

Return of Organization Exempt From Income Tax

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

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2017 calendar year, or tax year beginning **JUL 1, 2017** and ending **JUN 30, 2018**

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	C Name of organization THE ARC NEW LONDON COUNTY, INC.		D Employer identification number 06-6010477
	Doing business as		E Telephone number 860-889-4435
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 11,861,576.
	125 SACHEM STREET		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code NORWICH, CT 06360		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
F Name and address of principal officer: TERRENCE HICKEY SAME AS C ABOVE		H(c) Group exemption number ▶	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.THEARCNLC.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1952 M State of legal domicile: CT	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO PROVIDE EDUCATIONAL, VOCATIONAL, RECREATIONAL AND SOCIAL PROGRAMS DESIGNED TO FULLY		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	456
	6 Total number of volunteers (estimate if necessary)	6	20
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	7,650.
b Net unrelated business taxable income from Form 990-T, line 34	7b	2,599.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	10,002,039.	10,176,645.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,780,062.	1,629,982.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,806.	3,520.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-9,409.	13,159.
12	11,777,498.	11,823,306.	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	9,051,632.	8,908,232.
	16 a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,728,619.	2,650,761.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	11,780,251.	11,558,993.
19 Revenue less expenses. Subtract line 18 from line 12	-2,753.	264,313.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	5,897,618.	6,175,347.
	22 Net assets or fund balances. Subtract line 21 from line 20	3,428,811.	3,442,227.
22	2,468,807.	2,733,120.	

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.

Sign Here	Signature of officer		Date		
	TERRENCE HICKEY, CHIEF FINANCIAL OFFICER				
Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	PAUL BALLASY	PAUL BALLASY	12/17/18		P00852868
Preparer Use Only	Firm's name ▶ COHNREZNICK LLP	Firm's EIN ▶ 22-1478099			
	Firm's address ▶ 350 CHURCH STREET, 12TH FLOOR HARTFORD, CT 06103	Phone no. 959-200-7000			

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Form **990**

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

OMB No. 1545-0047

2017

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A For the 2017 calendar year, or tax year beginning **JUL 1, 2017** and ending **JUN 30, 2018**

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	C Name of organization The Arc of Quinebaug Valley, Inc.		D Employer identification number 06-0847364
	Doing business as		E Telephone number 860-774-2827
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 687 Cook Hill Road		G Gross receipts \$ 5,208,615.
	City or town, state or province, country, and ZIP or foreign postal code Danielson, CT 06239		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	F Name and address of principal officer: Susan Desrosiers same as C above		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			H(c) Group exemption number ▶
J Website: ▶ www.qvarc.org			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1952	M State of legal domicile: CT

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: The Arc of Quinebaug Valley, Inc. is a nonprofit human services agency committed to supporting		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	
	6 Total number of volunteers (estimate if necessary)	6	
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	
b Net unrelated business taxable income from Form 990-T, line 34	7b		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 461,148.	Current Year 121,470.
	9 Program service revenue (Part VIII, line 2g)	5,082,502.	5,058,244.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,541.	4,169.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,843.	2,831.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,548,034.	5,186,714.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,073,184.	3,784,769.
	16 a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	35,821.	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,212,134.	1,236,467.	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,285,318.	5,021,236.	
19 Revenue less expenses. Subtract line 18 from line 12	262,716.	165,478.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 3,620,040.	End of Year 3,667,201.
	21 Total liabilities (Part X, line 26)	2,067,147.	1,948,830.
	22 Net assets or fund balances. Subtract line 21 from line 20	1,552,893.	1,718,371.

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.

Sign Here	Signature of officer		Date
	Susan Desrosiers, Executive Director		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	James E. Traester, CPA		
Preparer Use Only	Firm's name ▶ Apicella, Testa & Company, P.C.	Firm's EIN ▶ 06-0876812	Check if self-employed <input type="checkbox"/> PTIN P00179318
	Firm's address ▶ 680 Bridgeport Avenue Shelton, CT 06484	Phone no. 203-925-9494	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No