

Form **990**

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

# 2024

Open to Public Inspection

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

Do not enter social security numbers on this form as it may be made public.

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

Department of the Treasury  
Internal Revenue Service

## A For the 2024 calendar year, or tax year beginning 01-01-2024 , and ending 12-31-2024

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization AMERICAN CHEMISTRY COUNCIL		<b>D</b> Employer identification number 53-0104410	
	Doing business as		<b>E</b> Telephone number (202) 249-7000	
	Number and street (or P.O. box if mail is not delivered to street address) 700 2ND ST NE	Room/suite	<b>G</b> Gross receipts \$ 246,441,147	
	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20002		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions. <b>H(c)</b> Group exemption number	
<b>F</b> Name and address of principal officer: CHRIS JAHN 700 2ND ST NE WASHINGTON, DC 20002		<b>I</b> Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) ( 6 ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: WWW.AMERICANCHEMISTRY.COM		<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		
		<b>L</b> Year of formation: 1950		<b>M</b> State of legal domicile: NY

### Part I Summary

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: THE PURPOSE OF THE COUNCIL SHALL BE THE PROMOTION OF THE INTERESTS OF THE BUSINESS OF CHEMISTRY IN THE UNITED STATES OF AMERICA, ITS TERRITORIES AND POSSESSIONS AND GLOBALLY.	
	<b>2</b> Check this box <input type="checkbox"/>	
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) . . . . .	<b>3</b> 53
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	<b>4</b> 53
	<b>5</b> Total number of individuals employed in calendar year 2024 (Part V, line 2a) . . . . .	<b>5</b> 337

<b>Ac</b>	<b>a</b> Total number of volunteers (estimate if necessary)	<b>a</b>	00
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	777,114
	<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	0
<b>Revenue</b>		<b>Prior Year</b>	<b>Current Year</b>
	<b>8</b> Contributions and grants (Part VIII, line 1h)	596,842	421,357
	<b>9</b> Program service revenue (Part VIII, line 2g)	175,859,384	179,166,542
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d )	2,843,471	4,503,074
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,456,281	1,994,059
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	180,755,978	186,085,032
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3 )	1,698,955	3,617,229
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	64,910,779	69,867,418
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) 0		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	117,507,040	125,824,490
	<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	184,116,774	199,309,137
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	-3,360,796	-13,224,105	
<b>Net Assets or Fund Balances</b>		<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>20</b> Total assets (Part X, line 16)	172,946,932	167,359,495
	<b>21</b> Total liabilities (Part X, line 26)	109,812,789	107,003,190
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	63,134,143	60,356,305

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. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer JOSEPH YATES PARKER CFO Type or print name and title		Date 2025-11-04		
	Print/Type preparer's name	Preparer's signature	Date 2025-11-04	Check <input type="checkbox"/> if self-employed	PTIN P01696827
<b>Paid Preparer Use Only</b>	Firm's name RSM US LLP		Firm's EIN 42-0714325		
	Firm's address 919 EAST MAIN STREET SUITE 1800 RICHMOND, VA 23219		Phone no. (804) 282-2121		

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE PURPOSE OF THE COUNCIL SHALL BE THE PROMOTION OF THE INTERESTS OF THE BUSINESS OF CHEMISTRY IN THE UNITED STATES OF AMERICA, ITS TERRITORIES AND POSSESSIONS AND GLOBALLY.

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 No

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

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

4a (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) ACC SPEAKS FOR THE CHEMICAL INDUSTRY BEFORE THE EXECUTIVE BRANCH OF GOVERNMENT, CONGRESS, STATES, AND THE MEDIA. ACC NEGOTIATES WITH REGULATORY AGENCIES, REPRESENTS THE INDUSTRY IN LEGAL MATTERS, PARTICIPATES IN COALITIONS, AND PARTNERS WITH OTHER ASSOCIATIONS TO ACHIEVE ITS MEMBERS' PUBLIC POLICY GOALS FOR AMERICAN SUCCESS THAT RELIES ON THE BUSINESS OF CHEMISTRY- FROM SEMICONDUCTOR DEVELOPMENT, ENERGY DOMINANCE, U.S. MILITARY AND SECURITY, AND HEALTHCARE. WE ALSO EDUCATED THE ABOVE ON THE IMPORTANCE OF THE U.S. TOXIC SUBSTANCES CONTROL ACT (TSCA) TO OUR INDUSTRY'S CONTINUED BUSINESS AND GROWTH.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) ACC CONTINUED ITS EDUCATION EFFORTS ON HOW OUR INDUSTRY AND HOW THE BUSINESS OF CHEMISTRY SUPPORTS COMMUNITIES, JOBS, SECURITY, AND SAFETY. ACC'S RESPONSIBLE CARE PROGRAM EDUCATED STAKEHOLDERS ABOUT HOW THE INDUSTRY IS DRIVING CONTINUOUS IMPROVEMENT IN ENVIRONMENTAL, HEALTH, SAFETY, AND SECURITY PERFORMANCE.










4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) ACC LED THE RAIL CUSTOMER COALITION, A LARGE COALITION OF STAKEHOLDERS, TO ADVOCATE ON FREIGHT RAIL ISSUES THAT IMPACT MANUFACTURERS.

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses

Part IV Checklist of Required Schedules

	Yes	No
<b>1</b> 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> . . . . .		No
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions.  . . . . .	Yes	
<b>3</b> 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>  . . . . .	Yes	
<b>4 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> . . . . .		
<b>5</b> 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>  . . . . .	Yes	
<b>6</b> 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>  . . . . .		No
<b>7</b> 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>  . . . . .		No
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>  . . . . .		No
<b>9</b> 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>  . . . . .		No
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> . . . . .		No
<b>11</b> 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.		
<b>a</b> 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>  . . . . .	Yes	
<b>b</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>  . . . . .	Yes	
<b>c</b> Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its		No

	total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	<b>11c</b>		NO
<b>d</b>	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>	<b>11d</b>	Yes	
<b>e</b>	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<b>11e</b>	Yes	
<b>f</b>	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>	<b>11f</b>	Yes	
<b>12a</b>	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	<b>12a</b>		No
<b>b</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>	<b>12b</b>	Yes	
<b>13</b>	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<b>13</b>		No
<b>14a</b>	Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b>	Yes	
<b>b</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>	<b>14b</b>	Yes	
<b>15</b>	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>	<b>15</b>	Yes	
<b>16</b>	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>	<b>16</b>		No
<b>17</b>	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. See instructions.</i>	<b>17</b>		No
<b>18</b>	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>	<b>18</b>		No
<b>19</b>	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>	<b>19</b>		No
<b>20a</b>	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	<b>20a</b>		No
<b>b</b>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20b</b>		
<b>21</b>	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>	<b>21</b>	Yes	

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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> . . . . .		NO
<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> . . . . .	Yes	
<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> . . . . .		No
<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</b>	<b>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> . . . . .		
<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> . . . . .		
<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> . . . . .		No
<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> . . . . .		No
<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> . . . . .		No
<b>b</b>	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<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> . . . . .		No
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .		No
<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> . . . . .		No
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .		No
<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> . . . . .		No

<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> . . . . .	<b>33</b>	Yes	
<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> . . . . .	<b>34</b>	Yes	
<b>35a</b>	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<b>35a</b>	Yes	
<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>35b</b>	Yes	
<b>36</b>	<b>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> . . . . .	<b>36</b>		
<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> . . . . .	<b>37</b>		No
<b>38</b>	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O. . . . .	<b>38</b>	Yes	

**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>1b</b>	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable . . . . .		
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	Yes	

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

<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . .	<b>2a</b>	337		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>2b</b>		Yes	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>3a</b>		Yes	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i> . . . . .	<b>3b</b>		Yes	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	<b>4a</b>			No
<b>b</b>	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	<b>5a</b>			No

- b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?
- c** If "Yes," to line 5a or 5b, did the organization file Form 8886-T?
- 6a** Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?
- b** If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
- 7 Organizations that may receive deductible contributions under section 170(c).**
  - a** Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?
  - b** If "Yes," did the organization notify the donor of the value of the goods or services provided?
  - c** Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?
  - d** If "Yes," indicate the number of Forms 8282 filed during the year
  - e** Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?
  - f** Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?
  - g** If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?
  - h** If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?
- 8 Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?
- 9 Sponsoring organizations maintaining donor advised funds.**
  - a** Did the sponsoring organization make any taxable distributions under section 4966?
  - b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?
- 10 Section 501(c)(7) organizations.** Enter:
  - a** Initiation fees and capital contributions included on Part VIII, line 12
  - b** Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities
- 11 Section 501(c)(12) organizations.** Enter:
  - a** Gross income from members or shareholders
  - b** Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)
- 12a Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?
  - b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year.

<b>5b</b>		No
<b>5c</b>		
<b>6a</b>		No
<b>6b</b>		
<b>7a</b>		
<b>7b</b>		
<b>7c</b>		
<b>7d</b>		
<b>7e</b>		
<b>7f</b>		
<b>7g</b>		
<b>7h</b>		
<b>8</b>		
<b>9a</b>		
<b>9b</b>		
<b>10a</b>		
<b>10b</b>		
<b>11a</b>		
<b>11b</b>		
<b>12a</b>		

		<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>				
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? . . . . . <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.			<b>13a</b>	
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .	<b>13b</b>			
<b>c</b> Enter the amount of reserves on hand . . . . .	<b>13c</b>			
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? . . . . .			<b>14a</b>	No
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O . . . . .</i>			<b>14b</b>	
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? . . . . . If "Yes," see the instructions and file Form 4720, Schedule N.			<b>15</b>	Yes
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . . . . If "Yes," complete Form 4720, Schedule O.			<b>16</b>	No
<b>17 Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? . . . . . If "Yes," complete Form 6069.			<b>17</b>	

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	<b>1a</b>	53	
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent	<b>1b</b>	53	
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .	<b>2</b>		No
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . . . .	<b>3</b>		No
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .	<b>4</b>		No
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .	<b>5</b>		No

<b>6</b>	Did the organization have members or stockholders? . . . . .	<b>6</b>	Yes	
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . .	<b>7a</b>	Yes	
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .	<b>7b</b>	Yes	
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
<b>a</b>	The governing body? . . . . .	<b>8a</b>	Yes	
<b>b</b>	Each committee with authority to act on behalf of the governing body? . . . . .	<b>8b</b>	Yes	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i> . . . . .	<b>9</b>		No

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates? . . . . .		No
<b>b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	<b>10b</b>	
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .	<b>11a</b>	Yes
<b>b</b>	Describe on Schedule O the process, if any, used by the organization to review this Form 990. . . . .		
<b>12a</b>	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> . . . . .	<b>12a</b>	Yes
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	<b>12b</b>	Yes
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i> . . . . .	<b>12c</b>	Yes
<b>13</b>	Did the organization have a written whistleblower policy? . . . . .	<b>13</b>	Yes
<b>14</b>	Did the organization have a written document retention and destruction policy? . . . . .	<b>14</b>	Yes
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>a</b>	The organization's CEO, Executive Director, or top management official . . . . .	<b>15a</b>	Yes
<b>b</b>	Other officers or key employees of the organization . . . . .	<b>15b</b>	Yes
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	<b>16a</b>	No
<b>b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .	<b>16b</b>	

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed

DC

**18** Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

- Own website  Another's website  Upon request  Other (explain in Schedule O)

**19** Describe in 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:  
TED WAUGH 700 2ND ST NE WASHINGTON, DC 20002 (202) 249-7000

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or 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 dotted 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 or director	Officer	Key employee	Highest compensated employee	Former			



BOARD MEMBER											
(14) MACHTELD DE HAAN ..... BOARD MEMBER	1.00 .....	X							0	0	0
(15) DENISE DIGHAM ..... BOARD MEMBER	1.00 .....	X							0	0	0
(16) MIKE FINELLI ..... BOARD MEMBER	1.00 .....	X							0	0	0
(17) JIM FITTERLING ..... BOARD MEMBER	1.00 .....	X							0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ANTJE GERBER ..... BOARD MEMBER	1.00 .....	X						0	0	0
(19) FRANK GOOD ..... BOARD MEMBER	1.00 .....	X						0	0	0
(20) MIKE HEINZ ..... BOARD MEMBER	1.00 .....	X						0	0	0
(21) SAMIR HAFRI	1.00									

..... BOARD MEMBER	1.00	X								0	0	0
(22) PETER HUNTSMAN ..... BOARD MEMBER	1.00	X								0	0	0
(23) ROGER KEARNS ..... BOARD MEMBER	1.00	X								0	0	0
(24) CONRAD KEIJZER ..... BOARD MEMBER	1.00	X								0	0	0
(25) SEAN KEOHANE ..... BOARD MEMBER	1.00	X								0	0	0
(26) ROBERT KING ..... BOARD MEMBER	1.00	X								0	0	0
(27) MARK KRAMER ..... BOARD MEMBER	1.00	X								0	0	0
(28) MICHAEL LEFENFELD ..... BOARD MEMBER	1.00	X								0	0	0
(29) REBECCA LIEBERT ..... BOARD MEMBER	1.00	X								0	0	0
(30) PHIL MCDIVITT ..... BOARD MEMBER	1.00	X								0	0	0
(31) JIM M NICHOLSON ..... BOARD MEMBER	1.00	X								0	0	0
(32) MARK NIKOLICH ..... BOARD MEMBER	1.00	X								0	0	0
(33) GUILLERMO NOVO ..... BOARD MEMBER	1.00	X								0	0	0
(34) ANTHONY O'DOVAN ..... BOARD MEMBER	1.00	X								0	0	0
(35) BRIAN PALIOTTI ..... BOARD MEMBER	1.00	X								0	0	0
(36) JOHN PANICHELLA ..... BOARD MEMBER	1.00	X								0	0	0
(37) JOHN J PARO ..... BOARD MEMBER	1.00	X								0	0	0
(38) RONALDO PEREIRA	1.00											

..... BOARD MEMBER	1.00	X								0	0	0
(39) ADAM PETERS ..... BOARD MEMBER	1.00	X								0	0	0
(40) ROB PETERSON ..... BOARD MEMBER	1.00	X								0	0	0
(41) RANDY POGUE ..... BOARD MEMBER	1.00	X								0	0	0
(42) ALASTAIR PORT ..... BOARD MEMBER	1.00	X								0	0	0
(43) BRIAN POWERS ..... BOARD MEMBER	1.00	X								0	0	0
(44) STEVE PRUSAK ..... BOARD MEMBER	1.00	X								0	0	0
(45) DARYL ROBERTS ..... BOARD MEMBER	1.00	X								0	0	0
(46) LARRY RYAN ..... BOARD MEMBER	1.00	X								0	0	0
(47) THOMAS L SHEPHERD ..... BOARD MEMBER	1.00	X								0	0	0
(48) GUIDO SKUDLAREK ..... BOARD MEMBER	1.00	X								0	0	0
(49) ED SPARKS ..... BOARD MEMBER	1.00	X								0	0	0
(50) ANDREW TOMETICH ..... BOARD MEMBER	1.00	X								0	0	0
(51) FREDERIQUE VAN BAARLE ..... BOARD MEMBER	1.00	X								0	0	0
(52) PETER VANACKER ..... BOARD MEMBER	1.00	X								0	0	0
(53) MICHAEL WILLOME ..... BOARD MEMBER	1.00	X								0	0	0
(54) JOHN FORTSON ..... BOARD MEMBER (THRU 10/1/2024)	1.00	X								0	0	0
(55) ERIC STOUWER .....	1.00											

..... BOARD MEMBER (THRU 7/1/2024) (56) BRUCE CHINN	1.00	X							0	0	0
..... BOARD MEMBER (THRU 6/1/2024) (57) MARK NEUMAN	1.00	X							0	0	0
..... BOARD MEMBER (THRU 6/1/2024) (58) BONNY TULLEY	1.00	X							0	0	0
..... BOARD MEMBER (THRU 6/1/2024) (59) CHRISTOPHE VUILLEZ	1.00	X							0	0	0
..... BOARD MEMBER (THRU 6/1/2024) (60) CHRISTOPHER L JAHN PRESIDENT AND CEO	38.00			X					3,428,212	0	267,012
..... GEN. COUN., SECRETARY (THRU 7/31/24) (61) ALLISON W STARMANN	38.00			X					413,049	0	44,003
..... CFO, CAO, TREASURER (62) JOSEPH YATES PARKER	38.00			X					664,965	0	97,671
..... VP, PLASTICS (63) ROSS E EISENBERG	38.00				X				953,956	0	117,337
..... VP, CHEMICAL PRODUCTS & TECHNOLOGY (64) ROBERT J SIMON JR	37.00				X				765,829	0	105,873
..... VP, HR & ADMINISTRATION (65) NACOLE B HINTON	1.00				X				675,330	0	97,918
..... CHIEF EXECUTIVE, CHEMTREC (66) ANDREW LAVANWAY	38.00				X				430,464	0	85,510
..... VP, REG AND SCIENTIFIC AFFAIRS (67) KIMBERLY WISE WHITE	38.00					X			769,601	0	82,437
..... VP, STATE AFFAIRS (68) REBECCA MCPHAIL	38.00					X			541,646	0	81,653
..... EVP, COMMUNICATIONS (69) SARAH SCRUGGS BRANDT	38.00					X			544,932	0	82,048
..... VP, FEDERAL GOVERNMENT AFFAIRS (70) RYAN JACKSON	38.00					X			836,669	0	104,470
..... VP, SUSTAINABILITY & RESPONSIBILITY (71) MITCHELL TOOMEY	38.00					X			638,144	0	95,684
..... (72) RAYMOND O'BRYAN	n nn										

FORMER CFO						X	819,652	0	0
<b>1b Sub-Total</b>									
<b>c Total from continuation sheets to Part VII, Section A</b>									
<b>d Total (add lines 1b and 1c)</b>							11,482,449	0	1,261,616

**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 **201**

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
BCW LLC 200 FIFTH AVENUE NEW YORK, NY 10010	CONSULTING	29,670,692
ASTM INTERNATIONAL 100 BARR HARBOR DRIVE WEST CONSHOHOCKEN, PA 19428	RESEARCH	2,814,325
MARATHON STRATEGIES LLC 38 EAST 29TH STREET NEW YORK, NY 10016	CONSULTING	2,738,286
SIDLEY AUSTIN LLP ONE SOUTH DEARBORNE ST CHICAGO, IL 60603	LEGAL	2,223,826
THE ORANGE AGENCY LLC 2111 EISENHOWER AVE SUITE 400 ALEXANDRIA, VA 22314	ADVERTISING	1,986,874

**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 **158**

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Part VIII **Statement of Revenue**

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

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<b>1a</b> Moderated campaigns . . . . .				
<b>1b</b> Membership dues . . . . .				
<b>1c</b> Fundraising events . . . . .				
<b>1d</b> Related organizations . . . . .				
<b>1e</b> Government grants (contributions) 421,357				
<b>1f</b> All other contributions, gifts, grants, and similar amounts not included above				
<b>1g</b> Noncash contributions included in lines 1a - 1f:\$				
<b>h Total.</b> Add lines 1a-1f . . . . .	421,357			

Service Revenue	Business Code	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<b>2a</b> MEMBERSHIP DUES	900099	123,810,986	123,810,986		
<b>2b</b> CHEMTREC REG FEES	900099	35,747,106	34,969,992	777,114	
<b>2c</b> O/H REIMBURSEMENT	900099	7,789,790	7,789,790		
<b>2d</b> OTHER PROJECTS	900099	6,652,069	6,652,069		

<b>Program Revenue</b>	PRODUCT SALES		900099	2,651,250	2,651,250		
	All other program service revenue.			2,515,341	2,515,341		
	<b>9 Total.</b> Add lines 2a-2f. . . . .			179,166,542			
<b>Other Revenue</b>	3 Investment income (including dividends, interest, and other similar amounts) . . . . .			4,214,229		4,214,229	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties . . . . .			380,007		380,007	
	6a	(i) Real					
		(ii) Personal					
		Gross rents		53,480			
		b Less: rental expenses		0			
	c Rental income or (loss)		53,480				
	d Net rental income or (loss) . . . . .			53,480		53,480	
	7a	(i) Securities					
		(ii) Other					
		Gross amount from sales of assets other than inventory		60,644,960			
		b Less: cost or other basis and sales expenses		60,198,998	157,117		
c Gain or (loss)		445,962	-157,117				
d Net gain or (loss) . . . . .			288,845		288,845		
a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 . . . . .		8a					
b Less: direct expenses . . . . .		8b					
c Net income or (loss) from fundraising events . . . . .							
9a Gross income from gaming activities. See Part IV, line 19 . . . . .		9a					
b Less: direct expenses . . . . .		9b					
c Net income or (loss) from gaming activities . . . . .							

<b>10a</b> Gross sales of inventory, less returns and allowances . . .	<b>10a</b>				
<b>b</b> Less: cost of goods sold . . .	<b>10b</b>				
<b>c</b> Net income or (loss) from sales of inventory . . .					
<b>11a</b> SPONSORSHIP	Business Code	900099	1,131,720		1,131,720
<b>b</b> OTHER INCOME		900099	428,852		428,852
<b>d</b> All other revenue . . . . .					
<b>e Total.</b> Add lines 11a-11d . . . . .			1,560,572		
<b>12 Total revenue.</b> See instructions . . . . .			186,085,032	178,389,428	777,114
					6,497,133

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**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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .	3,607,229			
<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. . . . .	10,000			
<b>4</b> Benefits paid to or for members . . . . .				

<b>5</b> Compensation of current officers, directors, trustees, and key employees . . . . .	8,147,128		
<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 . . . . .	47,786,715		
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	5,326,821		
<b>9</b> Other employee benefits . . . . .	5,062,991		
<b>10</b> Payroll taxes . . . . .	3,543,763		
<b>11</b> Fees for services (non-employees):			
<b>a</b> Management . . . . .			
<b>b</b> Legal . . . . .	6,798,647		
<b>c</b> Accounting . . . . .	90,562		
<b>d</b> Lobbying . . . . .			
<b>e</b> Professional fundraising services. See Part IV, line 17			
<b>f</b> Investment management fees . . . . .	203,875		
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	61,550,605		
<b>12</b> Advertising and promotion . . . . .	7,158,199		
<b>13</b> Office expenses . . . . .	1,650,882		
<b>14</b> Information technology . . . . .	4,022,649		
<b>15</b> Royalties . . . . .			
<b>16</b> Occupancy . . . . .	8,326,109		
<b>17</b> Travel . . . . .	2,735,259		
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .			
<b>19</b> Conferences, conventions, and meetings . . . . .	3,690,229		
<b>20</b> Interest . . . . .			
<b>21</b> Payments to affiliates . . . . .			
<b>22</b> Depreciation, depletion, and amortization . . . . .	1,424,449		
<b>23</b> Insurance . . . . .	435,846		
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)			

<b>a</b> RESEARCH	10,100,240		
<b>b</b> PANEL MANAGEMENT	7,381,618		
<b>c</b> PUBLIC POLICY	6,852,736		
<b>d</b> PROJECT EXPENSE	1,117,391		
<b>e</b> All other expenses	2,285,194		
<b>25 Total functional expenses.</b> Add lines 1 through 24e	199,309,137		
<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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).			

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Part X **Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .		<b>1</b>	
	<b>2</b> Savings and temporary cash investments . . . . .	32,872,870	<b>2</b>	13,085,919
	<b>3</b> Pledges and grants receivable, net . . . . .		<b>3</b>	
	<b>4</b> Accounts receivable, net . . . . .	3,383,260	<b>4</b>	3,534,179
	<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 . . . . .	3,468,493	<b>9</b>	2,468,018
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 18,451,582		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 14,684,350	2,932,804	<b>10c</b> 3,767,232
	<b>11</b> Investments—publicly traded securities . . . . .		61,425,146	<b>11</b> 66,434,711
<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .		52,692,710	<b>12</b> 61,099,873	

<b>Liabilities</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 . . . . .	16,171,649	<b>15</b>	16,969,563
	<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) . . . . .	172,946,932	<b>16</b>	167,359,495
	<b>17</b> Accounts payable and accrued expenses . . . . .	15,735,633	<b>17</b>	17,536,562
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	73,958,379	<b>19</b>	69,016,236
	<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 . . . . .		<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	20,118,777	<b>25</b>	20,450,392	
<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	109,812,789	<b>26</b>	107,003,190	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions . . . . .	63,134,143	<b>27</b>	60,356,305
	<b>28</b> Net assets with donor restrictions . . . . .		<b>28</b>	
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> 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 . . . . .	63,134,143	<b>32</b>	60,356,305
<b>33</b> Total liabilities and net assets/fund balances . . . . .	172,946,932	<b>33</b>	167,359,495	

Form 990 (2024)

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	186,085,032
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	199,309,137
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	-13,224,105
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	63,134,143
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	10,446,267
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	0
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	60,356,305

Part XII **Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
<b>2a</b>	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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
<b>b</b>	Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
<b>c</b>	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 in Schedule O.	Yes	
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		No
<b>b</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 in Schedule O and describe any steps taken to undergo such audits.		

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Form 990 (2024)

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**Additional Data**

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**Software Version:**

**Form 990, Special Condition Description:**

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<b>efile Public Visual Render</b>	<b>ObjectID: 202533109349304458 - Submission: 2025-11-06</b>	<b>TIN: 53-0104410</b>
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**Schedule B**(Form 990)  
(Rev. January 2025)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, or 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

Name of the organization  
AMERICAN CHEMISTRY COUNCIL**Employer identification number**

53-0104410

**Organization type** (check one):**Filers of:****Section:**

Form 990 or 990-EZ

- 501(c)( ) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

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

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

**Special Rules**

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

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

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

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

Cat. No. 30613X

Schedule B (Form 990) (Rev. 1-2025)

Schedule B (Form 990) (Rev. 1-2025)

Name of organization  
AMERICAN CHEMISTRY COUNCIL

**Employer identification number**  
53-0104410

**Part I**

**Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED		\$ RESTRICTED	<input type="checkbox"/> <b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> <b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> (Complete Part II for noncash contributions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		_____ \$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		_____ \$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		_____ \$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		_____ \$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		_____ \$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (Rev. 1-2025)

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____

Schedule B (Form 990) (Rev. 1-2025)

Name of organization AMERICAN CHEMISTRY COUNCIL	<b>Employer identification number</b> 53-0104410
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**Part III** *Exclusively religious, charitable, etc., contributions to organizations described in section 501(c) (7), (8), or (10) that total more than \$1,000 for the year from any one contributor.* Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

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

-	
(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
<hr/> <hr/>	<hr/> <hr/>

Schedule B (Form 990) (Rev. 1-2025)

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**Software Version:**

efile Public Visual Render ObjectID: 202533109349304458 - Submission: 2025-11-06 TIN: 53-0104410

SCHEDULE C (Form 990)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

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

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

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

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

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

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

Table with 2 columns: Name of the organization (AMERICAN CHEMISTRY COUNCIL) and Employer identification number (53-0104410)

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

Table with 3 rows: 1. Provide a description of the organization's direct and indirect political campaign activities... 2. Political campaign activity expenditures... \$ 670,625 3. Volunteer hours for political campaign activities...

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

Table with 4 rows: 1. Enter the amount of any excise tax incurred by the organization under section 4955... 2. Enter the amount of any excise tax incurred by organization managers under section 4955... 3. If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a. Was a correction made? b. If "Yes," describe in Part IV.

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

Table with 4 rows: 1. Enter the amount directly expended by the filing organization for section 527 exempt function activities... 2. Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities... \$ 670,625 3. Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b... \$ 670,625 4. Did the filing organization file Form 1120-POL for this year? [checked] Yes [ ] No

- 5** Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.



(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1) ACCOUNTABILITY FOR GOVERNMENT FUND	PO BOX 11084 LANSING, MI 48901	92-2358233	1,500	0
(2) ADVANCE MINNESOTA	PO BOX 67 LAKE ELMO, MN 55042	83-1046844	1,250	0
(3) ALL TOGETHER COLORADO	PO BOX 102673 DENVER, CO 80250	85-3959470	2,500	0
(4) AMY WALEN FOR STATE HOUSE	PO BOX 853 REDMOND, WA 98073	82-4989832	1,000	0
(5) ANDERSON FOR SENATE	160 LOUISVILLE ROAD GROVETOWN, GA 30813	58-1099250	1,000	0
(6) ANGELIQUE ASHBY FOR SENATE 2026	1700 TRIBUTE ROAD SUITE 201 SACRAMENTO, CA 95815	92-1301075	1,000	0
(7) ANNETTE CLEVELAND FOR STATE SENATE	6400 NE HWY 99 G340 VANCOUVER, WA 98665	45-4514627	1,000	0
(8) ARIZONA SENATE VICTORY FUND	2211 EAST HIGHLAND SUITE 210 PHOENIX, AZ 85016	92-2191000	2,500	0
(9) AVARD FOR SENATE	57 SHERRI ANN AVE NASHUA, NH 03064	87-3245651	250	0
(10) AVELINO VALENCIA FOR STATE ASSEMBLY 2024	1700 TRIBUTE ROAD SACRAMENTO, CA 95815	92-1465191	1,000	0
(11) BILLY HICKMAN FOR STATE SENATE INC	PO BOX 25 STATESBORO, GA 30459	85-0705333	250	0
(12) BLACK BEAR PAC INC	138 CONANT STREET 2ND FLOOR BEVERLY, MA 01915	84-2018697	2,800	0
(13) BLANCA PACHECO FOR ASSEMBLY 2024	1700 TRIBUTE ROAD SACRAMENTO, CA 95815	92-1484833	1,000	0
(14) BLANCA RUBIO FOR ASSEMBLY 2024	921 11TH STREET SACRAMENTO, CA 95814	92-1128565	1,000	0
(15) BRUCE-LANE FOR ASSEMBLY 2024	921 11TH STREET SUITE 701 SACRAMENTO, CA 95814	92-2176820	1,000	0

(16) BURT JONES FOR GEORGIA INC	264 ALABAMA BLVD JACKSON, GA 30233	87-2015461	500	0
(17) CAMPAIGN TO ELECT PAUL HARRIS	237 NE CHKALOV DRIVE VANCOUVER, WA 98684	27-2531536	1,000	0
(18) CARL DEMAIO FOR STATE ASSEMBLY 2024	921 11TH STREET SUITE 701 SACRAMENTO, CA 95814	93-4711107	1,000	0
(19) NH SENATE REPUBLICANS PAC	PO BOX 30 CONCORD, NH 03302	83-4282146	1,000	0
(20) CITIZENS FOR HAMMOND	333 D N LAFAYETTE ST MACOMB, IL 61455	46-4763917	500	0
(21) CITIZENS FOR ADRIENNE JONES	3717 LANAMER RD RANDALLSTOWN, MD 21133	52-2065770	1,000	0
(22) CITIZENS FOR BILL FERGUSON	711 W 40TH STREET SUITE 330 BALTIMORE, MD 21211	27-2423021	1,000	0
(23) CITIZENS FOR BRIAN FELDMAN	12517 PALATINE COURT POTOMAC, MD 20854	52-2344445	750	0
(24) CITIZENS FOR BRYAN SIMONAIRE	360 GATEWATER CT GLEN BURNIE, MD 21060	20-2580169	150	0
(25) CITIZENS FOR LINDA HOLMES	PO BOX 6374 AURORA, IL 60598	46-2127049	500	0
(26) COLORADO CHAMBER 527 ORGANIZATION	1700 BROADWAY SUITE 525 DENVER, CO 80290	45-4384295	775	0
(27) COLORADO CHAMBER POLITICAL ACTION COMMITTEE	1700 BROADWAY SUITE 525 DENVER, CO 90290	84-1005921	725	0
(28) COLORADO WAY FORWARD	PO BOX 100912 DENVER, CO 80250	92-3861115	2,500	0
(29) COMMITTEE TO ELECT A REPUBLICAN SENATE	PO BOX 2741 MADISON, WI 53701	39-1517505	1,500	0
(30) COMMITTEE TO ELECT ALAN MORRISON	PO BOX 583 SEELYVILLE, IN 47878	27-2781130	500	0
(31) COMMITTEE TO ELECT BILL CARSON	46 EAGLE DRIVE REHOBOTH BEACH, DE 19971	77-0702159	600	0
(32) COMMITTEE TO ELECT BUTCH PARRISH	132 VICTORY DRIVE SWAINSBORO, GA 30401	58-2584772	250	0
(33) COMMITTEE TO ELECT C T WILSON	8963 ARMOR COURT WHITE PLAINS, MD 20695	82-3030072	500	0
(34) COMMITTEE TO ELECT DEBRA ALTSCHILLER	15 APPLE WAY STRATHAM, NH 03885	88-0842289	250	0
(35) COMMITTEE TO ELECT DONNA SOUCY	91 ALEXANDER DRIVE MANCHESTER, NH 03109	46-0562207	250	0
(36) COMMITTEE TO ELECT GREG GOODE	4246 IRONWOOD LN TERRE HAUTE, IN 47902	93-4392328	300	0

	PERCENTAGE, IN %			
(37) COMMITTEE TO ELECT HOUSE REPUBLICANS	PO BOX 233 NORTHWOOD, NH 03261	46-3192414	1,000	0
(38) COMMITTEE TO ELECT HOUSTON GAINES	PO BOX 1203 ATHENS, GA 30603	82-1959813	250	0
(39) COMMITTEE TO ELECT JAKE FEY	PO BOX 1372 TACOMA, WA 98401	86-1121642	1,000	0
(40) COMMITTEE TO ELECT MARY DYE	1325 BELL PALIN ROAD POMEROY, WA 99347	47-4064112	1,000	0
(41) COMMITTEE TO ELECT PETER ABBARNO	PO BOX 94 CENTRALIA, WA 98531	47-3697034	1,000	0
(42) COMMITTEE TO RE-ELECT CURTIS KING	PO BOX 10025 YAKIMA, WA 98909	20-8314962	1,000	0
(43) CONGRESSIONAL LEADERSHIP FUND	1747 PENNSYLVANIA AVE NW WASHINGTON, DC 20006	45-3578123	250,000	0
(44) CROFT FOR KANSAS	8909 W 148TH TER OVERLAND PARK, KS 66221	83-0765991	500	0
(45) CYRUS FOR OREGON PAC	PO BOX 512 INDEPENDENCE, OR 97351	87-3832353	1,500	0
(46) DAVID ALVAREZ FOR ASSEMBLY 2024	1700 TRIBUTE ROAD SACRAMENTO, CA 95815	92-2010216	1,000	0
(47) COMMITTEE TO ELECT DAVID WATTERS	19 MAPLE STREET DOVER, NH 03820	26-2910228	250	0
(48) DR JASMEET BAINS FOR ASSEMBLY 2024	1787 TRIBUTE ROAD SACRAMENTO, CA 95815	92-1235229	1,000	0
(49) EFSTRATION FOR HOUSE	923 PORT WEST DRIVE AUBURN, GA 30011	47-3422857	500	0
(50) ELECT MONICA STONIER	PO BOX 61762 VANCOUVER, WA 98666	27-1504430	1,000	0
(51) ELIOT BOSTAR FOR LEGISLATURE	3800 S 42ND ST LINCOLN, NE 68506	84-1882988	500	0
(52) EVERGREEN PAC	187 HIGH ST NE STE 220 SALEM, OR 97301	93-4041965	2,500	0
(53) FLORIDA REPUBLICAN SENATORIAL CAMPAIGN COMMITTEE	2640-A MITCHAM DRIVE TALLAHASSEE, FL 32308	47-2058962	2,500	0
(54) FRIENDS FOR DEBRA HEFFERNAN	113 BLUE ROCK ROAD WILMINGTON, DE 19809	27-2120159	600	0
(55) FRIENDS FOR JOHN FREDRICKSON	8330 LOVELAND DRIVE OMAHA, NE 68124	87-1324902	500	0
(56) FRIENDS FOR LARRY WALSH JR	PO BOX 69 ELWOOD, IL 60421	45-5481875	500	0

(57) FRIENDS FOR SAM LOW	11002 UCT LOOP RD LAKE STEVENS, WA 98258	46-2096072	1,000	0
(58) FRIENDS OF ANDREW BARKIS	PO BOX 8728 LACEY, WA 98509	81-1755579	1,000	0
(59) FRIENDS OF BLAKE TILLERY	404 DURDEN STREET VIDALIA, GA 30474	81-3106286	500	0
(60) FRIENDS OF BEN BOWMAN	9390 SW JULIA PL TIGARD, OR 97224	88-2685485	1,000	0
(61) FRIENDS OF CHRIS GARTEN	3415 CR 160 CHARLESTOWN, IN 47111	81-3351411	500	0
(62) FRIENDS OF CHRIS GILDON	PO BOX 71 PUYALLUP, WA 98371	82-5179579	1,000	0
(63) FRIENDS OF CHRISS CARR	PO BOX 724842 ATLANTA, GA 31139	81-4305148	1,000	0
(64) FRIENDS OF DANA STEIN	1215 E FORT AVE BALTIMORE, MD 21230	74-3156454	750	0
(65) FRIENDS OF DREW STOKESBARY	PO BOX 92 AUBURN, WA 98071	46-5287065	1,000	0
(66) FRIENDS OF HOWARD PEARL	409 LOUDON RIDGE RD LOUDON, NH 03307	45-5508503	250	0
(67) FRIENDS OF JAN JONES LTD	12850 HIGHWAY 9 ALPHARETTA, GA 30004	38-3910801	500	0
(68) FRIENDS OF JASON GALLION	3747 ALDINO RD ABERDEEN, MD 21001	35-2369597	150	0
(69) FRIENDS OF JASON OSBORNE	65 MINER RD AUBURN, NH 03032	99-3866774	250	0
(70) FRIENDS OF JIM PRESSEL	309 PULASKI ST LAPORTE, IN 46350	47-5613119	300	0
(71) FRIENDS OF JOE FITZGIBBON	PO BOX 66235 BURIEN, WA 98166	27-2265718	1,000	0
(72) FRIENDS OF JOHN CORBETT	1484 GA HWY 135 S LAKE PARK, GA 31636	46-5039343	500	0
(73) FRIENDS OF JOHN CURRAN	PO BOX 243 LAKE ZURICH, IL 60047	82-2421013	500	0
(74) FRIENDS OF JON G BURNS	PO BOX 1000 SPRINGFIELD, GA 31329	20-1283529	1,000	0
(75) FRIENDS OF JOSELINE PENA MELNYK	PO BOX 1251 COLLEGE PARK, MD 20741	20-4614730	750	0
(76) FRIENDS OF JULIE FAHEY	PO BOX 12278 EUGENE, OR 97440	47-4664041	1,000	0
(77) FRIENDS OF KATHY SZELIGA	PO BOX 40 KINGSVILLE, MD 21087	27-0292866	250	0
(78) FRIENDS OF KATIE FRY HESTER	1215 E FORT AVE SUITE 106 BALTIMORE, MD 21230	82-2423839	500	0
(79) FRIENDS OF KEITH GOEHNER FOR	PO BOX 38	83-0585425	1,000	0

STATE SENATE	LEAVENWORTH, WA 98826			
(80) FRIENDS OF KEVIN HENSLEY	212 CAMERTON LANE TOWNSEND, DE 19734	46-5510569	600	0
(81) FRIENDS OF MARC KORMAN	7104 EXETER ROAD BETHESDA, MD 20814	27-1895665	750	0
(82) FRIENDS OF MARI LEAVITT	PO BOX 65195 TACOMA, WA 65133	81-2668177	1,000	0
(83) FRIENDS OF NATALIE MANLEY	1927 TIMBERS EDGE CIRCLE JOLIET, IL 60431	45-3762945	500	0
(84) FRIENDS OF NICK KIPKE	PO BOX 862 PASADENA, MD 21123	20-1393106	250	0
(85) FRIENDS OF REGINA BIRDSSELL	24 LARSON DR HAMPSTEAD, NH 03841	27-2345889	250	0
(86) FRIENDS OF REGINA T BOYCE	3511 OLD YORK ROAD BALTIMORE, MD 21218	82-2729933	750	0
(87) FRIENDS OF RON MUZZALL	316 SE PIONEER WAY OAK HARBOR, WA 98277	84-3507121	1,000	0
(88) FRIENDS OF RON WATSON	C/O RICE CONSULTING BEL AIR, MD 21014	87-1536851	150	0
(89) FRIENDS OF RUSS GOODMAN	PO BOX 44 HOMERVILLE, GA 31634	84-4851088	250	0
(90) FRIENDS OF STEPHANIE T BOLDEN	38 MCCAULLEY COURT WILMINGTON, DE 19801	46-4444046	600	0
(91) FRIENDS OF SUE REZIN	PO BOX 932 MORRIS, IL 60450	27-4592726	500	0
(92) FRIENDS OF TODD MORGAN	46536 MILLSTONE LANDING RD LEXINGTON, MD 20653	27-1860876	125	0
(93) FRIENDS OF TRACY CRAMER FOR DISTRICT 22	PO BOX 512 INDEPENDENCE, OR 97351	88-1064339	1,500	0
(94) FRIENDS OF VALERIE LONGHURST	111 TUCKAHOE LANE BEAR, DE 19701	46-3607342	600	0
(95) FRIENDS TO ELECT BRAD	POBOX 5076 VANCOUVER, WA 98668	88-2375032	1,000	0
(96) FRIENDS TO ELECT KRISTINE REEVES	1815 SW CAMPUS DRIVE 26332 FEDERAL WAY, WA 98093	81-2277473	1,000	0
(97) GALLAGHER FOR ASSEMBLY 2024	10093 DAVIS ROAD WILTON, CA 95693	92-1195275	1,000	0
(98) GEORGIANS FIRST LEADERSHIP COMMITTEE	PO BOX 20036 ATLANTA, GA 30325	87-1263825	500	0
(99) GIPSON FOR ASSEMBLY 2024	921 11TH STREET SACRAMENTO, CA 95814	92-1294483	1,000	0
(100) GREG WALLIS FOR ASSEMBLY 2024	921 11TH STREET SACRAMENTO, CA 95814	92-1299370	1,000	0

(101) HARPER FOR GEORGIA	PO BOX 798 OCILLA, GA 31774	87-1371642	500	0
(102) HARVESTING OPPORTUNITY	10480 JUAN CALLE CLIVE, IA 50325	84-3687129	2,000	0
(103) HOOVER FOR ASSEMBLY 2024	10093 DAVIS ROAD WILTON, CA 95693	92-1373662	1,000	0
(104) HOUSE REPUBLICAN CAMPAIGN COMMITTEE	PO BOX 3058 INDIANAPOLIS, IN 46206	35-1470780	1,000	0
(105) HOUSE VICTORY FUND	2211 EAST HIGHLAND PHOENIX, AZ 85016	92-3834581	2,500	0
(106) IOWA FIRST FUND	521 E LOCUST ST DES MOINES, IA 50309	84-2210613	2,000	0
(107) HATCHETT FOR HOUSE	100 CANTERBURY RD DUBLIN, GA 31021	85-1808989	250	0
(108) JANET NGUYEN FOR ASSEMBLY 2026	921 11TH STREET SUITE 701 SACRAMENTO, CA 95814	92-1549807	1,000	0
(109) JASON ELLIOTT FOR SC SENATE	PO BOX 4975 GREENVILLE, SC 29608	99-0489767	500	0
(110) JOBS NEW YORK COMMITTEE	12 CORPORATE WOODS BLVD STE 17 ALBANY, NY 12211	46-0739659	250,000	0
(111) JOHN BRAUN FOR STATE SENATE	1955 SALZER VALLEY RD CENTRALIA, WA 98531	45-5101339	1,000	0
(112) JONES LEADERSHIP FUND FOR REPUBLICAN CENTRAL COMMITTEE 2028	7918 EL CAJON BLVD LA MESA, CA 91942	88-2844673	1,000	0
(113) JUAN CARRILLO FOR ASSEMBLY 2024	374 NO COAST HIGHWAY 101 STE 2 ENCINITAS, CA 92024	92-1187685	1,000	0
(114) KANSAS REPUBLICAN SENATORIAL COMMITTEE	PO BOX 2663 TOPEKA, KS 66601	48-1036127	1,000	0
(115) MAKING MICHIGAN STRONGER	PO BOX 16113 LANSING, MI 48901	92-2136575	1,500	0
(116) MARCI FOR SENATE	PO BOX 175 LAWRENCE, KS 66044	81-4540265	250	0
(117) MATT BRASS FOR STATE SENATE	PO BOX 1313 NEWMAN, GA 30264	81-1346483	500	0
(118) MAX BURNS FOR STATE SENATE	PO BOX 203 SYLVANIA, GA 30467	84-4857769	250	0
(119) MCCOMBIE FOR ILLINOIS	318 N 4TH ST SAVANNA, IL 61074	47-5071423	500	0
(120) MIKE CHAPMAN FOR STATE SENATE	1321 S LAUREL ST PORT ANGELES, WA 98362	93-2335676	1,000	0
(121) MIKE JACOBSON FOR LEGISLATURE	18326 S CHARLES AVE NORTH PLATTE, NE 69101	88-1042363	500	0
(122) MIKE MCGUIRE FOR INSURANCE	921 11TH STREET SUITE 904	86-2272294	5,000	0

COMMISSIONER 2026	SACRAMENTO, CA 94109			
(123) MIKE SMITH FOR DELAWARE	804 BRANCH ROAD NEWARK, DE 19711	47-1306118	600	0
(124) MILLER FOR STATE REPRESENTATIVE	23267 CR 4 EAST ELKHART, IN 46514	46-4354434	300	0
(125) MINNESOTA JOBS COALITION	275 4TH STREET E SUITE 699 ST PAUL, MN 55104	46-1726939	1,250	0
(126) NEVADA ASSEMBLY DEMOCRATIC CAUCUS	6675 S TENAYA WAY 200 LAS VEGAS, NV 89113	88-0205213	1,000	0
(127) NEVADA SENATE DEMOCRATS	3540 W SAHARA AVE BOX 263 LAS VEGAS, NV 89102	88-0316606	1,000	0
(128) NEW DAY COLORADO FUND	PO BOX 324 FORT LUPTON, CO 80621	92-2348262	2,500	0
(129) NEW HAMPSHIRE SENATE DEMOCRATIC CAUCUS	105 NORTH STATE ST CONCORD, NH 03301	02-0473096	500	0
(130) NH HOUSE DEMOCRATIC VICTORY CAMPAIGN COMMITTEE	PO BOX 1292 CONCORD, NH 03301	14-1906794	500	0
(131) RE ELECT JAMES RAMOS FOR ASSEMBLY 2024	555 CAPITOL MALL SACRAMENTO, CA 95814	92-1526432	1,000	0
(132) REPUBLICAN ASSEMBLY CAMPAIGN COMMITTEE	148 EAST JOHNSON ST MADISON, WI 53703	39-1429711	1,500	0
(133) REPUBLICAN GOVERNORS ASSOCIATION	1747 PENNSYLVANIA AVE NW WASHINGTON, DC 20006	11-3655877	35,000	0
(134) REPUBLICAN HOUSE CAMPAIGN COMMITTEE	PO BOX 2632 TOPEKA, KS 66612	48-1044547	1,000	0
(135) REPUBLICAN HOUSE CAUCUS COMMITTEE	626C ADMIRAL DRIVE SUITE 321 ANNAPOLIS, MD 21401	81-2528388	1,000	0
(136) REPUBLICAN PARTY OF FLORIDA - HOUSE MAJORITY	420 E JEFFERSON STREET TALLAHASSEE, FL 32301	59-0683241	2,500	0
(137) SANCHEZ FOR ASSEMBLY 2024	9460 TEGNER RD HILMAR, CA 95324	92-1323215	1,000	0
(138) SENATE MAJORITY FUND	2318 CURTIS STREET DENVER, CO 80205	45-1353357	2,500	0
(139) SHANELINDAUERCOM	5270 W DIVISION STREET JASPER, IN 47546	82-2502282	500	0
(140) SORIA FOR ASSEMBLY 2024	1700 TRIBUTE RAOD SACRAMENTO, CA 95815	92-1187942	1,000	0
(141) STEPHANIE FOR WA	PO BOX 5802 PASCO WA 99302	88-1416754	1,000	0

(142) STEPHANIE NGUYEN FOR ASSEMBLY 2024	921 11TH STREET SACRAMENTO, CA 95814	92-1808817	1,000	0
(143) TENNESSEE CHAMBER OF COMMERCE & INDUSTRY PAC	414 UNION STREET NASHVILLE, TN 37219	62-1236022	1,000	0
(144) THE LEADERSHIP FUND	PO BOX 512 INDEPENDENCE, OR 97351	93-1129428	2,500	0
(145) THE LIBERTY FIRST PROJECT	1539 S PHYLLIS LN ANDOVER, KS 67002	85-1668545	1,000	0
(146) TIM GRAYSON FOR SENATE 2024	1700 TRIBUTE ROAD SACRAMENTO, CA 95815	93-2841404	1,000	0
(147) TOWNSEND FOR DELAWARE SENATE	PO BOX 7835 NEWARK, DE 19714	45-4193784	600	0
(148) VOTE BALDWIN	11360 HANBURY MANOR BLVD NOBLESVILLE, IN 46060	84-4225254	300	0
(149) YEARICK FOR DELAWARE	703 E PEBWORTH RD MAGNOLIA, DE 19962	84-4239518	600	0

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

Cat. No. 50084S

Schedule C (Form 990) 2024

Schedule C (Form 990) 2024

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

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

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)	<b>(a)</b> Filing organization's totals	<b>(b)</b> Affiliated group totals
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) .....		
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....		
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....		
<b>d</b> Other exempt purpose expenditures .....		
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....		
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.		
<b>If the amount on line 1e, column (a) or (b) is:</b>	<b>The lobbying nontaxable amount is:</b>	
Not over \$500,000	20% of the amount on line 1e.	
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	

Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.
Over \$17,000,000	\$1,000,000.

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**g** Grassroots nontaxable amount (enter 25% of line 1f) .....

**h** Subtract line 1g from line 1a. If zero or less, enter -0- .....

**i** Subtract line 1f from line 1c. If zero or less, enter -0- .....

**j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....


Yes  No

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

**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

**Schedule C (Form 990) 2024**

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers? .....			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .....			
<b>c</b> Media advertisements? .....			
<b>d</b> Mailings to members, legislators, or the public? .....			
<b>e</b> Publications, or published or broadcast statements? .....			
<b>f</b> Grants to other organizations for lobbying purposes? .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....			
<b>i</b> Other activities? .....			
<b>j</b> Total. Add lines 1c through 1i .....			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

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

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	<b>1</b>	No
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b>	No
<b>3</b> Did the organization agree to carry over lobbying and political expenditures from the prior year? .....	<b>3</b>	Yes

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

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>	123,810,986
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures <b>(do not include amounts of political expenses for which the section 527(f) tax was paid).</b>		
<b>a</b> Current year .....	<b>2a</b>	22,130,000
<b>b</b> Carryover from last year .....	<b>2b</b>	8,044,935
<b>c</b> Total .....	<b>2c</b>	30,174,935
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	<b>3</b>	21,047,868
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? .....	<b>4</b>	9,127,067

**5** Taxable amount of lobbying and political expenditures. See Instructions .....

**5**

**Part IV Supplemental Information**

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

Return Reference	Explanation
PART I-A, LINE 1:	ACC'S POLITICAL ACTIVITIES CONSIST OF MAKING CORPORATE POLITICAL CAMPAIGN CONTRIBUTIONS TO STATE CANDIDATES FOR PUBLIC OFFICE FOR THEIR ELECTION CAMPAIGNS AND PARTICIPATING IN PUBLIC REFERENDUM CAMPAIGNS ON ISSUES THROUGH ACC FUNDING CAMPAIGN COMMITTEES.

**Schedule C (Form 990) 2024**

**Additional Data**

**Return to Form**

**Software ID:**  
**Software Version:**

**SCHEDULE D**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

## Supplemental Financial Statements

OMB No. 1545-0047

**Open to Public  
Inspection**

▶ **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](http://www.irs.gov/Form990) for instructions and the latest information.**

<b>Name of the organization</b> AMERICAN CHEMISTRY COUNCIL	<b>Employer identification number</b> 53-0104410
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**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

**Part II Conservation Easements.**

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

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

**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.

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

**For Paperwork Reduction Act Notice, see the Instructions for Form 990.** Cat. No. 52283D **Schedule D (Form 990) (Rev. 1-2025)**

**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 are a 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 programs
  - 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:

- c** Beginning balance . . . . .
- d** Additions during the year . . . . .
- e** Distributions during the year . . . . .
- f** Ending balance . . . . .

	<b>Amount</b>
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

**2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .  **Yes**  **No**

**b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII . . . .

**Part V Endowment Funds.**

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

	<b>(a)</b> Current year	<b>(b)</b> Prior year	<b>(c)</b> Two years back	<b>(d)</b> Three years back	<b>(e)</b> Four years back
<b>1a</b> Beginning of year balance . . . . .					
<b>b</b> Contributions . . . . .					
<b>c</b> Net investment earnings, gains, and losses					
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .					
<b>f</b> Administrative expenses . . . . .					
<b>g</b> End of year balance . . . . .					

**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 ▶ .....
- 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:

- (i)** Unrelated organizations . . . . .
- (ii)** Related organizations . . . . .

	<b>Yes</b>	<b>No</b>
<b>3a(i)</b>		
<b>3a(ii)</b>		

**b** If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . .

<b>3b</b>		
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**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
<b>1a</b> Land . . . . .				
<b>b</b> Buildings . . . . .				
<b>c</b> Leasehold improvements		10,108,894	8,682,522	1,426,372
<b>d</b> Equipment . . . . .		5,105,570	3,098,517	2,007,053
<b>e</b> Other . . . . .		3,237,118	2,903,311	333,807
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . . .				3,767,232

**Schedule D (Form 990) (Rev. 1-2025)**

**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
<b>(1)</b> Financial derivatives . . . . .		
<b>(2)</b> Closely-held equity interests . . . . .		
<b>(3)</b> Other _____		
(A) MULTI-STRATEGY HEDGE FUND	3,243,792	F
(B) INTERNATIONAL EQUITY MUTUAL FUND	7,673,600	F
(C) SMALL CAP MUTUAL FUND	3,356,242	F
(D) 688.08-ISHARES S&P 500 INDEX FD CL G (BSPGX)	46,826,239	F
(D)		
(E)		
(F)		
(G)		
(H)		

**Total.** (Column (b) must equal Form 990, Part X, col. (B) line 12.) 61,099,873

**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> (Column (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) OTHER ASSETS	58,988
(2) DEFERRED COMPENSATION	4,909,582
(3) RIGHT-OF-USE LEASE ASSETS, NET	12,000,993
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	16,969,563



<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	203,875		
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	8,630,871		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .			<b>4c</b>	8,834,746
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . .			<b>5</b>	186,085,032

**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.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .			<b>1</b>	190,152,798
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>			
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>			
<b>c</b>	Other losses . . . . .	<b>2c</b>			
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	-8,111,383		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .			<b>2e</b>	-8,111,383
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .			<b>3</b>	198,264,181
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :				
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	203,875		
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	841,081		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .			<b>4c</b>	1,044,956
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) . . . . .			<b>5</b>	199,309,137

**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.

Return Reference	Explanation
PART X, LINE 2:	THERE WAS NO NET TAX LIABILITY FOR UNRELATED BUSINESS INCOME TAX FOR THE YEAR ENDED DECEMBER 31, 2024. MANAGEMENT HAS EVALUATED THE COUNCIL'S TAX POSITIONS AND HAS CONCLUDED THAT THE COUNCIL HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE DISCLOSURE.
PART XI, LINE 2D - OTHER ADJUSTMENTS:	AFFILIATE INCOME INCLUDED IN CONSOLIDATED FINANCIAL STATEMENT 540,141.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	CHEMICAL PRODUCTS & TECHNOLOGY DIVISION REVENUE 7,789,790. SEPARATE PROGRAMS INCLUDED IN LINE 2, PART VIII, PG 10 841,081.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	AFFILIATE EXPENSES INCLUDED IN CONSOLIDATED FINANCIAL STATEMENT -321,593. CHEMICAL PRODUCTS & TECHNOLOGY DIVISION REVENUE -7,789,790.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	SEPARATE PROGRAMS INCLUDED IN LINE 2, PART VIII, PG 10 841,081.

## Additional Data

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[Return to Form](#)

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**SCHEDULE F  
(Form 990)**  
(Rev. January 2025)

**Statement of Activities Outside the United States**

OMB No. 1545-0047

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.**  
▶ **Attach to Form 990.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
AMERICAN CHEMISTRY COUNCIL

**Employer identification number**

53-0104410

**Part I General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .  **Yes**  **No**

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3** Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	ADVOCACY/ADMIN SUPPORT	282,327
EUROPE (INCLUDING ICELAND & GREENLAND)	1	6	PROGRAM SERVICES	ADVOCACY/ADMIN SUPPORT	3,714,433
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	ADVOCACY/ADMIN SUPPORT	25,000
SOUTH ASIA	0	0	PROGRAM SERVICES	ADVOCACY/ADMIN SUPPORT	94,884
SOUTH AMERICA	0	0	PROGRAM SERVICES	ADVOCACY/ADMIN SUPPORT	376,113
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	ADVOCACY/ADMIN SUPPORT	3,319
NORTH AMERICA	0	0	PROGRAM SERVICES	ADVOCACY/ADMIN SUPPORT	924,442
EUROPE (INCLUDING ICELAND & GREENLAND)	1	6	PROGRAM SERVICES	SPONSOR	20,000
SOUTH ASIA	0	0	PROGRAM SERVICES	SPONSOR	5,620
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENT		3,243,792
EUROPE (INCLUDING ICELAND & GREENLAND)	1	6	GRANT TO ORGANIZATION LOCATED IN THE REGION		10,000
<b>3a</b> Sub-total . . . . .	1	6			5,440,518
<b>b</b> Total from continuation sheets to					







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**Software Version:**

**Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.**

**Schedule I  
(Form 990)**

(Rev. January 2025)

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 instructions and the latest information.

OMB No. 1545-0047

Open to Public  
Inspection

Name of the organization  
AMERICAN CHEMISTRY COUNCIL

Employer identification number  
53-0104410

**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.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) AFRICAN AMERICAN MAYOR ASSOCIATION 660 NORTH CAPITOL ST NW 470 WASHINGTON, DC 20001	46-5593933	501(C)(3)	25,000	0			SUPPORT MISSION AND EFFORTS TO CREATE IMPACTFUL CHANGE IN COMMUNITY
(2) AMERICAN INSTITUTE OF CHEMICAL ENGINEERS 120 WALL STREET 23 NEW YORK, NY 10005	13-1623892	501(C)(3)	80,081	0			SUPPORT SWING FOR STEM CHARITABLE GOLF TOURNAMENT
(3) APPLIED BUILDING TECHNOLOGY GROUP LLC 6300 ENTERPRISE LN MADISON, WI 53719	46-1908053		125,500	0			SUPPORT MARKET OUTREACH AND EDUCATION INITIATIVES
(4) APPLIED PHARMACOLOGY AND TOXICOLOGY INC 2250 NW 24TH GAINESVILLE, FL 32605	59-3440413		5,902	0			SUPPORT OF THE THE WORK OF DR BORGERT TO DEVELOP SCIENTIFIC ARGUMENTATION IN A PAPER ADDRESSING PROOF OF THRESHOLDS FOR ENDOCRINE DISRUPTION
(5) ASTM INTERNATIONAL 100 BARR HARBOR DRIVE CONSHOHOCKEN, PA 19428	23-1352024	501(C)(3)	10,000	0			CONTRIBUTION
(6) ENGINEERS WITHOUT BORDERS USA 1031 33RD STREET DENVER, CO 80205	84-1589324	501(C)(3)	200,000	0			SUPPORT PROJECTS THAT HELP LOW INCOME MINORITY, AND UNDERSERVED COMMUNITIES IN THE UNITED
(7) ETOWAH RESCUE SQAUD INC 1018 S TENNESSE AVE AVE ETOWAH, TN 37331	58-1413057	501(C)(3)	10,000	0			CHEMTREC HELP AWARD
(8) FOUNDATION FOR	52-1945222	501(C)(3)	2,879,907	0			RESEARCH SUPPORT

CHEMISTRY RESEARCH AND INITIATIVE 700 SECOND STREET NE WASHINGTON, DC 20002						
(9) GLEN GARDNER VOLUNTEER FIRE COMPANY A NJ NON PROFIT 2168 STATE ROUTE 31 GARDNER NEW, NJ 08826	83-0905794	501(C)(3)	10,000	0		CHEMTREC HELP AWARD
(10) GREENWOOD CEMETERY PRESERVATION ASSOCIATION 9666 LA OLLA DR OLIVETTE, MD 63132	81-1330876	501(C)(3)	10,000	0		SUPPORT ROAD RESTORATION PROJECT
(11) NORTH AMERICAN INSULATION MANUFACTURERS ASSOCIATION 11 CANAL CENTER PLAZA SUITE ALEXANDRIA, VA 22314	13-1087340		54,724	0		SUPPORT OF THE DISCRETE PROJECT TO CAPTURE AND ANALYZE DATA PHASE II
(12) PLEASANT HOPE FIRE PROTECTION DISTRICT PO BOX 44 PLEASANT HOPE, MO 65725	33-1214975	501(C)(3)	10,000	0		CHEMTREC HELP AWARD
(13) SHERIDAN FIRE DEPARTMENT 113 E EVERGREEN ST HERIDAN, MI 48884	35-5061788	501(C)(3)	10,000	0		CHEMTREC HELP AWARD
(14) SOCIETY OF ENVIRONMENTAL TOXICOLOGY AND CHEMISTRY 229 S BAYLEN ST 2ND FL PENSACOLA, FL 32502	37-1482800	501(C)(3)	10,000	0		SUPPORT FOR SCIENCE INFORMING POLICY INITIATIVES
(15) STANFORD UNIVERSITY 485 BROADWAY REDWOOD, CA 94063	94-1156365	501(C)(3)	20,000	0		CONTRIBUTION
(16) TOWN OF SUPERIOR 4917 S RD35 SUPERIOR, WI 54880	39-6006132	GOV'T	10,000	0		CHEMTREC HELP AWARD
(17) UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL PUBLIC HEALTH FOUNDATION 135 DAUER DRIVE PO BOX 899 CHAPEL HILL, NC 27514	56-1717285	501(C)(3)	100,000	0		SUPPORT ETHYLENE OXIDE RESEARCH

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . 14  
 3 Enter total number of other organizations listed in the line 1 table . . . . . 3

**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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					

(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2:	AMERICAN CHEMISTRY COUNCIL IS NOT A GRANT-MAKING ORGANIZATION. AMERICAN CHEMISTRY COUNCIL PROVIDED OTHER ASSISTANCE TO VARIOUS ORGANIZATIONS.

Schedule I (Form 990) Rev. 1-2025

**Additional Data**

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**Software ID:**  
**Software Version:**

**Schedule J**  
(Form 990)  
(Rev. January 2025)

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

**Open to Public Inspection**

Name of the organization AMERICAN CHEMISTRY COUNCIL	<b>Employer identification number</b> 53-0104410
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**Part I Questions Regarding Compensation**

	Yes	No								
<p><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.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input checked="" type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax idemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input checked="" type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input checked="" type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p><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 . . . . .</p>	Yes									
<p><b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a? . . . . .</p>	Yes									
<p><b>3</b> Indicate which, if any, of the following the filing 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.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p><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:</p>										
<p><b>a</b> Receive a severance payment or change-of-control payment? . . . . .</p>		No								
<p><b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . . .</p>	Yes									
<p><b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement? . . . . .</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>		No								
<p><b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b></p>										
<p><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:</p>										
<p><b>a</b> The organization? . . . . .</p>										
<p><b>b</b> Any related organization? . . . . .</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>										
<p><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:</p>										
<p><b>a</b> The organization? . . . . .</p>										
<p><b>b</b> Any related organization? . . . . .</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>										
<p><b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed</p>										

payments not described in lines 5 and 6? If "Yes," describe in Part III . . . . .	7		
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III . . . . .	8		
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? . . . . .	9		

**For Paperwork Reduction Act Notice, see the Instructions for Form 990.** Cat. No. 50053T **Schedule J (Form 990) (Rev. 1-2025)**

Schedule J (Form 990) (Rev. 1-2025)

**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 are not 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, 1099-MISC compensation, and/or 1099-NEC			(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 CHRISTOPHER L JAHN PRESIDENT AND CEO	(i)	1,990,683	1,400,000	37,529	224,700	42,312	3,695,224	0
	(ii)	0	0	0	0	0	0	0
2 ROSS E EISENBERG VP, PLASTICS	(i)	643,883	308,750	1,323	78,225	39,112	1,071,293	0
	(ii)	0	0	0	0	0	0	0
3 RYAN JACKSON VP, FEDERAL GOVERNMENT AFFAIRS	(i)	595,326	240,000	1,343	71,100	33,370	941,139	0
	(ii)	0	0	0	0	0	0	0
4 ROBERT J SIMON JR VP, CHEMICAL PRODUCTS & TECHNOLOGY	(i)	542,057	219,500	4,272	66,761	39,112	871,702	0
	(ii)	0	0	0	0	0	0	0
5 KIMBERLY WISE WHITE VP, REG AND SCIENTIFIC AFFAIRS	(i)	520,278	248,000	1,323	66,880	15,558	852,039	0
	(ii)	0	0	0	0	0	0	0
6 RAYMOND O'BRYAN FORMER CFO	(i)	0	0	819,652	0	0	819,652	819,652
	(ii)	0	0	0	0	0	0	0
7 NACOLE B HINTON VP, HR & ADMINISTRATION	(i)	461,732	211,250	2,348	61,517	36,400	773,247	0
	(ii)	0	0	0	0	0	0	0
8 JOSEPH YATES PARKER CFO, CAO, TREASURER	(i)	461,443	199,750	3,772	60,858	36,813	762,636	0
	(ii)	0	0	0	0	0	0	0
9 MITCHELL TOOMEY VP, SUSTAINABILITY & RESPONSIBILITY	(i)	461,383	173,000	3,761	59,130	36,553	733,827	0
	(ii)	0	0	0	0	0	0	0
10 SARAH SCRUGGS BRANDT EVP, COMMUNICATIONS	(i)	374,021	170,000	911	53,561	28,487	626,980	0
	(ii)	0	0	0	0	0	0	0

	(ii)	0	0	0	0	0	0	0
<b>11</b> REBECCA MCPHAIL VP, STATE AFFAIRS	(i)	370,853	168,750	2,043	53,325	28,328	623,299	0
	(ii)	0	0	0	0	0	0	0
<b>12</b> ANDREW LAVANWAY CHIEF EXECUTIVE, CHEMTREC	(i)	428,432	0	2,032	46,965	38,545	515,974	0
	(ii)	0	0	0	0	0	0	0
<b>13</b> ALLISON W STARMANN GEN. COUN., SECRETARY (THRU 7/31/24)	(i)	339,405	0	73,644	40,729	3,274	457,052	72,450
	(ii)	0	0	0	0	0	0	0

Schedule J (Form 990) (Rev. 1-2025)

Schedule J (Form 990) (Rev. 1-2025)

**Part III Supplemental Information**

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

Return Reference	Explanation
PART I, LINE 1A	JAHN, PRESIDENT AND CEO RECEIVED TAXABLE COMPANION TRAVEL FOR \$22,566.
PART I, LINE 4B	FOLLOWING ARE THE EMPLOYEES WITH DEFERRALS INTO THE SUPPLEMENTAL RETIREMENT PLAN 457(F): CHRISTOPHER JAHN - \$160,300 ROSS EVAN EISENBERG - \$13,825 RYAN JACKSON - \$6,700 KIMBERLY WISE WHITE - \$2,480 ROBERT J. SIMON - \$2,361

Schedule J (Form 990) (Rev. 1-2025)

**Additional Data**

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**Software ID:**  
**Software Version:**

**efile Public Visual Render** | **ObjectID: 202533109349304458 - Submission: 2025-11-06** | **TIN: 53-0104410**

**SCHEDULE O**  
**(Form 990)**

(Rev. January 2025)  
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 990-EZ.**

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

OMB No. 1545-0047

**Open to Public Inspection**

Name of the organization  
AMERICAN CHEMISTRY COUNCIL

**Employer identification number**

53-0104410

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	ACC HAS APPROXIMATELY 160 MEMBER COMPANIES THAT EITHER PRODUCE OR SELL PRODUCTS OF CHEMISTRY IN THE UNITED STATES OR ABROAD.
FORM 990, PART VI, SECTION A, LINE 7A	ACC'S MEMBERS ELECT ITS BOARD OF DIRECTORS AT AN ANNUAL MEETING.
FORM 990, PART VI, SECTION A, LINE 7B	BYLAW AMENDMENTS THAT SUBSTANTIALLY CHANGE ANY EXISTING BYLAW PROVISIONS MUST BE APPROVED BY TWO-THIRDS OF THE MEMBERS PRESENT AT AN ANNUAL OR SPECIALLY-CALLED MEETING.
FORM 990, PART VI, SECTION B, LINE 11B	IN ACCORDANCE WITH THE COUNCIL'S BOARD-APPROVED RESOLUTION, THE 2024 IRS FORM 990 WAS REVIEWED BY THE ACC BOARD FINANCE, AUDIT, AND MEMBERSHIP COMMITTEE. THE BOARD FINANCE, AUDIT, AND MEMBERSHIP COMMITTEE WAS PROVIDED AN ELECTRONIC COPY OF THE FORM 990 FOR REVIEW NO LESS THAN 4 DAYS PRIOR TO THE FILING DEADLINE AND ANY COMMENTS WERE RESOLVED TO EFFECT A TIMELY FILING OF THE FORM 990. ALSO, THE CFO, CONTROLLER, AND ASSISTANT CONTROLLER THOROUGHLY REVIEWED THE COMPLETED FORM 990.
FORM 990, PART VI, SECTION B, LINE 12C	EACH DIRECTOR, OFFICER, AND EMPLOYEE OF ACC IS TO ANNUALLY SUBMIT A DISCLOSURE STATEMENT, PROVIDED BY ACC, LISTING ALL ORGANIZATIONS WITH WHICH HE OR SHE IS "AFFILIATED" (AS DEFINED IN THE CONFLICT OF-INTEREST POLICY) DESCRIBING THE NATURE OF THE AFFILIATION, AND INDICATING WHETHER HE OR SHE HAS OR MAY HAVE A CONFLICT-OF-INTEREST INVOLVING ANY ACC FINANCIAL TRANSACTION. IN THE EVENT THERE IS A CHANGE IN THE INFORMATION IN THE DISCLOSURE STATEMENT, THE PERSON SUBMITTING IT IS TO PROMPTLY SUBMIT WRITTEN NOTIFICATION OF THE CHANGE. THE CHAIRMAN OF THE BOARD AND THE PRESIDENT AND CEO SHALL BE RESPONSIBLE FOR THE ADMINISTRATION OF THIS POLICY. ALL DISCLOSURES REQUIRED UNDER THIS POLICY SHALL BE PROVIDED TO THE ACC PRESIDENT AND CEO. ISSUES ARISING UNDER THIS POLICY SHALL BE REFERRED INITIALLY TO THE PRESIDENT AND CEO. INFORMATION DISCLOSED UNDER THIS POLICY WILL BE HELD IN CONFIDENCE BY THE CHAIRMAN OF THE BOARD AND THE PRESIDENT AND CEO AND BY THOSE PERSONS THEY AUTHORIZE TO RECEIVE IT WHERE THE BEST INTERESTS OF THE ASSOCIATION REQUIRES FURTHER DISCLOSURE.

	THIS REVIEW PROCESS WILL BE REPORTED ANNUALLY TO THE BOARD BY THE CHAIRMAN. A DIRECTOR WHO HAS DECLARED OR HAS BEEN FOUND TO HAVE A CONFLICT-OF-INTEREST IN ANY PROPOSED TRANSACTION OR OTHER MATTER IS TO REFRAIN FROM PARTICIPATING IN CONSIDERATION OF THE PROPOSED TRANSACTION OR OTHER MATTER INCLUDING NOT VOTING ON THE MATTER IN QUESTION, AND IF SO REQUESTED BY THE CHAIRMAN OR ANY OTHER DIRECTOR NOT BEING PRESENT AT THE TIME OF THE VOTE, WITH RESPECT TO RESTRAINT ON PARTICIPATION BY EMPLOYEES THE PRESIDENT AND CEO IS TO TAKE SUCH ACTION AS IS NECESSARY TO ENSURE THAT THE TRANSACTION OR OTHER MATTER IS COMPLETED IN THE BEST INTERESTS OF ACC WITHOUT THE INVOLVEMENT OF THE PERSON WHO HAS THE CONFLICT-OF INTEREST.
FORM 990, PART VI, SECTION B, LINE 15	THE ACC COMPENSATION COMMITTEE IS COMPRISED OF THE ACC OFFICERS. THE COMPENSATION COMMITTEE REVIEWS THE PERFORMANCE AND SETS THE ANNUAL COMPENSATION OF THE ACC PRESIDENT AND CEO PURSUANT TO AGREED UPON CONTRACTUAL TERMS. THE COMPENSATION COMMITTEE ALSO REVIEWS AND APPROVES THE ANNUAL COMPENSATION AS RECOMMENDED BY THE PRESIDENT AND CEO FOR COVERED INDIVIDUALS. COVERED INDIVIDUALS CONSIST OF CHIEF EMPLOYED EXECUTIVES, OFFICERS, VICE PRESIDENTS AND MANAGING DIRECTORS AS APPOINTED TO THE SENIOR STAFF TEAM BY THE PRESIDENT AND CEO. IN 2023, THE COMPENSATION COMMITTEE REVIEWED PERFORMANCE, AWARDED THE BONUS, AND APPROVED THE 2024 BASE COMPENSATION FOR THE PRESIDENT AND CEO. FOR THE REMAINING COVERED INDIVIDUALS, THE PRESIDENT AND CEO RECOMMENDED BONUSES AND 2024 BASE SALARIES TO THE COMPENSATION COMMITTEE USING A COMPREHENSIVE BENCHMARK STUDY THAT IS PERFORMED ON AN ANNUAL BASIS. THE RECOMMENDATIONS OF THE PRESIDENT AND CEO WERE THEN APPROVED BY THE COMPENSATION COMMITTEE AT ITS NOVEMBER 2023 MEETING.
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION DOES NOT MAKE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY OR FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC, EXCEPT TO THE EXTENT REQUIRED BY LAW.
FORM 990, PART IX, LINE 11G	CONSULTING 60,458,786. AGENCY TEMPS 82,309. OTHER PROFESSIONAL FEES 991,510. HONORARIUM 18,000.

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

Cat. No. 51056K

Schedule O (Form 990) (Rev. 1-2025)

## Additional Data

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**Software ID:**  
**Software Version:**

**SCHEDULE R  
(Form 990)**

(Rev. January 2025)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
AMERICAN CHEMISTRY COUNCIL

**Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
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

**Open to Public  
Inspection**

**Employer identification number**

53-0104410

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) CHEMTREC 3130 FAIRVIEW PARK DRIVE FALLS CHURCH, VA 220424513 53-0104410	EMERGENCY RESPONSE INFORMATION PROVIDER	VA	19,409,696	18,306,681	AMERICAN CHEMISTRY COUNCIL

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) AMERICAN CHEMISTRY COUNCIL POLITICAL ACTION COMMITTEE 700 2ND STREET NE  WASHINGTON, DC 20002 36-4912955	POLITICAL ACTIVITIES	VA	527		AMERICAN CHEMISTRY COUNCIL	Yes	
(2) FOUNDATION FOR RESEARCH AND CHEMISTRY INITIATIVES 700 2ND STREET NE  WASHINGTON, DC 20002 52-1945222	RESEARCH	VA	501(C)(3)	LINE 12B, II	AMERICAN CHEMISTRY COUNCIL	Yes	

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

Cat. No. 50135Y

Schedule R (Form 990) (Rev. 1-2025)

Schedule R (Form 990) (Rev. 1-2025)

**Part III Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>1a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .		No
<b>1b</b> Gift, grant, or capital contribution to related organization(s) . . . . .	Yes	
<b>1c</b> Gift, grant, or capital contribution from related organization(s) . . . . .		No
<b>1d</b> Loans or loan guarantees to or for related organization(s) . . . . .		No
<b>1e</b> Loans or loan guarantees by related organization(s) . . . . .		No
<b>1f</b> Dividends from related organization(s) . . . . .		No
<b>1g</b> Sale of assets to related organization(s) . . . . .		No
<b>1h</b> Purchase of assets from related organization(s) . . . . .		No
<b>1i</b> Exchange of assets with related organization(s) . . . . .		No
<b>1j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .		No
<b>1k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .		No
<b>1l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .		No
<b>1m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .		No
<b>1n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .		No
<b>1o</b> Sharing of paid employees with related organization(s) . . . . .		No
<b>1p</b> Reimbursement paid to related organization(s) for expenses . . . . .		No
<b>1q</b> Reimbursement paid by related organization(s) for expenses . . . . .		No
<b>1r</b> Other transfer of cash or property to related organization(s) . . . . .		No
<b>1s</b> Other transfer of cash or property from related organization(s) . . . . .		No

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) FOUNDATION FOR RESEARCH AND CHEMISTRY INITIATIVES	B	2,879,907	CASH



Schedule R (Form 990) (Rev. 1-2025)

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**Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

Return Reference	Explanation
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Schedule R (Form 990) (Rev. 1-2025)

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