<u>NAME AND ADDRESS</u>	<u>PHONE NUMBER</u>
ROCKY MOUNTAIN CHAPTER 5403 E EVANS AVE. DENVER, CO 80222	303-806-6686
DELAWARE VALLEY CHAPTER 385 KINGS HIGHWAY NORTH CHERRY HILL, NJ 08034	856-779-7225
GEORGIA CHAPTER PO BOX 522 LILBURN, GA 30048	770-925-7037
GREATER CHICAGO CHAPTER 125 S. CLARK STREET, 17TH FL CHICAGO, IL 60603	312-660-1131
GREATER WASHINGTON DC CHAPTER 5004 DOMAIN PLACE ALEXANDRIA, VA 22311	301-591-4136
HEARTLAND CHAPTER PO BOX 102 GRIMES, IA 50111	515-661-8089
MICHIGAN CHAPTER 23999 TELEGRAPH RD SOUTHFIELD, MI 48033	248-595-8526
MINNESOTA CHAPTER PO BOX 240244 APPLE VALLEY, MN 55124	651-207-4615
MISSOURI CHAPTER PO BOX 1216 BALLWIN, MO 63022	417-887-3269
NEW ENGLAND CHAPTER 462 BOSTON STREET, SUITE 1-1 TOPSFIELD, MA 01983	978-887-0658
OHIO CHAPTER PO BOX 107 PATASKALA, OH 43062	866-849-9030

OREGON CHAPTER 503-245-4588  
 PO BOX 19296  
 PORTLAND, OR 97280

SOUTHERN CALIFORNIA CHAPTER 310-287-0793  
 8929 S. SEPULVEDA BLVD., SUI  
 LOS ANGELES, CA 90045

SOUTH CAROLINA CHAPTER 864-617-0237  
 713D E. GREENVILLE STREET, B  
 ANDERSON, SC 29621

SOUTH EAST FLORIDA CHAPTER 954-798-1854  
 3930 OAKS CLUBHOUSE DRIVE, A  
 POMPANO BEACH, FL 33069

TEXAS BLUEBONNET CHAPTER 972-396-9400  
 110 CYPRESS STATION DR., STE  
 HOUSTON, TX 77090

TRI-STATE CHAPTER 800-867-0885  
 59 FRONT STREET  
 BINGHAMTON, NY 13905

NORTHWEST CHAPTER 800-603-8960  
 330 SW 43RD AVE., STE K531  
 RENTON, WA 98057

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FORM PC                      OFFICERS, DIRECTORS, TRUSTEES AND EXECUTIVES                      STATEMENT 2

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<u>NAME AND ADDRESS</u>	<u>TITLE</u>
MICHAEL B. HYDE 300 ROSEWOOD DRIVE, 105 DANVERS, MA 01923	COO/CFO
MARY J. WHEATLEY 300 ROSEWOOD DRIVE, 105 DANVERS, MA 01923	CEO (SINCE JULY 1, 2021)
ROBERT J. RIGGS 300 ROSEWOOD DRIVE, 105 DANVERS, MA 01923	CEO (UNTIL DEC 2021)

KEVIN BOYANOWSKI  
300 ROSEWOOD DRIVE, 105  
DANVERS, MA 01923

DIRECTOR

COURTNEY CALIENDO  
300 ROSEWOOD DRIVE, 105  
DANVERS, MA 01923

DIRECTOR

CHRISTINA LOCCKE  
300 ROSEWOOD DRIVE, 105  
DANVERS, MA 01923

DIRECTOR

MARY BLADES  
300 ROSEWOOD DRIVE, 105  
DANVERS, MA 01923

DIRECTOR

JEANNE THEISSEN  
300 ROSEWOOD DRIVE, 105  
DANVERS, MA 01923

DIRECTOR (SINCE JUL 2021)

MARK OROZCO  
300 ROSEWOOD DRIVE, 105  
DANVERS, MA 01923

DIRECTOR

LINDA BAUM  
300 ROSEWOOD DRIVE, 105  
DANVERS, MA 01923

DIRECTOR

MARCIA WALKER  
300 ROSEWOOD DRIVE, 105  
DANVERS, MA 01923

DIRECTOR

COS MALLOZZI  
300 ROSEWOOD DRIVE, 105  
DANVERS, MA 01923

CHAIR

CAROL FEGHALI-BOSTWICK, PH.D.  
300 ROSEWOOD DRIVE, 105  
DANVERS, MA 01923

VICE CHAIR

MIKE LEVENGOOD  
300 ROSEWOOD DRIVE, 105  
DANVERS, MA 01923

SECRETARY

CYNDY BESSELIEVRE  
300 ROSEWOOD DRIVE, 105  
DANVERS, MA 01923

TREASURER (SINCE JUL 2021)



GREG MARION  
300 ROSEWOOD DRIVE, 105  
DANVERS, MA 01923

TREASURER (UNTIL JUL 2021)

FORM PC

PAGE 4, LINE 18

STATEMENT 3

NAME AND ADDRESS

AREA OF RESPONSIBILITY

MARY J. WHEATLEY  
300 ROSEWOOD DRIVE  
DANVERS, MA 01923

RESPONSIBLE FOR CUSTODY OF FUNDS

MARY J. WHEATLEY  
300 ROSEWOOD DRIVE  
DANVERS, MA 01923

RESPONSIBLE FOR DISTRIBUTION OF FUNDS

MARY J. WHEATLEY  
300 ROSEWOOD DRIVE  
DANVERS, MA 01923

RESPONSIBLE FOR FUNDRAISING

MARY J. WHEATLEY  
300 ROSEWOOD DRIVE  
DANVERS, MA 01923

CUSTODY OF FINANCIAL RECORDS

MARY J. WHEATLEY  
300 ROSEWOOD DRIVE  
DANVERS, MA 01923

AUTHORIZED TO SIGN CHECKS

MICHAEL B. HYDE  
300 ROSEWOOD DRIVE  
DANVERS, MA 01923

RESPONSIBLE FOR DISTRIBUTION OF FUNDS

STATE REG AGENCY

ALABAMA

DATE OF REG REG NUMBER OTHER NAMES USED

AL00-323

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY

ALASKA

DATE OF REG REG NUMBER OTHER NAMES USED

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY

ARKANSAS

DATE OF REG REG NUMBER OTHER NAMES USED

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY

CALIFORNIA

DATE OF REG REG NUMBER OTHER NAMES USED

CT-113493

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
COLORADO  
DATE OF REG REG NUMBER OTHER NAMES USED  
2008300426  
SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
CONNECTICUT  
DATE OF REG REG NUMBER OTHER NAMES USED  
0009822  
SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
FLORIDA  
DATE OF REG REG NUMBER OTHER NAMES USED  
CH4868  
SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
GEORGIA  
DATE OF REG REG NUMBER OTHER NAMES USED  
CH004232  
SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
HAWAII

DATE OF REG REG NUMBER OTHER NAMES USED

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
ILLINOIS

DATE OF REG REG NUMBER OTHER NAMES USED

01-037-589

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
KANSAS

DATE OF REG REG NUMBER OTHER NAMES USED

21-022807

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
KENTUCKY

DATE OF REG REG NUMBER OTHER NAMES USED

2961

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
MAINE  
DATE OF REG REG NUMBER OTHER NAMES USED  
CO3303  
SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
MARYLAND  
DATE OF REG REG NUMBER OTHER NAMES USED  
11857  
SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
MICHIGAN  
DATE OF REG REG NUMBER OTHER NAMES USED  
MICS24447  
SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
MINNESOTA  
DATE OF REG REG NUMBER OTHER NAMES USED  
SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
MISSISSIPPI  
DATE OF REG REG NUMBER OTHER NAMES USED  
100001130  
SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
NEVADA  
DATE OF REG REG NUMBER OTHER NAMES USED  
E016115201  
SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
NEW HAMPSHIRE  
DATE OF REG REG NUMBER OTHER NAMES USED  
12158  
SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
NEW JERSEY  
DATE OF REG REG NUMBER OTHER NAMES USED  
CH-18394-0  
SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
NEW MEXICO

DATE OF REG REG NUMBER OTHER NAMES USED

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
NEW YORK

DATE OF REG REG NUMBER OTHER NAMES USED

17-12-92

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
NORTH CAROLINA

DATE OF REG REG NUMBER OTHER NAMES USED

SL002132

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
NORTH DAKOTA

DATE OF REG REG NUMBER OTHER NAMES USED

4012365

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY

OHIO

DATE OF REG REG NUMBER OTHER NAMES USED

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY

OKLAHOMA

DATE OF REG REG NUMBER OTHER NAMES USED

4300653600

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY

OREGON

DATE OF REG REG NUMBER OTHER NAMES USED

29100

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY

PENNSYLVANIA

DATE OF REG REG NUMBER OTHER NAMES USED

26365

SOLICIT DATE TYPE OF SOLICITATION



STATE REG AGENCY  
RHODE ISLAND  
DATE OF REG REG NUMBER OTHER NAMES USED  
9701164  
SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
SOUTH CAROLINA  
DATE OF REG REG NUMBER OTHER NAMES USED  
P8561  
SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
TENNESSEE  
DATE OF REG REG NUMBER OTHER NAMES USED  
CO4025  
SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
UTAH  
DATE OF REG REG NUMBER OTHER NAMES USED  
6535408  
SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
VIRGINIA

DATE OF REG REG NUMBER OTHER NAMES USED

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
WASHINGTON

DATE OF REG REG NUMBER OTHER NAMES USED

1108736

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
WEST VIRGINIA

DATE OF REG REG NUMBER OTHER NAMES USED

2244

SOLICIT DATE TYPE OF SOLICITATION

STATE REG AGENCY  
WISCONSIN

DATE OF REG REG NUMBER OTHER NAMES USED

7136-800

SOLICIT DATE TYPE OF SOLICITATION

20. Has this organization or any of its officers, directors, or employees:

*If yes, please attach an explanation.*

- (a) Been enjoined or otherwise prohibited by a government agency/court from operating or soliciting contributions?  Yes  No
- (b) Ever been refused registration or had its registration or tax exemption denied, suspended, modified or revoked by a governmental agency?  Yes  No
- (c) Been the subject of a proceeding regarding any solicitation or registration?  Yes  No
- (d) Entered into a voluntary agreement of compliance or consent judgment with, any government agency or in a case before a court or administrative agency?  Yes  No

21. Have any restrictions been removed during the year from donor-restricted funds?

*If yes, please attach an explanation.*

Yes  No

22. Have donor-restricted funds been loaned to unrestricted funds?

*If yes, please attach an explanation.*

Yes  No

23. This question involves "Termination of Employment or Changes of Control Compensatory Arrangements" with certain "Related Parties" (see *instructions and definition sections*). Report only if payments made or promised to any individual are in excess of four months salary or \$100,000, whichever dollar amount is less.

- (a) Did you make actual payments or otherwise transfer value under such an arrangement to any individual described in Related Party definition, sections (a) or (b), which payments are not reported in Question 6 or 7 above?  Yes  No
- (b) Do you have an agreement with any individual described in Related Party definition, sections (a) or (b), containing such an agreement?  Yes  No

*If you answered yes for Question 23(a) or 23(b) above, please attach an explanation identifying the individual(s) involved, stating the amount of any payments made or value transferred, and describing the terms of each agreement.*

24. This question applies to related party transactions, which include transactions with officers, directors, trustees, certain employees, relative, and organizations they own or control. Please consult the instructions and definition sections for the definition of a "Related Party" and "Indebtedness" before answering. Note that transactions involving related parties must be reported even when there is no accounting recognition (e.g. in-kind gifts, waiver or interest not otherwise reported).

*If the answer to any part of Question 24 is yes, attach a schedule stating the name and address of the related party, the nature of the transaction, the value or the amounts involved in the transaction, and the procedure followed in authorizing the transaction.*

During the year:		
A.	Has your organization sold or transferred assets to or purchased assets from or exchanged assets with a related party?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
B.	Has your organization leased assets to or leased assets from a related party?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
C.	Has your organization been indebted to a related party?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
D.	Has your organization allowed a related party to be indebted to it?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
E.	Has your organization made or held an investment in a related party?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
F.	Has your organization furnished goods, services, or facilities to a related party?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
G.	Has your organization acquired goods, services, or facilities from a related party who received compensation or other value in return?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
H.	Has your organization paid or became obligated to pay wages, salary, or other compensation to a related party?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
I.	Has your organization transferred income or assets to or for use by a related party?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
J.	Was your organization a party to any transaction in which any of its officers, directors, or trustees has a material financial interest, or did any officer, director or trustee receive anything of value not reported as compensation?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
K.	Has your organization invested in any corporate stock of a company in which any officer, director, or trustee owns more than 10% of the outstanding shares?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
L.	Is any property of the organization held in the name of or commingled with the property of any other person or organization?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
M.	Did your organization make a grant award or contribution to any other organization in which any of this organization's officers, directors or trustees has a relationship?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Signature Required**

**Under penalty of perjury, I declare that the information furnished in this report, including all attachments, is true and correct to the best of my knowledge.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: MARY J. WHEATLEY, IOM, CAE

Title: CHIEF EXECUTIVE OFFICER

Name of Preparer: BAKER TILLY US, LLP

Address 1 HIGHWOOD DRIVE

City TEWKSBURY State MA ZIP Code 01876

Phone Number 978.557.5300

Schedule A-1

Solicitation Activities During Fiscal Year Covered By This Report

List any names which will be used by the organization in connection with the solicitation of funds, other than the official name which appears on page 1.

---



---

Types of solicitation activities in which you expect to engage (check all that apply):

Mass Mailing	<input checked="" type="checkbox"/>	Via the Internet	<input checked="" type="checkbox"/>
Door-to-door	<input type="checkbox"/>	Raffle, beano, bingo or gaming event	<input type="checkbox"/>
Entertainment event	<input type="checkbox"/>	Sale of goods other than by telephone	<input type="checkbox"/>
Telemarketing without sale of goods or ads	<input type="checkbox"/>	Individual Mailings	<input checked="" type="checkbox"/>
Telemarketing with sale of goods	<input type="checkbox"/>	Corporate solicitations	<input checked="" type="checkbox"/>
Telemarketing with sale of ads	<input type="checkbox"/>	Grant Proposals	<input checked="" type="checkbox"/>

Other (specify): \_\_\_\_\_

Identify the method or methods you expect to use for the fundraising (check all that apply):

Professional solicitor*	<input type="checkbox"/>	Own employees	<input checked="" type="checkbox"/>
Professional fundraising counsel*	<input type="checkbox"/>	Volunteers	<input checked="" type="checkbox"/>
Commercial co-venturer*	<input type="checkbox"/>		

\* Provide applicable names and addresses:

Professional Solicitor Name: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Professional Fundraising Counsel Name: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Commercial Co-Venturer Name: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Schedule A-1 ctd.

Solicitation Activities During Fiscal Year Covered By This Report

Identify the individuals who will have final responsibility for the charity's custody of contributions:

MARY J. WHEATLEY, IOM, CAE

Name and Title: CHIEF EXECUTIVE OFFICER

Address 300 ROSEWOOD DRIVE, SUITE 105

City DANVERS

State MA

ZIP Code 01923

Name and Title:

Address

City

State

ZIP Code

Name and Title:

Address

City

State

ZIP Code

Identify the individuals who will have final responsibility for the charity's distribution of contributions:

Name and Title:

Address

City

State

ZIP Code

MARY J. WHEATLEY, IOM, CAE

Name and Title: CHIEF EXECUTIVE OFFICER

Address 300 ROSEWOOD DRIVE, SUITE 105

City DANVERS

State MA

ZIP Code 01923

Name and Title:

Address

City

State

ZIP Code

**Schedule A-2**

**Solicitation Activities Planned for Fiscal Year Which Follows the Reporting Year**

List any names which will be used by the organization in connection with the solicitation of funds, other than the official name which appears on page 1.

---



---

Types of solicitation activities in which you expect to engage (check all that apply):

Mass Mailing	<input checked="" type="checkbox"/>	Via the Internet	<input checked="" type="checkbox"/>
Door-to-door	<input type="checkbox"/>	Raffle, beano, bingo or gaming event	<input type="checkbox"/>
Entertainment event	<input type="checkbox"/>	Sale of goods other than by telephone	<input type="checkbox"/>
Telemarketing without sale of goods or ads	<input type="checkbox"/>	Individual Mailings	<input checked="" type="checkbox"/>
Telemarketing with sale of goods	<input type="checkbox"/>	Corporate solicitations	<input checked="" type="checkbox"/>
Telemarketing with sale of ads	<input type="checkbox"/>	Grant Proposals	<input checked="" type="checkbox"/>

Other (specify): \_\_\_\_\_

Identify the method or methods you expect to use for the fundraising (check all that apply):

Professional solicitor*	<input type="checkbox"/>	Own employees	<input checked="" type="checkbox"/>
Professional fundraising counsel*	<input type="checkbox"/>	Volunteers	<input checked="" type="checkbox"/>
Commercial co-venturer*	<input type="checkbox"/>		

\* Provide applicable names and addresses:

Professional Solicitor Name: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Professional Fundraising Counsel Name: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Commercial Co-Venturer Name: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_



Schedule A-2 ctd.

Solicitation Activities Planned for Fiscal Year Which Follows the Reporting Year

Identify the individuals who will have final responsibility for the charity's custody of contributions:

MARY J. WHEATLEY, IOM, CAE

Name and Title: CHIEF EXECUTIVE OFFICER

Address 300 ROSEWOOD DRIVE, SUITE 105

City DANVERS

State MA

ZIP Code 01923

Name and Title:

Address

City

State

ZIP Code

Name and Title:

Address

City

State

ZIP Code

Identify the individuals who will have final responsibility for the charity's distribution of contributions:

MARY J. WHEATLEY, IOM, CAE

Name and Title: CHIEF EXECUTIVE OFFICER

Address 300 ROSEWOOD DRIVE, SUITE 105

City DANVERS

State MA

ZIP Code 01923

Name and Title:

Address

City

State

ZIP Code

Name and Title:

Address

City

State

ZIP Code

### Certification by Organization

Two *different signatures* required. Signers must be organization president or other authorized officer or trustee.

**Under penalty of perjury, we declare that the information furnished in this report, including all attachments, is true and correct to the best of our knowledge.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: MARY J. WHEATLEY, IOM, CAE

Title: CHIEF EXECUTIVE OFFICER

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

## Schedule RO

1. Please read the instructions and definition of "Related Organization" carefully before completing this section. ( If you have more than five Related Organizations, please attach a list.)

<b>SCLERODERMA FDN, GREATER</b>		Primary purpose or activity: <b>AFFILIATE CHAPTER</b>		
Name: <b>WASHINGTON DC</b>				
FYE	A. Donor restricted funds (-) liabilities	B. 3rd party restricted funds (-) liabilities	C. Unrestricted funds (-) liabilities	D. Total net assets (A+B+C)
12/31/20			344,316.	344,316.

<b>SCLERODERMA FDN, MN</b>		Primary purpose or activity: <b>AFFILIATE CHAPTER</b>		
Name: <b>CHAPTER</b>				
FYE	A. Donor restricted funds (-) liabilities	B. 3rd party restricted funds (-) liabilities	C. Unrestricted funds (-) liabilities	D. Total net assets (A+B+C)
12/31/21			127,117.	127,117.

<b>SCLERODERMA FDN, SO.</b>		Primary purpose or activity: <b>AFFILIATE CHAPTER</b>		
Name: <b>CALIFORNIA CHAPTER</b>				
FYE	A. Donor restricted funds (-) liabilities	B. 3rd party restricted funds (-) liabilities	C. Unrestricted funds (-) liabilities	D. Total net assets (A+B+C)
12/31/20			320,876.	320,876.

<b>SCLERODERMA FDN, DELAWARE</b>		Primary purpose or activity: <b>AFFILIATE CHAPTER</b>		
Name: <b>VALLEY</b>				
FYE	A. Donor restricted funds (-) liabilities	B. 3rd party restricted funds (-) liabilities	C. Unrestricted funds (-) liabilities	D. Total net assets (A+B+C)
06/30/22			299,740.	299,740.

<b>SCLERODERMA FOUNDATION,</b>		Primary purpose or activity: <b>AFFILIATE CHAPTER</b>		
Name: <b>GREATER CHICAGO CHAPTER</b>				
FYE	A. Donor restricted funds (-) liabilities	B. 3rd party restricted funds (-) liabilities	C. Unrestricted funds (-) liabilities	D. Total net assets (A+B+C)
12/31/20			3,233,768.	3,233,768.

**Schedule RO**

1. Please read the instructions and definition of "Related Organization" carefully before completing this section. ( If you have more than five Related Organizations, please attach a list.)

<b>SCLERODERMA FDN, NE</b>		Primary purpose or activity: <b>AFFILIATE CHAPTER</b>		
Name: <b>CHAPTER</b>				
FYE	A. Donor restricted funds (-) liabilities	B. 3rd party restricted funds (-) liabilities	C. Unrestricted funds (-) liabilities	D. Total net assets (A+B+C)
12/31/21	453,730.		437,830.	891,560.

<b>SCLERODERMA FDN, TRI-STATE</b>		Primary purpose or activity: <b>AFFILIATE CHAPTER</b>		
Name: <b>CHAPTER</b>				
FYE	A. Donor restricted funds (-) liabilities	B. 3rd party restricted funds (-) liabilities	C. Unrestricted funds (-) liabilities	D. Total net assets (A+B+C)
12/31/21			971,688.	971,688.

Name:		Primary purpose or activity:		
FYE	A. Donor restricted funds (-) liabilities	B. 3rd party restricted funds (-) liabilities	C. Unrestricted funds (-) liabilities	D. Total net assets (A+B+C)

Name:		Primary purpose or activity:		
FYE	A. Donor restricted funds (-) liabilities	B. 3rd party restricted funds (-) liabilities	C. Unrestricted funds (-) liabilities	D. Total net assets (A+B+C)

Name:		Primary purpose or activity:		
FYE	A. Donor restricted funds (-) liabilities	B. 3rd party restricted funds (-) liabilities	C. Unrestricted funds (-) liabilities	D. Total net assets (A+B+C)

**Schedule RO ctd.**

2. List the total compensation paid by your organization and/or any other related organization to your chief executive (e.g., executive director) and to the four other current or former directors, trustees, officers, or employees within the system of related organizations identified at question 1, on page 13, receiving the highest aggregate compensation ( *see instructions*). Use additional lines below to itemize by compensation source.

Name: <b>MICHAEL B. HYDE</b>		Title: <b>COO/CFO</b>	
Income Source:	Salary and Other Income:	Benefits Plan:	Other Compensation
<b>NAT SCLERODERMA FDN</b>	<b>129,165.</b>	<b>30,215.</b>	

Name: <b>MARY J. WHEATLEY</b>		Title: <b>CEO</b>	
Income Source:	Salary and Other Income:	Benefits Plan:	Other Compensation
<b>NAT SCLERODERMA FDN</b>	<b>101,145.</b>	<b>6,900.</b>	

Name: <b>JESSICA ROSE HAAS GREUS</b>		Title: <b>SR. DIRECTOR, EXTERNAL RELATIONS</b>	
Income Source:	Salary and Other Income:	Benefits Plan:	Other Compensation
<b>NAT SCLERODERMA FDN</b>	<b>98,162.</b>	<b>21,123.</b>	

Name: <b>KERRI CONNOLLY</b>		Title: <b>NAT. DIRECTOR OF PROGRAMS &amp; SERVIC</b>	
Income Source:	Salary and Other Income:	Benefits Plan:	Other Compensation
<b>NAT SCLERODERMA FDN</b>	<b>97,177.</b>	<b>12,595.</b>	

Name: <b>ROBERT J. RIGGS</b>		Title: <b>CEO</b>	
Income Source:	Salary and Other Income:	Benefits Plan:	Other Compensation
<b>NAT SCLERODERMA FDN</b>	<b>83,028.</b>	<b>11,947.</b>	

3. Is asset and/or compensation information for religious organizations and/or certain non-charitable entities related to foundations excluded pursuant to instructions?  Yes  No

**National Scleroderma Foundation,  
Inc. f/k/a Scleroderma Foundation, Inc.**

Financial Statements

June 30, 2022 and 2021

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<b>Independent Auditors' Report</b>	1
<b>Financial Statements</b>	
Statements of Financial Position	3
Statements of Activities	4
Statements of Functional Expenses	5
Statements of Cash Flows	7
Notes to Financial Statements	8



## Independent Auditors' Report

To the Board of Directors  
National Scleroderma Foundation, Inc. f/k/a Scleroderma Foundation, Inc.

### ***Opinion***

We have audited the accompanying financial statements of National Scleroderma Foundation, Inc. f/k/a Scleroderma Foundation, Inc. (the Organization), which comprise the statements of financial position as of June 30, 2022 and 2021, and the related statements of activities, functional expenses and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Organization as of June 30, 2022 and 2021, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

### ***Basis for Opinion***

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Organization and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### ***Responsibilities of Management for the Financial Statements***

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Organization's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.



***Auditors' Responsibilities for the Audit of the Financial Statements***

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Organization's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

*Baker Tilly US, LLP*

Baker Tilly US, LLP  
Tewksbury, Massachusetts  
November 28, 2022

**Statements of Financial Position**
**National Scleroderma Foundation, Inc.  
f/k/a Scleroderma Foundation, Inc.**

<b>June 30</b>	<b>2022</b>	<b>2021</b>
<b>Assets</b>		
Current Assets:		
Cash and Cash Equivalents	\$ 2,683,332	\$ 2,690,378
Contributions Receivable	635,411	406,750
Due from Affiliates	24,813	36,685
Prepaid Expenses and Other Current Assets	185,646	215,013
<b>Total Current Assets</b>	<b>3,529,202</b>	<b>3,348,826</b>
Investments	7,887,043	10,105,147
Property and Equipment, Net of Accumulated Depreciation	29,987	21,456
Security Deposits	16,842	16,842
<b>Total Assets</b>	<b>\$ 11,463,074</b>	<b>\$ 13,492,271</b>
<b>Liabilities and Net Assets</b>		
Current Liabilities:		
Accounts Payable	\$ 54,019	\$ 38,007
Accrued Expenses	154,656	197,299
Due to Affiliates	79,414	72,264
Current Portion of Grants Payable	1,504,167	925,000
Deferred Revenue	4,529	11,051
<b>Total Current Liabilities</b>	<b>1,796,785</b>	<b>1,243,621</b>
Long-Term Debt - Paycheck Protection Program	-	249,960
Grants Payable, Net of Current Portion	1,116,668	600,000
<b>Total Liabilities</b>	<b>2,913,453</b>	<b>2,093,581</b>
Net Assets:		
Net Assets without Donor Restrictions	6,893,709	9,261,793
Net Assets with Donor Restrictions	1,655,912	2,136,897
<b>Total Net Assets</b>	<b>8,549,621</b>	<b>11,398,690</b>
<b>Total Liabilities and Net Assets</b>	<b>\$ 11,463,074</b>	<b>\$ 13,492,271</b>

**Statements of Activities**
**National Scleroderma Foundation, Inc.  
f/k/a Scleroderma Foundation, Inc.**

For the Years Ended June 30	2022			2021		
	Without Donor Restrictions	With Donor Restrictions	Total	Without Donor Restrictions	With Donor Restrictions	Total
Operating Activities:						
Revenue and Other Support:						
Contributions	\$ 1,112,619	\$ 1,285,747	\$ 2,398,366	\$ 2,597,117	\$ 428,543	\$ 3,025,660
Bequests	1,140,911	-	1,140,911	366,941	-	366,941
Special Events, Net of Direct Benefit to Donor Costs of \$85,687 and \$78,598, Respectively	443,271	-	443,271	73,619	-	73,619
Voluntary Research Contributions	-	173,415	173,415	-	157,725	157,725
Investment Income Designated for Operations	-	69,985	69,985	-	70,865	70,865
Contributions Received from Affiliates	56,507	-	56,507	102,138	-	102,138
Returned Grant Awards	-	-	-	1,340	-	1,340
Net Assets Released from Restriction	1,784,797	(1,784,797)	-	689,990	(689,990)	-
<b>Total Revenue and Other Support</b>	<b>4,538,105</b>	<b>(255,650)</b>	<b>4,282,455</b>	<b>3,831,145</b>	<b>(32,857)</b>	<b>3,798,288</b>
Operating Expenses:						
Program Services:						
Education and Support	2,074,271	-	2,074,271	2,211,218	-	2,211,218
Research	2,747,437	-	2,747,437	1,267,085	-	1,267,085
<b>Total Program Services</b>	<b>4,821,708</b>	<b>-</b>	<b>4,821,708</b>	<b>3,478,303</b>	<b>-</b>	<b>3,478,303</b>
General and Administrative	810,881	-	810,881	712,305	-	712,305
Fundraising	552,920	-	552,920	226,115	-	226,115
<b>Total Operating Expenses</b>	<b>6,185,509</b>	<b>-</b>	<b>6,185,509</b>	<b>4,416,723</b>	<b>-</b>	<b>4,416,723</b>
<b>Decrease in Net Assets from Operations</b>	<b>(1,647,404)</b>	<b>(255,650)</b>	<b>(1,903,054)</b>	<b>(585,578)</b>	<b>(32,857)</b>	<b>(618,435)</b>
Nonoperating Activities:						
Investment (Loss) Income, Net	(970,640)	(155,350)	(1,125,990)	2,002,250	321,399	2,323,649
Gain on Extinguishment of Long-Term Debt - Paycheck Protection Program	249,960	-	249,960	249,962	-	249,962
Appropriation of Investment Income Designated for Operations	-	(69,985)	(69,985)	-	(70,865)	(70,865)
<b>Total Nonoperating Activities</b>	<b>(720,680)</b>	<b>(225,335)</b>	<b>(946,015)</b>	<b>2,252,212</b>	<b>250,534</b>	<b>2,502,746</b>
<b>(Decrease) Increase in Net Assets</b>	<b>(2,368,084)</b>	<b>(480,985)</b>	<b>(2,849,069)</b>	<b>1,666,634</b>	<b>217,677</b>	<b>1,884,311</b>
Net Assets, Beginning of Year	9,261,793	2,136,897	11,398,690	7,595,159	1,919,220	9,514,379
Net Assets, End of Year	<b>\$ 6,893,709</b>	<b>\$ 1,655,912</b>	<b>\$ 8,549,621</b>	<b>\$ 9,261,793</b>	<b>\$ 2,136,897</b>	<b>\$ 11,398,690</b>

The accompanying notes are an integral part of these financial statements.

Statements of Functional Expenses

National Scleroderma Foundation, Inc.  
f/k/a Scleroderma Foundation, Inc.

For the Year Ended June 30

2022

	Program Services			General and Administrative	Fundraising	Total
	Education and Support	Research	Total Program Services			
Research Grants	\$ -	\$ 2,425,000	\$ 2,425,000	\$ -	\$ -	\$ 2,425,000
Salaries and Related Expenses	1,291,161	36,384	1,327,545	524,828	159,824	2,012,197
Professional Fees	262,183	99,627	361,810	99,627	102,127	563,564
Information Technology	148,707	74,353	223,060	74,353	74,353	371,766
Occupancy and Office	77,716	38,342	116,058	38,342	38,342	192,742
Fees and Licenses	45,520	22,760	68,280	22,760	49,207	140,247
Meetings and Conferences	103,525	3,488	107,013	3,488	3,362	113,863
Printing and Copying	39,924	7,345	47,269	7,345	40,150	94,764
Special Event Expenses	-	-	-	-	85,687	85,687
Insurance	30,845	15,422	46,267	15,422	15,422	77,111
Travel	26,346	13,154	39,500	13,154	13,154	65,808
Postage and Delivery	20,646	2,949	23,595	2,949	33,054	59,598
Promotion	9,846	1,910	11,756	1,910	7,371	21,037
Telephone	7,126	3,563	10,689	3,563	3,563	17,815
Depreciation	6,281	3,140	9,421	3,140	3,140	15,701
Outreach	4,445	-	4,445	-	9,851	14,296
Grants to Affiliates	-	-	-	-	-	-
Total Expenses	2,074,271	2,747,437	4,821,708	810,881	638,607	6,271,196
Less: Expenses Included with Revenue on the Statements of Activities	-	-	-	-	85,687	85,687
	\$ 2,074,271	\$ 2,747,437	\$ 4,821,708	\$ 810,881	\$ 552,920	\$ 6,185,509

The accompanying notes are an integral part of these financial statements.

Statements of Functional Expenses  
(Continued)

National Scleroderma Foundation, Inc.  
f/k/a Scleroderma Foundation, Inc.

For the Year Ended June 30

2021

	Program Services			General and Administrative	Fundraising	Total
	Education and Support	Research	Total Program Services			
Research Grants	\$ -	\$ 1,216,546	\$ 1,216,546	\$ -	\$ -	\$ 1,216,546
Salaries and Related Expenses	982,948	27,699	1,010,647	399,546	121,673	1,531,866
Professional Fees	328,416	6,820	335,236	98,370	29,957	463,563
Information Technology	170,786	6,608	177,394	95,321	29,028	301,743
Occupancy and Office	121,485	2,664	124,149	38,414	11,698	174,261
Fees and Licenses	54,609	2,009	56,618	28,952	8,816	94,386
Meetings and Conferences	43,244	2,660	45,904	1,166	20	47,090
Printing and Copying	53,168	-	53,168	9,042	12,062	74,272
Special Event Expenses	-	-	-	-	78,598	78,598
Insurance	36,929	1,429	38,358	20,612	6,278	65,248
Travel	5,562	-	5,562	2,777	-	8,339
Postage and Delivery	10,667	-	10,667	6,525	3,720	20,912
Promotion	7,178	-	7,178	2,184	-	9,362
Telephone	18,955	420	19,375	6,066	1,847	27,288
Depreciation	7,898	230	8,128	3,330	1,016	12,474
Outreach	2,630	-	2,630	-	-	2,630
Grants to Affiliates	366,743	-	366,743	-	-	366,743
Total Expenses	2,211,218	1,267,085	3,478,303	712,305	304,713	4,495,321
Less: Expenses Included with Revenue on the Statements of Activities	-	-	-	-	78,598	78,598
	\$ 2,211,218	\$ 1,267,085	\$ 3,478,303	\$ 712,305	\$ 226,115	\$ 4,416,723

The accompanying notes are an integral part of these financial statements.

**Statements of Cash Flows**
**National Scleroderma Foundation, Inc.  
f/k/a Scleroderma Foundation, Inc.**

<b>For the Years Ended June 30</b>	<b>2022</b>	<b>2021</b>
Cash Flows from Operating Activities:		
(Decrease) Increase in Net Assets	<b>\$ (2,849,069)</b>	\$ 1,884,311
Adjustments to Reconcile (Decrease) Increase in Net Assets to Net Cash Used in Operating Activities:		
Depreciation	<b>15,701</b>	13,544
Net Realized and Unrealized Losses (Gains) on Investments	<b>1,276,218</b>	(2,207,851)
Gain on Extinguishment of Long-Term Debt - Paycheck Protection Program	<b>(249,960)</b>	(249,962)
Increase in Contributions Receivable	<b>(228,661)</b>	(348,340)
Decrease in Due from Affiliates	<b>11,872</b>	234,602
Decrease (Increase) in Prepaid Expenses and Other Current Assets	<b>29,367</b>	(79,997)
Increase (Decrease) in Accounts Payable	<b>16,012</b>	(17,841)
(Decrease) Increase in Accrued Expenses	<b>(42,643)</b>	67,638
Increase (Decrease) in Grants Payable	<b>1,095,835</b>	(62,500)
(Decrease) Increase in Deferred Revenue	<b>(6,522)</b>	11,051
Increase (Decrease) in Due to Affiliates	<b>7,150</b>	(2,399)
<b>Net Cash Used in Operating Activities</b>	<b>(924,700)</b>	<b>(757,744)</b>
Cash Flows from Investing Activities:		
Proceeds from Sales of Investments	<b>2,015,843</b>	5,975,548
Purchases of Investments	<b>(1,073,957)</b>	(5,146,691)
Acquisition of Property and Equipment	<b>(24,232)</b>	(6,858)
<b>Net Cash Provided by Investing Activities</b>	<b>917,654</b>	<b>821,999</b>
Net Cash Provided by Financing Activities:		
Borrowings from Long-Term Debt – Paycheck Protection Program	-	249,960
<b>Net (Decrease) Increase in Cash and Cash Equivalents</b>	<b>(7,046)</b>	<b>314,215</b>
Cash and Cash Equivalents, Beginning of Year	<b>2,690,378</b>	2,376,163
Cash and Cash Equivalents, End of Year	<b>\$ 2,683,332</b>	<b>\$ 2,690,378</b>

## 1. Organization and Summary of Significant Accounting Policies:

*Nature of Organization:* National Scleroderma Foundation, Inc. (the Organization) is a nonprofit organization dedicated to the concerns of people whose lives have been impacted by the autoimmune disease scleroderma, also known as systemic sclerosis, and related conditions. During the year ended June 30, 2022, the Organization changed its legal name from Scleroderma Foundation, Inc. to National Scleroderma Foundation, Inc. The Organization's threefold mission of support, education, and research guides the Organization's work in providing education programs for patients and their families, peer-to-peer support through its nationwide network of chapters and support groups, and advocacy efforts to increase awareness of the disease among the general public and the medical community. The Organization also has a research program that funds clinical research to find the cause and cure for scleroderma and related conditions.

The Organization operates through a consortium of chapters and affiliates. The chapter offices are controlled and operated by the Organization. All chapter activity is included in the accompanying financial statements. The affiliates are separately incorporated organizations that function as chapters and are contractually obligated to provide dues in exchange for the use of the name "Scleroderma Foundation." Affiliate operations are not reflected in the accompanying financial statements.

*Basis of Presentation:* The financial statements of the Organization have been prepared using the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (GAAP). Any reference in these notes to applicable guidance is meant to refer to the authoritative United States generally accepted accounting principles as found in the Accounting Standards Codification (ASC) and Accounting Standards Updates (ASU) of the Financial Accounting Standards Board (FASB).

The Organization reports information regarding its financial position and activities according to the following net asset classifications:

*Net Assets without Donor Restrictions:* Net assets that are not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the Organization. These net assets may be used at the discretion of the Organization's management and Board of Directors. Net assets without donor restrictions include net assets designated by the board for specific purposes.

*Net Assets with Donor Restrictions:* Net assets subject to stipulations imposed by donors and grantors. Some donor restrictions are temporary in nature; those restrictions will be met by actions of the Organization or by the passage of time. Other donor restrictions are perpetual in nature, whereby the donor has stipulated the funds be maintained in perpetuity.

*Fair Value Measurements:* The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described as follows:

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Organization has the ability to access.

Level 2 - Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability; and
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

## 1. Organization and Summary of Significant Accounting Policies (Continued):

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 - Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

*Revenue Recognition:* Revenue is reported as increases in net assets without donor restrictions unless use of the related assets is limited by donor-imposed restrictions. Revenue represents amounts derived from registration fees, special events, and contributions. Revenue is recognized when control of the goods and services provided is transferred to the Organization's customers and in an amount that reflects the consideration the Organization expects to be entitled to in exchange for those goods and services using the following steps: 1) identification of the contract, or contracts with a customer, 2) identification of performance obligations in the contract, 3) determination of the transaction price, 4) allocation of the transaction price to the performance obligations in the contract and 5) recognition of revenue when or as the Organization satisfies the performance obligations.

Registration fees for the Organization's annual conference and revenue related to special events are generally recognized when the conference or event takes place. Special event revenue is shown net of direct costs of benefits to donors.

The Organization typically invoices its customers upon attendance of the annual conference and special events. Typical payment terms provide that customers pay at the time of the related event.

Contributions received are recorded as net assets without donor restrictions or net assets with donor restrictions, depending on the existence and/or nature of any donor-imposed restrictions.

Donor restricted contributions are reported as an increase in net assets with donor restrictions, depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statements of activities as net assets released from restrictions.

Revenue from legacies and bequests is recognized upon receipt, unless advance notice of the Organization's unconditional right to receive the legacy or bequest is received and the fair value of the contribution is determinable, in which case the revenue is recognized upon such notice.

Contributed property and equipment are recorded at fair value at the date of donation. Contributions with donor-imposed stipulations regarding how long contributed assets must be used are recorded as net assets with donor restrictions. Otherwise, the contributions are recorded as net assets without donor restrictions.

Contributions of services are reported as revenue and expenses without donor restrictions at the fair value of the service received only if the services create or enhance a nonfinancial asset or would typically need to be purchased by the Organization if they had not been provided by contribution, require specialized skills, and are provided by individuals with those skills. Contributions of goods and space to be used in program operations are reported as revenue and expenses without donor restrictions at the time the goods or space is received.

The Organization must determine whether a contribution (or a promise to give) is conditional or unconditional for transactions deemed to be a contribution. A contribution is considered to be a conditional contribution if an agreement includes a barrier that must be overcome and either a right of return of assets or a right of release of a promise to transfer assets exists. Indicators of a barrier include measurable performance related barrier or other measurable barriers, a stipulation that limits discretion by the recipient on the conduct of an activity, and stipulations that are related to the purpose of the agreement. The Organization cannot consider probability of compliance with the barrier when determining if such awards are conditional and should be reported as conditional grant advance liabilities until such conditions are met.



**1. Organization and Summary of Significant Accounting Policies (Continued):**

Unconditional promises to give that are expected to be collected within one year are recorded at net realizable value. Unconditional promises to give that are expected to be collected in future years are recorded at present value of their estimated future cash flows. The discounts on those amounts are computed using risk-adjusted interest rates applicable to the years in which the promises are received. Discount amortization is included in contribution revenue. Conditional promises to give are not included as support until the conditions are met.

*Contract Balances:* The Organization's contract balances, resulting from contracts with customers, include deferred revenue. Deferred revenue represents payments received for which the aforementioned revenue recognition criteria have not been met.

Opening and closing balances for contract balances from contracts with customers consist of the following:

	June 30, 2022	June 30, 2021	July 1, 2020
Deferred Revenue	\$ 4,529	\$ 11,051	-

*Cash and Cash Equivalents:* The Organization maintains its cash in bank deposit accounts, which, at times, may exceed federally insured limits. The Organization has a cash management program, which provides for the investment of excess cash balances primarily in a sweep account. The Organization considers such highly liquid investments with original maturities of three months or less when purchased to be cash equivalents, unless designated for long-term purposes. The Organization has not experienced any losses in such accounts, and believes it is not exposed to any significant credit risk on cash and cash equivalents.

*Investments and Investment Income:* The Organization's investments are reported at fair value as of the date of the statements of financial position. Realized and unrealized gains and losses are reflected in the accompanying statements of activities. Investment income or loss on investments (including realized and unrealized gains and losses on investments, interest and dividends) is included in net assets without donor restrictions unless the income or loss is restricted by donor or law.

*Interpretation of Relevant Law:* The Organization follows the Uniform Prudent Management of Institutional Funds Act (UPMIFA). The Organization's Board of Trustees has interpreted UPMIFA as considering the preservation of the fair value of the original gift as of the gift date of the donor-restricted endowment funds absent explicit donor stipulations to the contrary. As a result of this interpretation, the Organization classifies as donor-restricted endowment funds (a) the original value of gifts donated to the endowment, (b) the original value of subsequent gifts to the endowment (c) accumulations to the endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund, and (d) appreciation (depreciation) in the fair value of endowment investments. Therefore, unless stated otherwise in the gift instrument, the assets in an endowment fund are donor-restricted assets until those amounts are appropriated for expenditure by the Organization in a manner consistent with the standard of prudence prescribed by UPMIFA.

In accordance with UPMIFA, the Organization considers the following factors in making a determination to appropriate or accumulate endowment funds:

- Duration and preservation of the fund
- Purposes of the Organization and the donor-restricted endowment fund
- General economic conditions
- Possible effect of inflation and deflation
- Expected total return from income and the appreciation of investments
- Other resources of the Organization
- Investment policies of the Organization

**1. Organization and Summary of Significant Accounting Policies (Continued):**

*Concentrations of Credit Risk:* Financial instruments that potentially subject the Organization to concentration of credit risk consist primarily of cash, cash equivalents, investments, and contributions receivable. The Organization maintains its cash, cash equivalents and investments with high-credit quality financial institutions. The Organization believes it is not exposed to any significant losses due to credit risk on cash, cash equivalents and investments. Contributions receivable are carried at amounts based upon management's judgment of potential defaults. Management identifies troubled receivables balances by assessing of the donor's credit worthiness. As of June 30, 2022 and 2021, management has determined all receivables are collectible and an allowance for doubtful accounts is not necessary.

*Other Risks and Uncertainties:* Due to the level of risk associated with certain investment securities and the level of uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in the values of the investment securities will occur in the near term and that such changes could materially affect the amounts reported in the statements of financial position.

*Property and Equipment:* Property and equipment are recorded at cost on the date of acquisition. Depreciation is computed using the straight-line method over the estimated useful lives of the related assets, as follows:

Computer Equipment	3 Years
Furniture and Fixtures	5 Years
Leasehold Improvements	Lesser of Useful Life or Lease Term

*Impairment of Long-Lived Assets:* It is required that long-lived assets be reviewed for possible impairment whenever events or changes in circumstances indicate that the carrying amount of an asset may not be recoverable. Recoverability of assets to be held and used is measured by a comparison of the carrying amount of an asset to future undiscounted net cash flows expected to be generated by the asset. If such assets are considered to be impaired, the impairment to be recognized is measured by the amount by which the carrying amount of the assets exceeds the fair value of the assets. As of June 30, 2022 and 2021, the Organization has determined that there have been no significant events or changes in circumstances that would trigger impairment testing of the Organization's long-lived assets.

*Grants Payable:* Grants payable are recorded when awards are approved and committed to the recipients.

*Deferred Rent:* The Organization records rent expense on a constant periodic rate over the term of the lease agreement. The excess of the cumulative rent expense incurred over the cumulative amounts due under the lease agreement is deferred and recognized over the term of the lease. As of June 30, 2022 and 2021, the deferred rent was deemed to be immaterial.

*Advertising Costs:* The Organization expenses advertising costs as incurred. During the years ended June 30, 2022 and 2021, the Organization incurred advertising expense in the amounts of \$21,038 and \$39,840, respectively.

*Functional Allocation of Expenses:* The costs of providing the Organization's program and other activities have been summarized on a functional basis in the statements of activities. Expenses related directly to program services or supporting activities are charged directly while other expenses that are common to several functions are allocated based on management's estimates, among major classes of programs services and supporting activities.

**1. Organization and Summary of Significant Accounting Policies (Continued):**

The expenses that are allocated include the following:

Expense	Method of Allocation
Salaries and Related Expenses	Time and Effort
Information Technology	Full Time Equivalent
Occupancy and Office	Full Time Equivalent
Professional Fees	Time and Effort
Printing and Copying	Full Time Equivalent
Travel	Full Time Equivalent
Insurance	Full Time Equivalent
Fees and Licenses	Full Time Equivalent
Telephone	Full Time Equivalent
Promotion	Full Time Equivalent
Postage and Delivery	Full Time Equivalent
Depreciation and Amortization	Full Time Equivalent

*Income Taxes:* The Organization is a nonprofit Organization as described in Section 501(c)(3) of the Internal Revenue Code and is exempt from federal and state income taxes on trade or business profits generated by activities related to the Organization's exempt function. The Organization may be subject to federal and state income taxes for profits generated from trade or business activities unrelated to the Organization's exempt function. As of June 30, 2022 and 2021, management believes that the Organization has not generated any unrelated business taxable income.

The Organization assesses the recording of uncertain tax positions by evaluating the minimum recognition threshold and measurement requirements a tax position must meet before being recognized as a benefit in the financial statements. The Organization's policy is to recognize interest and penalties accrued on any uncertain tax positions as a component of income tax expense, if any, in its statements of activities. The Organization has not recognized any liabilities for uncertain tax positions or unrecognized benefits as of June 30, 2022 and 2021. The Organization does not expect any material change in uncertain tax benefits within the next 12 months.

*Use of Estimates:* Management has used estimates and assumptions relating to the reporting of assets and liabilities and the disclosure of contingent assets and liabilities in its preparation of the financial statements in accordance with GAAP. Actual results experienced by the Organization may differ from those estimates.

*Reclassification:* Certain accounts in the June 30, 2021 financial statements have been reclassified for comparative purposes to conform to the presentation in the June 30, 2022 financial statements. Reclassifications consisted of certain amounts in the Organization's endowment reclassified from net assets without donor restrictions to net asset with donor restrictions. These amounts totaled \$116,345 and \$338,872 as of July 1, 2020 and June 30, 2021, respectively. Additionally, net assets released from restriction for the year ended June 30, 2021 was reduced by \$222,527. The Organization also reduced investment income designated for operations and appropriation of investment income designated for operations by \$222,484 for the year ended June 30, 2021.

*Subsequent Events:* Management has evaluated subsequent events spanning the period from June 30, 2022 through November 28, 2022, the date the financial statements were available to be issued.

**2. Availability and Liquidity:**

The following reflects the Organization's financial assets as of June 30, 2022 and 2021, reduced by amounts not available for general use within one year of June 30, 2022 and 2021 due to contractual or donor-imposed restrictions.

Financial Assets at End of Year:	2022	2021
Cash and Cash Equivalents	\$ 2,683,332	\$ 2,690,378
Contributions Receivable	635,411	406,750
Due from Affiliates	24,813	36,685
Investments	7,887,043	10,105,147
Total Financial Assets at End of Year	11,230,599	13,238,960
Less: Amounts Unavailable for General Expenditures within One Year:		
Due to Contractual or Donor-Imposed Restriction:		
Restricted by Donor with Time or Purpose Restrictions	-	255,650
To Be Held in Perpetuity - Feeney Fund	1,655,912	1,881,247
	1,655,912	2,136,897
Financial Assets Available to Meet Cash Needs for General Expenditures over the Next 12 Months	\$ 9,574,687	\$ 11,102,063

As part of the Organization's liquidity management, it has a policy to structure its financial assets to be available as its general expenditures, liabilities and other obligations may come due.

**3. Investments:**

Investments as of June 30, 2022 and 2021 consist of the following:

	2022	2021
Money Market Funds	\$ 390,679	\$ 488,213
Equity Securities	4,518,499	6,326,968
Corporate Bonds	1,001,804	1,424,898
Mutual Funds	1,195,763	1,098,378
Government Bonds	431,657	477,299
U.S. Treasury Notes	348,641	289,391
	\$ 7,887,043	\$ 10,105,147

For the years ended June 30, 2022 and 2021, net investment income consists of the following:

	2022	2021
Net Realized and Unrealized (Losses) Gains	\$ (1,276,218)	\$ 2,207,851
Interest and Dividends	175,431	167,751
Investment Fees	(25,203)	(51,953)
	\$ (1,125,990)	\$ 2,323,649

4. Endowment:

The endowment consists of a donor restricted fund established in 2007, which has been restricted as to its use by the donor or by law to support research for the disease scleroderma. As of June 30, 2022 and 2021, the endowment balance, by net asset classification, consists of the following:

	2022		
	Without Donor Restrictions	With Donor Restrictions	Total
Donor Restricted Endowment Funds	\$ -	\$ 1,655,912	\$ 1,655,912

	2021		
	Without Donor Restrictions	With Donor Restrictions	Total
Donor Restricted Endowment Funds	\$ -	\$ 1,881,247	\$ 1,881,247

The changes in the endowment balance by net asset classification as of June 30, 2022 and 2021 consist of the following:

	Without Donor Restrictions	With Donor Restrictions	Totals
Endowment Balance, June 30, 2020	\$ -	\$ 1,658,720	\$ 1,658,720
Investment Returns:			
Net Realized and Unrealized Gains	-	267,355	267,355
Interest and Dividends, Net of Investment Fees	-	25,994	25,994
Total Investment Returns	-	293,349	293,349
Appropriation of Endowment Assets for Expenditure	-	(70,865)	(70,865)
Endowment Balance, June 30, 2021	-	1,881,204	1,881,204
Investment Returns:			
Net Realized and Unrealized Losses	-	(180,820)	(180,820)
Interest and Dividends, Net of Investment Fees	-	25,513	25,513
Total Investment Returns	-	(155,307)	(155,307)
Appropriation of Endowment Assets for Expenditure	-	(69,985)	(69,985)
Endowment Balance, June 30, 2022	\$ -	\$ 1,655,912	\$ 1,655,912

*Return Objectives and Risk Parameters:* The Organization's Board of Directors has established investment policies over the endowment's general investments. The Organization's investment policy is designed, over the long-term, to produce funds for research and to preserve the value of the original gifts. To satisfy the long-term rate of return objectives determined by the Board of Directors, the Organization relies on a total return strategy in which investment returns are achieved through both current yield and capital appreciation. The Organization targets diversified assets allocations, each of which places a greater emphasis on equity-based investments to achieve the long-term return objectives. Over time, the strategy is to have 55% - 70% of the endowment funds invested in equity-based investments to achieve its long-term rate-of-return objectives, and 15% - 75% of the endowment funds invested in fixed income securities and cash reserves to maintain prudent risk constraints.

**4. Endowment (Continued):**

*Strategies Employed for Achieving Objectives:* To satisfy its long-term rate-of-return objectives, the Organization relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and current yield (interest and dividends). The Organization targets a diversified asset allocation that places a greater emphasis on equity-based investments to achieve its long-term objectives within prudent risk constraints.

*Spending Policy and How the Investment Objectives Relate to Spending Policy:* The Organization's endowment spending is determined annually at the discretion of the Organization's board of directors through the formal budgeting process. The Organization's approved annual spending program includes a withdrawal rate equal to 4% of the portfolio value of investments and endowments on a rolling five-year average balance of the investments and endowment's market value, in which distributions shall be made quarterly to the Organization. During the implementation period the approved budget calls for an investment and endowment spending rate greater than 4%.

**5. Fair Value Measurements:**

Investments measured at fair value on a recurring basis as of June 30, 2022 and 2021 are as follows:

	Fair Value Measurements at June 30, 2022			
	Totals	Level 1	Level 2	Level 3
Money Market Funds	\$ 390,679	\$ 390,679	\$ -	\$ -
Equity Securities:				
Information Technology	1,232,001	1,232,001	-	-
Consumer Goods	1,034,177	1,034,177	-	-
Healthcare Sector	924,117	924,117	-	-
Communication Service Sector	459,316	459,316	-	-
Financial Sector	440,177	440,177	-	-
Industrial Sector	428,711	428,711	-	-
Total Equity Securities	4,518,499	4,518,499	-	-
Corporate Bonds	1,001,804	-	1,001,804	-
Government Bonds	431,657	431,657	-	-
U.S. Treasury Notes	348,641	348,641	-	-
Mutual Funds:				
Balanced Moderate Allocation Mutual Funds	1,195,763	1,195,763	-	-
Total Mutual Funds	1,195,763	1,195,763	-	-
	\$ 7,887,043	\$ 6,885,239	\$ 1,001,804	\$ -

5. Fair Value Measurements (Continued):

	Fair Value Measurements at June 30, 2021			
	Total	Level 1	Level 2	Level 3
Money Market Funds	\$ 488,213	\$ 488,213	\$ -	\$ -
Equity Securities:				
Information Technology	1,675,322	1,675,322	-	-
Consumer Goods	1,397,810	1,397,810	-	-
Healthcare Sector	996,729	996,729	-	-
Communication Service Sector	864,346	864,346	-	-
Financial Sector	672,713	672,713	-	-
Industrial Sector	720,048	720,048	-	-
Total Equity Securities	6,326,968	6,326,968	-	-
Corporate Bonds	1,424,898	-	1,424,898	-
Government Bonds	477,299	477,299	-	-
U.S. Treasury Notes	289,391	289,391	-	-
Mutual Funds:				
Bond Funds	1,098,378	1,098,378	-	-
Total Mutual Funds	1,098,378	1,098,378	-	-
	\$ 10,105,147	\$ 8,680,249	\$ 1,424,898	\$ -

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used for the years ended June 30, 2022 and 2021.

*Money Market Funds:* Valued at the daily closing price as reported by the fund from an active market.

*Equity Securities:* Valued at the closing price reported on the active market on which the individual securities are traded.

*Corporate Bonds:* Valued using pricing models maximizing the use of observable inputs for similar securities. This methodology included basing value on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar bonds, the bond is valued under a discounted cash flow approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks or a broker quote if available.

*Mutual Funds:* Valued at the daily closing price as reported by the fund. Mutual funds held by the Organization are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Organization are deemed to be actively traded.

*Government Bonds and U.S. Treasury Notes:* Valued using quoted prices reported on the active market on which the individual notes are traded. Government Bonds and U.S. Treasury notes seek to preserve capital while also providing a competitive level of income over time.

**5. Fair Value Measurements (Continued):**

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Organization believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

**6. Related Party Transactions:**

The Organization is associated with separately incorporated nonprofit organizations throughout the United States of America referred to as affiliates. The affiliates share common goals and work in cooperation with the Organization.

The Organization functions as a pass-through funding source for contributions designated for the affiliates. In addition, the affiliates remit a percentage of their contributions to the Organization based on various financial factors and additional voluntary contributions. For the years ended June 30, 2022 and 2021, transactions with affiliates were as follows:

	<u>2022</u>	<u>2021</u>
Grants Passed-Through to Affiliates	\$ -	\$ 366,743
Contributions Received from Affiliates	\$ 56,507	\$ 102,138
Voluntary Research Contributions Received from Affiliates	\$ 173,415	\$ 157,725

As of June 30, 2022 and 2021, the Organization had amounts due from/to affiliates as follows:

	<u>2022</u>	<u>2021</u>
Amounts Due from Affiliates	\$ 24,813	\$ 36,685
Amounts Due to Affiliates	\$ 79,414	\$ 72,264

**7. Contributions Receivable:**

Contributions receivable as of June 30, 2022 and 2021 amounted to \$635,411 and \$406,750, respectively, and represent amounts due to be received in less than one year.

**8. Property and Equipment:**

Property and equipment as of June 30, 2022 and 2021 consist of the following:

	<u>2022</u>	<u>2021</u>
Computer Equipment	\$ 137,386	\$ 125,804
Furniture and Fixtures	87,028	78,328
Leasehold Improvements	12,343	8,393
	<u>236,757</u>	<u>212,525</u>
Less: Accumulated Depreciation	206,770	191,069
	<u>\$ 29,987</u>	<u>\$ 21,456</u>



**8. Property and Equipment (Continued):**

Depreciation expense for the years ended June 30, 2022 and 2021 amounted to \$15,701 and \$13,544, respectively.

**9. Grants Payable:**

The Organization provides grants to nonaffiliates for research purposes. Grants payable as of June 30, 2022 are due to recipients as follows:

<b>Year Ending</b>	
<u>June 30,</u>	
2023	\$ 1,504,167
2024	<u>1,116,668</u>
	<u>\$ 2,620,835</u>

The Organization has determined that a discount to long-term grants payable is immaterial to the financial statements taken as a whole.

**10. Long-Term Debt - Paycheck Protection Program:**

*CARES Act:* On March 27, 2020, the Coronavirus Aid, Relief and Economic Security (CARES) Act was enacted and signed into law to provide certain aid and stimulus to the U.S. economy. The Organization qualifies as a small business under the CARES Act and submitted a loan application with a qualified lender for funding under the Paycheck Protection Program (PPP), administered by the Small Business Association (SBA).

On April 28, 2020, the Organization's application with the lender was approved and as a result, the Organization obtained a loan (PPP Loan) in the amount of \$249,962. The PPP Loan bore fixed interest at 1.00% per annum, which began accruing from the date of the loan, and was set to mature on April 28, 2022. The PPP loan was unsecured and guaranteed by the SBA. The PPP Loan was eligible to be forgiven provided the Organization satisfied certain conditions and upon approval by the lender and the SBA. The PPP Loan provided for the deferral of payments until the SBA had determined the forgiveness amount, at which time, any remaining PPP loan amount would have required equal monthly payments of principal plus accrued interest in an amount sufficient to have repaid the remaining PPP Loan balance by the maturity date. On March 22, 2021, the Organization obtained from the SBA notification of forgiveness of the entire PPP loan balance in the amount of \$249,962, which was recorded to nonoperating activities as a gain on extinguishment of long-term debt - paycheck protection program in the accompanying statements of activities. Accrued interest on the PPP Loan was determined by management to be immaterial to the financial statements.

*Consolidated Appropriations Act:* On December 27, 2020, the Consolidated Appropriations Act was enacted and signed into law, which in part, was designated to provide certain aid and stimulus to the U.S. economy. The Organization qualifies as a small business under the Consolidated Appropriations Act and submitted a loan application with a qualified lender for funding under the PPP, administered by the SBA.

On February 26, 2021, the Organization's application with the lender was approved and as a result, the Organization obtained a Second loan (the Second PPP Loan) in the amount of \$249,960. The Second PPP Loan bore fixed interest at 1.00% per annum, which began accruing from the date of the loan, and was set to mature on February 26, 2026. The Second PPP loan was unsecured and guaranteed by the SBA. The Second PPP Loan was eligible to be forgiven provided the Organization satisfied certain conditions and upon approval by the lender and the SBA. The Second PPP Loan provided for the deferral of payments until the SBA had determined the forgiveness amount, at which time, any remaining loan amount would have required equal monthly payments of principal plus accrued interest in an amount sufficient to have repaid the remaining Second PPP Loan balance by the maturity date.

**10. Long-Term Debt - Paycheck Protection Program (Continued):**

On March 9, 2022, the Organization obtained from the SBA notification of forgiveness of the entire Second PPP loan balance in the amount of \$249,960, which was recorded to nonoperating activities as a gain on extinguishment of long-term debt - paycheck protection program in the accompanying statements of activities. Accrued interest on the Second PPP Loan was determined by management to be immaterial to the financial statements.

The SBA reserves the right to audit any PPP loan, regardless of size. These audits may occur after forgiveness has been granted. In accordance with the CARES Act, all borrowers are required to maintain their PPP loan documentation for six years after the PPP loan was forgiven or repaid in full and to provide that documentation to the SBA upon request.

**11. Net Assets with Donor Restrictions:**

Net assets with donor restrictions as of June 30, 2022 and 2021 consist of the following:

	<u>2022</u>	<u>2021</u>
Subject to Expenditure for Specified Purpose:		
Research	\$ -	\$ 250,000
Education	-	5,150
Scholarships	-	500
Total Purpose Restrictions	<u>-</u>	<u>255,650</u>
Subject to Spending Policy and Appropriation Guidelines (Including Amount to be Held in Perpetuity of \$1,542,375):		
Feeny Fund Endowment for Research	<u>1,655,912</u>	<u>1,881,247</u>
Total Net Assets with Donor Restrictions	<u>\$ 1,655,912</u>	<u>\$ 2,136,897</u>

**12. Net Assets Released from Restriction:**

Net assets were released from donor restrictions by incurring expenses satisfying the restricted purposes specified by donors or by the passage of time. Net assets released from restriction during the years ended June 30, 2022 and 2021 consist of the following:

	<u>2022</u>	<u>2021</u>
Research	\$ 992,617	\$ 679,990
Education	<u>792,180</u>	<u>10,000</u>
	<u>\$ 1,784,797</u>	<u>\$ 689,990</u>

**13. Employee Retention Credit:**

The Coronavirus Aid, Relief and Economic Security (CARES Act), as amended by the Consolidated Appropriations Act, the American Rescue Plan Act and the Infrastructure and Jobs Act, includes certain provisions for an employee retention credit (ERC). The ERC incentivizes employers severely impacted by the COVID-19 pandemic to retain their employees through a fully refundable tax credit, which is allowed against the employer's share of employment taxes for qualified wages paid after March 12, 2020 and before October 1, 2021. Credits in excess of the tax amounts paid by an employer are treated as overpayments and are also refunded to the employer.

**13. Employee Retention Credit (Continued):**

The ERC is calculated as a percentage of qualified wages (as defined in the CARES Act, as amended) paid by an eligible employer. The ERC is equal to (i) 50% of the first \$10,000, per calendar quarter, in qualified wages paid to each employee after March 12, 2020 and before January 1, 2021, with a maximum annual credit of \$5,000 for each employee; and (ii) 70% of the first \$10,000, per calendar quarter, in qualified wages paid to each employee between January 1, 2021 and September 30, 2021, with a maximum annual credit of \$21,000 for each employee.

The Organization qualified for the ERC as it experienced a significant decline in gross receipts in 2021 as a result of the effects of the COVID-19 pandemic. A decline in gross receipts is defined as: (i) for 2020, 50% compared to the same calendar quarter in 2019; and (ii) for 2021, 20% compared to the same calendar quarter in 2019.

The Organization averaged fewer than 100 full-time employees (FTEs) during 2019; therefore, it was considered a small employer during 2020 and 2021. As a small employer in 2020 and 2021, all of the Organization's otherwise qualified wages were eligible for the ERC.

The Organization has elected to account for the ERC as a government grant under the FASB's ASC 958-605, *Not-for-Profit Entities: Revenue Recognition*. Accordingly, the Organization has recorded \$254,252 as contributions without donor restrictions in the accompanying statement of activities for the year ended June 30, 2021, with a corresponding receivable that is included in contributions receivable in the accompanying statement of financial position as of June 30, 2021.

**14. Operating Leases:**

The Organization is party to noncancelable operating leases for office space in Danvers, Massachusetts; Denver, Colorado; Cypress Court, Texas; and Southfield, Michigan. The operating leases require escalating monthly payments and expire on various dates through April 30, 2025. The Organization is also party to a lease for equipment that requires a fixed monthly payment of \$587 and expires in April 2023.

During the years ended June 30, 2022 and 2021, rent expense incurred under these agreements amounted to \$149,464 and \$132,432, respectively.

Future minimum lease payments due under these noncancelable lease agreements as of June 30, 2022 are as follows:

<b>Year Ending June 30,</b>	
2023	\$ 111,970
2024	105,830
2025	<u>81,872</u>
	<u>\$ 299,672</u>

**15. Retirement Plan:**

The Organization sponsors a defined contribution plan covering substantially all of its employees who meet certain eligibility requirements. The Organization, at the discretion of the Board of Directors, may make contributions to the plan. During the years ended June 30, 2022 and 2021, the Organization made contributions to the plan in the amounts of \$26,435 and \$20,032, respectively.

**16. Economic Dependency:**

During the years ended June 30, 2022 and 2021, the Organization did not generate a substantial portion of its contributions and bequests from any specific donor.

As of June 30, 2022 and 2021, contributions receivable from two and three donors represented approximately 55% and 96%, each respectively, of the Organization's total contributions receivable.

**17. Indemnifications:**

In the ordinary course of business, the Organization enters into various agreements containing standard indemnification provisions. The Organization's indemnification obligations under such provisions are typically in effect from the date of execution of the applicable agreement through the end of the applicable statute of limitations. The aggregate maximum potential future liability of the Organization under such indemnification provisions is uncertain. As of June 30, 2022 and 2021, no amounts have been accrued related to such indemnification provisions.

**18. Subsequent Events:**

Effective July 1, 2022, the Organization merged with two of its affiliates, Scleroderma Foundation of the Delaware Valley and Scleroderma Foundation Minnesota Chapter (the Affiliates). As of the effective date of these mergers, the combined assets of the Affiliates amounted to approximately \$420,000. The Affiliates had no liabilities as of the effective date of the mergers.

As of the date these financial statements were available to be issued, the Organization had signed letters of intent to merge with two additional affiliates, Scleroderma Foundation Tri-State, Inc. Chapter and Scleroderma Foundation New England, Inc. These mergers are anticipated to be effective on January 1, 2023.