### PUBLIC DISCLOSURE COPY

MALLORY FAIRLESS 11/01/2024

90 (2023)			Page 2
		art III	🗆
			Yes 🗌 No
Did the organization cease conduc	ting, or make significant changes in		 Yes □ No
Describe the organization's program expenses. Section 501(c)(3) and 501	service accomplishments for each of its (c)(4) organizations are required to repo		•
(Code:) (Expenses \$	including grants of \$	) (Revenue \$	)
	Check if Schedule O contains Briefly describe the organization's mis- Did the organization undertake any s prior Form 990 or 990-EZ? If "Yes," describe these new services Did the organization cease conduct services?	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this P         Briefly describe the organization's mission:         Did the organization undertake any significant program services during the yr prior Form 990 or 990-EZ?         If "Yes," describe these new services on Schedule O.         Did the organization cease conducting, or make significant changes in I services?         If "Yes," describe these changes on Schedule O.         Describe the organization's program service accomplishments for each of its expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the total expenses, and revenue, if any, for each program service reported.	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III         Briefly describe the organization's mission:

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	90 (2023)			Page
Part	V Checklist of Required Schedules		N	N. 1 -
	$\int dt = \frac{1}{2} \int dt$		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		

Form 9	90 (2023)		F	Page 4
Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
-1		240		

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Form 99	90 (2023)				F	Page 5
Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a				
b	If at least one is reported on line 2a, did the organization file all required federal employment ta	ax retu	ırns? .	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	?.		3a		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Sch	hedule	θO.	3b		
4a	At any time during the calendar year, did the organization have an interest in, or					

Joint Commission on Accreditation of Healthcare Organizations - 36-2229255

Form 990 (2023)

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Form 990 (202		Trustaga Kai	. <b>F</b> .m.				리니니	aba	at Companyat		Page
Part VII	Section A. Officers, Directors,	Trustees, Key	/ Emp	bioy			αΗι	gne	est Compensate	ea Employees	(continued
	(A) Name and title	(B) Average hours	verage box, unless person is b						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation
(15)							-				
(16)											
(17)											
(18)											
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Part IX Statement of Functional Expenses

Form 990 (2023)

	Check if Schedule O contains a response or note to any line in this Par	t X		
		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing		1	
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			
~			5	
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
7	Notes and loans receivable, net		7	

Form 9	90 (2023)	Page 12
Par	t XI Reconciliation of Net Assets	
	Check if Schedule O contains a response or note to any line in this Part XI	
1	Total revenue (must equal Part VIII, column (A), line 12).	

Part VII

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

(A) Name and Title	(B) Average hours	verage hours		C) Po	ositior	ר ply)		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(25) LESLIE KROHN	10.0									
EVP & CHIEF BRAND & COMMUNICATIONS OFCR (SINCE DEC)	<u>40.0</u> 0.0			1					I	
(26) ERIC SCHLESINGER, MBA, BA	1.0	1							-	
COMMISSIONER	0.0	•								
(27) JAY A. GREGORY, MS, MD	1.0	1								
COMMISSIONER	0.0	•								•
(28) MARVIN STROHSCHEIN, JR., DDS	2.0	1								
COMMISSIONER	0.0								_	_
(29) MICHAEL B. SIMON, MD, MBA, FASA	2.0	1								
COMMISSIONER	0.0									_
(30) NAJMEDIN MESHKATI, PHD, CPE	1.0	1								
COMMISSIONER	0.0									_
(31) SUSAN FOX, MBA, BSN	1.0	1								
COMMISSIONER	0.0									
(32) JOSEPH J. PARKS, MD	1.0	1								
COMMISSIONER	1.0									
(33) ERIC LANGSHUR	1.0	1								
COMMISSIONER	0.0									•
(34) MICHAEL SUK, MD, JD, MPH, MBA, FACS	2.0	1		1					I	
VICE CHAIR	1.0									
(35) ANA L. ENGLISH, MBA	1.0	1								
COMMISSIONER	0.0							•		<b>■</b>
(36) ANDREW C. DREYFUS, BA	2.0	1								
COMMISSIONER	0.0							•		•
(37) CHRISTOPHER A. HART, MENG, JD	1.0	1						_	-	-
COMMISSIONER	0.0	•								
(38) ENA WILLIAMS, PHD, MBA, RN, CENP, FAAN	1.0	1								
COMMISSIONER	0.0									
(39) JILL HOGGARD GREEN, PHD, RN	2.0	1								
COMMISSIONER	2.0									
(40) LENWORTH M. JACOBS, JR., MBBS, MPH, DSC (HON), FACS, FWACS (HON)	1.0	~								
COMMISSIONER	0.0							-	_	-
(41) MELINDA L. ESTES, MD, MBA	1.0	1						_	_	_
COMMISSIONER	0.0	V							I	

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SCHE	DULE	Α
(Form	990)	

## Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.
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23 Open to Public Inspection

OMB No 1545-0047

Name of the organization

Employer identification number 36-2229255

JOINT COMMISSION ON ACCREDITATION OF HEALTHCARE ORGANIZATIONS Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I

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

- 1  $\square$  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 2
- A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3
- A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the Δ hospital's name, city, and state:
- An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.)
- A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6
- An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.)
- A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8
- An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- of its support from contributions, membership fees, and gross 4 An organization that normally receives (1) more than 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than of it support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) ofits
- $\square$  An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12a,
  - Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
  - b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
  - Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, С its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
  - Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V.
  - Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III е functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . . .

Provide the following information about the supported organization(s) a

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Joint Commission on Accreditation of Healthcare Organizations

Page 2

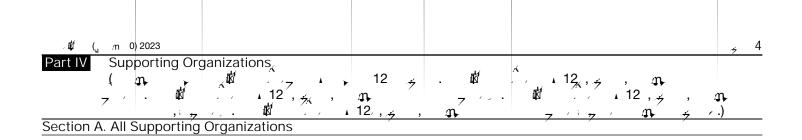
Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

#### Section A. Public Support

Caler	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						

3 The value of services or facilities furnished by a governmental unit to the

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



Schedule A (Form 990) 2023

	le A (Form 990) 2023				Page <b>7</b>
Part	V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizati	ons (continued)		
Secti	on D—Distributions				Current Year
1	1 Amounts paid to supported organizations to accomplish exempt purposes				
2	Amounts paid to perform activity that directly furthers exer		ed		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purple	oses of supported organ	izations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required-	-provide details in Part	VI)		
6	Other distributions (describe in Part VI). See instructions.	•		6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10				10	
Secti	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023		(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required—explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
e					

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

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## Political Campaign and Lobbying Activities

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

Department of the Treasury Internal Revenue Service 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.



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.

ıle C (Form 990) 2023			Page 2
II-A Complete if the organization is section 501(h)).	exempt under section 501(c)(3) and filed For	m 5768 (election	under
		d group member's	name, address,
heck 🔲 if the filing organization checked b	ox A and "limited control" provisions apply.		
•		(a) Filing organization's totals	(b) Affiliated group totals
Total lobbying expenditures to influence a Total lobbying expenditures (add lines 1a Other exempt purpose expenditures Total exempt purpose expenditures (add Lobbying nontaxable amount. Enter th	I legislative body (direct lobbying)		
If the amount on line 1e, column (a) or (b) is:           not over \$500,000,           over \$500,000 but not over \$1,000,000,           over \$1,000,000 but not over \$1,500,000,           over \$1,500,000 but not over \$1,500,000,           over \$1,500,000 but not over \$17,000,000,           over \$17,000,000,	The lobbying nontaxable amount is:           20% of the amount on line 1e.           \$100,000 plus 15% of the excess over \$500,000.           \$175,000 plus 10% of the excess over \$1,000,000.           \$225,000 plus 5% of the excess over \$1,500,000.           \$1,000,000.		
	section 501(h)). heck if the filing organization belongs to EIN, expenses, and share of exce heck if the filing organization checked b Limits on Lobbyin (The term "expenditures" mean Total lobbying expenditures to influence p Total lobbying expenditures to influence a Total lobbying expenditures (add lines 1a Other exempt purpose expenditures Total exempt purpose expenditures (add lines 1a Other exempt purpose expenditures (add lines 1a Other exempt purpose expenditures (add lines 1a If the amount on line 1e, column (a) or (b) is: not over \$500,000, over \$1,000,000 but not over \$1,500,000, over \$1,500,000, over \$17,000,000,	section 501(h)).         heck ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliate EIN, expenses, and share of excess lobbying expenditures).         heck ☐ if the filing organization checked box A and "limited control" provisions apply.         Limits on Lobbying Expenditures         (The term "expenditures" means amounts paid or incurred.)         Total lobbying expenditures to influence public opinion (grassroots lobbying)         Total lobbying expenditures to influence a legislative body (direct lobbying)         Total lobbying expenditures (add lines 1a and 1b)         Total lobbying expenditures (add lines 1c and 1d)         Other exempt purpose expenditures (add lines 1c and 1d)         Lobbying nontaxable amount. Enter the amount from the following table in both columns.         If the amount on line 1e, column (a) or (b) is:       The lobbying nontaxable amount is:         not over \$500,000,       20% of the amount on line 1e.         over \$500,000 but not over \$1,000,000,       \$175,000 plus 15% of the excess over \$500,000.         over \$1,000,000 but not over \$1,500,000,       \$225,000 plus 5% of the excess over \$1,500,000.	section 501(h)).         heck       if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's EIN, expenses, and share of excess lobbying expenditures).         heck       if the filing organization checked box A and "limited control" provisions apply.         Limits on Lobbying Expenditures       (a) Filing organization's totals         (The term "expenditures" means amounts paid or incurred.)       (a) Filing organization's totals         Total lobbying expenditures to influence public opinion (grassroots lobbying)          Total lobbying expenditures (add lines 1a and 1b)          Other exempt purpose expenditures (add lines 1c and 1d)          Lobbying nontaxable amount. Enter the amount from the following table in both columns.          If the amount on line 1e, column (a) or (b) is:       The lobbying nontaxable amount is:         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 \$1,000,000,       \$225,000 plus 5% of the excess over \$1,000,000.         over \$17,000,000,       \$1,000,000.

**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 - Identifier	Explanation
LINE 1 - DETAILED DESCRIPTION OF THE	THE JOINT COMMISSION MADE DIRECT CONTACT WITH LEGISLATORS OR THEIR STAFFS AND PAID \$180,860 IN FEES TO A THIRD-PARTY FIRM FOR PROFESSIONAL SERVICES WHICH INCLUDED LOBBYING ACTIVITIES. THESE ACTIVITIES RELATED TO HEALTH CARE LEGISLATION AND RELATED ISSUES THAT THE JOINT COMMISSION CONSIDERS IMPORTANT TO IMPROVE PATIENT SAFETY AND QUALITY OF HEALTH CARE.

Department of the Treasury Internal Revenue Service

# Part VII Investments—Other Securities Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (including name of security) (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) Financial derivatives (1) Financial derivatives (1) Financial derivatives (1) Financial derivatives

(2) Closely held equity interests	
(3) Other	
(A)	
(B)	
(C)	

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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 - Identifier	Explanation		
SCHEDULE D, PART XI, LINE	(a) Description	(b) Amount	
2(D) - OTHER REVENUES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM	TRANSFER OF UNDESIGNATED NET ASSETS FROM AFFLIATE CO - JOINT COMMISSION RESOURCES, INC. EIN 36-3521721	6,948,919	
990	CHANGE IN UNRECOGNIZED NET DEFINED-BENEFIT PLAN COSTS NOT YET RECOGNIZED IN NET PERIODIC BENEFIT COST	6,630,954	
SCHEDULE D, PART XII, LINE	(a) Description	(b) Amount	
4(B) - OTHER EXPENSES	CHANGE IN NET PERIODIC PENSION COSTS OTHER	- 491,341	

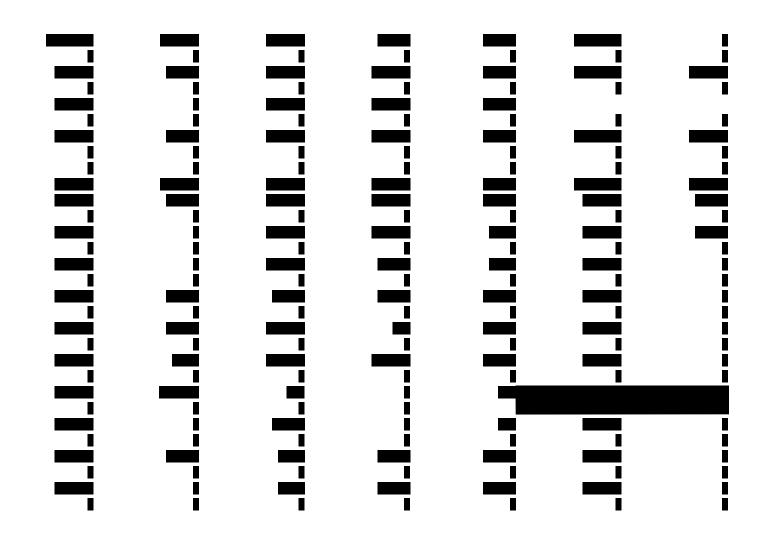
**Supplemental Information.** Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1 and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference - Identifier	Explanation
SCHEDULE D, PART X, LINE 2 - FIN 48 (ASC 740) FOOTNOTE	THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE JOINT COMMISSION AND ITS AFFILIATES ARE EXEMPT FROM FEDERAL INCOME TAXATION UNDER SECTION 501(A) AS ORGANIZATIONS DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC). THE JOINT COMMISSION AND ITS AFFILIATES ARE SUBJECT TO INCOME TAXES ON INCOME DETERMINED TO BE UNRELATED BUSINESS TAXABLE INCOME (UBTI), WHICH IS TAXED AT THE CORPORATE INCOME TAX RATE.
	THE JOINT COMMISSION CONTINUES TO EVALUATE ITS TAX POSITIONS PURSUANT TO THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICATION (ASC) SUBTOPIC 740-10, INCOME TAXES OVERALL. AS OF DECEMBER 31, 2023 AND 2022, THE JOINT COMMISSION BELIEVES IT HAS TAKEN NO SIGNIFICANT UNCERTAIN TAX POSITIONS.
	THE JOINT COMMISSION AND EACH OF ITS AFFILIATES HAVE BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER IRC SECTION 509(A) AND MAY RECEIVE DEDUCTIBLE CONTRIBUTIONS UNDER SECTION 170(C). BOTH THE JOINT COMMISSION AND JCR ARE ORGANIZATIONS THAT NORMALLY RECEIVE MORE THAN 33 1/3% OF THEIR SUPPORT FROM CONTRIBUTIONS, MEMBERSHIP FEES, AND GROSS RECEIPTS FROM ACTIVITIES RELATED TO ITS EXEMPT FUNCTIONS AND NO MORE THAN 33 1/3% OF ITS SUPPORT FROM GROSS INVESTMENT INCOME AND UNRELATED BUSINESS TAXABLE INCOME UNDER IRC SECTION 509(A)(2). NATIONAL QUALITY FORUM IS AN ORGANIZATION THAT NORMALLY RECEIVES A SUBSTANTIAL PART OF ITS SUPPORT FROM THE GENERAL PUBLIC UNDER SECTION 170(B)(1)(A)(VI).

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Part II Grants a	and Other As: 15, _	sistance to Orga	nizations or Entities	Outside the Unite \$5,000. ∡ _	ed States.		7,7,′	, , , , , , , , , , , , , , , , , , ,
1 (a), 7 m	(b). (7,7,7)	(C).	(d) 44. 7	(e) m載 7 7	(f) L <sub>2</sub> , 10 m	(g) m k 7 7 7	(h):	(i) L ( <sup>7</sup> , ⊥, , 7•• 7 7, )
(1)								

Part III Grants and Other Assistance to Individuals Outside the United States.

. 6	· • •	m 0) 202													<u>*</u> 4
Part	IV F	oreign	Fo	rms											
1	the or Corpo	ganizati ration (s	on r see	ڑ _ may be Instruct	 requi	, red to fi or Form	le For 926)	n 926	5, Retur	n by a l 	J.S. <sup>7</sup> Tr	ansfer	or of Property to a Foreign	Yes	🗌 No
2	Recei	pt of Ce	rtair	h Foreig	gn Gift	ts, and/o	þr Fþrr	n 352	0-A, An	Fo Repo nual Info	ort Trar ormatio	nsactio on Reti	Yes," the organization may ns With Foreign Trusts and urn of Foreign Trust With a 990)	Yes	🗌 No
3	the or Certai	ganizatio n Foreig	7 on r in C	nay be orporat	7 requii tions (	red to fil see Ins	le Forr tructio	n 547 ns for	7, Infor Form 5	mation F 471)	Return	√ 戱 of U.S	, If "Yes," Persons With Respect to	Yes	🗌 No
4		7 nation R (see Ins	etui	n by a	Shar	eholder	ofa	Passi	ve Fore	eign Inve	estmer	nt Com	m n n	☐ Yes	🗌 No
5	1 /	7	7	7	7		<b>.</b>		7	•7		<b>,</b> 14	7 <sup>1</sup> 7 <sup>If</sup> "Yes,"		



## Joint Commission on Accreditation of Healthcare Organizations - 36-2229255

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SCHEDULE K	
(Form 990)	

## Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. Attach to Form 990.

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

Department of the Treasury Internal Revenue Service

Name of the organization

JOINT COMMISSION ON ACCREDITATION OF HEALTHCARE ORGANIZATIONS

Part I Bond Issues (h) On behalf of (i) Pooled financing (c) CUSIP # (b) Issuer EIN (d) Date issued (e) Issue price (f) Description of purpose (g) Defeased (a) Issuer name issuer Yes No Yes No Yes No (SEE STATEMENT) 4 А ILLINOIS FINANCE AUTHORITY 86-1091967 000000000 08/26/2015 16,000,000 4 4 В С D Proceeds Part II В С D А Amount of bonds retired . . 1 8,510,000 . . 2 Amount of bonds legally defeased . . . . . . . . . . . . . . . 0 3 Total proceeds of issue 16,026,366

4	Gross proceeds in reserve funds		0						
5	Capitalized interest from proceeds		0						
6	Proceeds in refunding escrows		0						
7	Issuance costs from proceeds		229,946						
8	Credit enhancement from proceeds		0						
9	Working capital expenditures from proceeds		0						
10	Capital expenditures from proceeds		15,796,420						
11	Other spent proceeds		0						
12	Other unspent proceeds		0						
13	Year of substantial completion		2016						
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?		4						
15	Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		4						
16	Has the final allocation of proceeds been made?	4							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	4							
	en en ser de De desettes en Ast Nisting, en en de al la structioner for Energia 000								

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

Schedule K (Form 990) 2023



Open to Public

Inspection

Employer identification number

36-2229255

OMB No. 1545-0047

		A	6	3	(	)	C	)
4a Has the organization or the governmental issuer entered into a chedge with respect to the bond issue?		No	Yes	No	Yes	No	Yes	No
b Name of provider				•				
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (G	iIC)? .							
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC sa								

**Supplemental Information.** Supplemental Information Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

Return Reference - Identifier	Explanation	]
	HEDRIDER BOGHEIZED UNDER HEIBEREINTNOT BEGINQUES & PONCOUND OF ACCHESCOLOTTATIO (1969) O. 0.0 1960 (1990) OF AA CHESCOLOTTATION (199	

SCHEDULE O	Supplemental Information to Form 990 or 990-EZ		OMB No. 1545-0047
(Form 990)	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.		2023
Department of Treasury Internal	Attach to Form 990 or 990-EZ.		
Revenue Service	Go to www.irs.gov/Form990 for the latest information.		Open to Public Inspection
Name of the Organization JOINT COMMISSION ON ACC	Employer Ident 36-2229255	ification Number	

Return Reference - Identifier	Explanation
FORM 990, PART I, LINE 1 - BRIEF MISSION	ORGANIZATIONS AND INSPIRING THEM TO EXCEL IN PROVIDING SAFE AND EFFECTIVE CARE OF THE HIGHEST QUALITY AND VALUE.

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 1 -	(CONTINUATION FROM ABOVE)
ORGANIZÁTION MISSION CONTINUED 2 OF 6	SENTINEL EVENT POLICY
	THE JOINT COMMISSION'S SENTINEL EVENT POLICY IS DESIGNED TO HELP HEALTH CARE ORGANIZATIONS TO IDENTIFY THE UNDERLYING CAUSES OF SENTINEL EVENTS AND TAKE ACTION TO PREVENT THEIR RECURRENCE. A SENTINEL EVENT IS AN UNEXPECTED OCCURRENCE INVOLVING DEATH OR SERIOUS PHYSICAL - INCLUDING LOSS OF LIMB OR FUNCTION - OR PSYCHOLOGICAL INJURY, OR THE RISK THEREOF. "RISK THEREOF" MEANS THAT, ALTHOUGH NO HARM OCCURRED ON THIS OCCASION, ANY RECURRENCE WOULD CREATE ANOTHER CHANCE FOR A SERIOUS ADVERSE OUTCOME. ANY TIME A SENTINEL EVENT OCCURS, THE HEALTH CARE ORGANIZATION IS

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 1 -	(CONTINUATION FROM ABOVE)
ORGANIZĂTION MIŜSION CONTINUED 4 OF 6	* SURVEY OF LEADING SUICIDE PREVENTION PRACTICES IN HOSPITALS. FUNDED BY THE PEW CHARITABLE TRUSTS, THIS 2022-2023 STUDY EXPLORES SUICIDE RISK SCREENING PRACTICES (I.E., TARGETED VERSUS UNIVERSAL SCREENING) AND THE PREVALENCE OF LEADING SUICIDE PREVENTION DISCHARGE PRACTICES (I.E., FORMAL SAFETY PLANNING, LETHAL MEANS ASSESSMENT, WARM HANDOFFS WITH OUTPATIENT PROVIDERS, FOLLOW-UP CONTACT POST- DISCHARGE).
	* DEVELOPMENT OF THE HEALTH CARE EQUITY RESOURCE

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 1 - ORGANIZATION MISSION CONTINUED 5 OF 6	(CONTINUATION FROM ABOVE)
	* DEVELOPMENT OF A NEW SUSTAINABLE HEALTHCARE CERTIFICATION (SHC) PROGRAM WHICH AIMS TO ADVANCE DECARBONIZATION IN HEALTH CARE THROUGH HELPING ORGANIZATIONS SET AND MAINTAIN GOALS TO REDUCE THEIR GREENHOUSE GAS EMISSIONS. THIS CERTIFICATION PROGRAM WILL EVALUATE WHETHER HEALTHCARE ORGANIZATIONS HAVE PUT IN PLACE KEY STRUCTURES AND PROCESSES TO IMPROVE ENERGY EFFICIENCY, DECREASE THEIR CARBON FOOTPRINT, AND DECREASE WASTE
	* DEVELOPMENT OF A NEW HEALTH CARE EQUITY (HCE) CERTIFICATION PROGRAM TO RECOGNIZE HOSPITALS AND CRITICAL ACCESS HOSPITALS THAT STRIVE FOR EXCELLENCE IN THEIR EFFORTS TO PROVIDE EQUITABLE CARE, TREATMENT, AND SERVICES. THE NEW CERTIFICATION REQUIREMENTS EMPHASIZE THE STRUCTURES AND PROCESSES THAT HEALTH CARE ORGANIZATIONS NEED TO DECREASE HEALTH CARE DISPARITIES IN THEIR PATIENT POPULATIONS AND PROMOTE DIVERSITY, EQUITY, AND INCLUSION FOR THEIR STAFF.
	* DEVELOPMENT AND REVISION OF WORKPLACE VIOLENCE PREVENTION STANDARDS FOR THE HOME CARE AND BEHAVIORAL HEALTH CARE ACCREDITATION PROGRAMS AND DEVELOPMENT OF A COMPENDIUM TO PROVIDE A STANDARDIZED APPROACH TO HEALTHCARE WORKPLACE VIOLENCE PREVENTION, REPORTING, AND POST-INCIDENT STRATEGIES.
	* REVISION OF EMERGENCY MANAGEMENT (EM) AMBULATORY AND OFFICE BASED SURGERY STANDARDS TO STRENGTHEN ORGANIZATIONS' ABILITY TO PREPARE AND RESPOND TO EMERGENCIES. STANDARDS FOR OTHER ACCREDITATION PROGRAMS WILL BE REVIEWED AND REVISED.
	* REVISIONS TO THE ENVIRONMENT OF CARE AND LIFE SAFETY CODE CHAPTERS WITHIN ALL ACCREDITATION PROGRAMS TO STRENGTHEN ALIGNMENT WITH NFPA CODE.
	* REVISIONS TO ALL STROKE CERTIFICATION PROGRAMS REQUIREMENTS TO ALIGN WITH AMERICAN HEART ASSOCIATION GUIDELINES.
	* ELEVATION OF NEW AND REVISED REQUIREMENTS TO REDUCE HEALTH CARE DISPARITIES FOR JOINT COMMISSION-ACCREDITED AMBULATORY HEALTH CARE ORGANIZATIONS, BEHAVIORAL HEALTH CARE AND HUMAN SERVICES ORGANIZATIONS, CRITICAL ACCESS HOSPITALS, AND HOSPITALS TO NATIONAL PATIENT SAFETY GOALS (NPSGS). THESE ACCREDITATION REQUIREMENTS PROMOTE HEALTH CARE EQUITY AS A QUALITY AND SAFETY PRIORITY.
	* REVISIONS TO INFECTION CONTROL (IC) CHAPTER REQUIREMENTS FOR ALL ACCREDITATION PROGRAMS.
	(CONTINUATION BELOW)

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 1 -	(CONTINUATION FROM ABOVE)
ORGANIZATION MISSION CONTINUED 6 OF 6	THE SPEAK UP INITIATIVES FOR THE GENERAL PUBLIC
	THE JOINT COMMISSION, TOGETHER WITH THE CENTERS FOR MEDICARE AND MEDICAID SERVICES (CMS), CONTINUE TO DEVELOP MATERIALS FOR THE NATIONAL SPEAK UP PROGRAM TO URGE PATIENTS TO TAKE AN ACTIVE ROLE IN PREVENTING HEALTH CARE ERRORS BY BECOMING INVOLVED AND INFORMED PARTICIPANTS ON THE HEALTH CARE TEAM.
	THE SPEAK UP PROGRAM FEATURES BROCHURES, POSTERS AND BUTTONS ON OVER 25 PATIENT SAFETY TOPICS, SUCH AS FIVE THINGS YOU CAN DO TO PREVENT INFECTION, HELP PREVENT ERRORS IN YOUR CARE, OR AVOID A RETURN TRIP TO THE HOSPITAL. SPEAK UP POSTERS ARE AVAILABLE TO THE GENERAL PUBLIC AT NO COST ON THE JOINT COMMISSION'S WEBSITE.
	THE JOINT COMMISSION ALSO DEVELOPED A SERIES OF ANIMATED SPEAK UP VIDEOS TO ENCOURAGE PATIENTS TO SPEAK UP AND BE ACTIVE PARTICIPANTS IN THEIR HEALTH CARE. PRODUCED BY THE JOINT COMMISSION, THESE ENTERTAINING 60-SECOND VIDEOS ARE INTENDED AS PUBLIC SERVICE ANNOUNCEMENTS AND AIR ON THE JOINT COMMISSION'S YOUTUBE CHANNEL, ON THE JOINT COMMISSION WEBSITE, AND IN OTHER VENUES. THE CAST OF CHARACTERS INTRODUCED IN THE VIDEOS ENCOUNTER EVERYDAY SITUATIONS WHERE THEY HAVE TO READ INSTRUCTIONS, INSPECT LABELS, AND "SPEAK UP" TO ASK THEIR DOCTORS AND CAREGIVERS QUESTIONS. THE VIDEOS POINT OUT THAT YOU SHOULD BE JUST AS COMFORTABLE SPEAKING UP ABOUT YOUR HEALTH CARE WHETHER IN A DOCTOR'S OFFICE OR AT THE HOSPITAL. THE VIDEOS HAVE PROVEN TO BE WIDELY POPULAR WITH AUDIENCES ALL OVER THE WORLD, AND HAVE BEEN DOWNLOADED BY ORGANIZATIONS IN MORE THAN 70 COUNTRIES.
	QUALITY CHECK AND QUALITY REPORTS
	QUALITY CHECK OFFERS A COMPREHENSIVE COMPENDIUM OF QUALITY AND SAFETY-RELATED PERFORMANCE INFORMATION ON THE NEARLY 22,000 JOINT COMMISSION-ACCREDITED HEALTH CARE ORGANIZATIONS AND PROGRAMS THROUGHOUT THE UNITED STATES. THESE QUALITY REPORTS MAKE PUBLICLY AVAILABLE SPECIFIC INFORMATION REGARDING ORGANIZATION ACCREDITATION STATUS, PERFORMANCE IN CARING FOR PATIENTS WITH COMMON CONDITIONS (SUCH AS PNEUMONIA) AND COMPLIANCE WITH NATIONAL PATIENT SAFETY GOAL REQUIREMENTS, AMONG OTHER FEATURES. QUALITY REPORTS UTILIZE A USER-FRIENDLY FORMAT WITH CHECKS, PLUSES AND MINUSES TO HELP THE PUBLIC COMPARE HEALTH CARE ORGANIZATION PERFORMANCE IN KEY AREAS.
	OTHER RESOURCES
	THE JOINT COMMISSION'S DASH (DATA ANALYTICS FOR SAFE HEALTHCARE) IS A COLLECTION OF PROPRIETARY BUSINESS INTELLIGENCE TOOLS DEVELOPED TO SUPPORT ORGANIZATIONS AND EMPOWER THEM TO MAKE MORE INFORMED DECISIONS TO DRIVE QUALITY IMPROVEMENT AND REDUCE HARM. THE JOINT COMMISSION PROVIDES DATA TRANSPARENCY IN A CONVENIENT PLATFORM TO POWER PROCESS AND FOCUS ON RELEVANT NEEDS TO DRIVE EFFICIENCY AND EFFECTIVENESS TO IMPROVE CARE RESULTS. THE DASH BUSINESS INTELLIGENCE OFFERINGS INCLUDE ACCELERATE PI™, ILLUMINATE ANALYTICS™, AND SAFER® DASHBOARD. ACCELERATE PI™ ALLOWS A HEALTH CARE ORGANIZATION TO COMPARE TO NATIONAL, STATE, AND AVERAGES FROM JOINT COMMISSION-ACCREDITED ORGANIZATIONS. ILLUMINATE ANALYTICS™ HELPS DRIVE MEANINGFUL, ACTIONABLE CONCLUSIONS FROM DISPARATE DATA SOURCES THAT ENHANCE THE QUALITY AND SAFETY OF THE CARE PROVIDED. SAFER® DASHBOARD EMPOWERS HEALTH CARE LEADERS AND BUSINESS USERS IN THEIR EFFORTS TO DELIVER SAFE, HIGH-QUALITY CARE AND BETTER PRIORITIZE FUTURE IMPROVEMENT EFFORTS.
	ADDITIONAL RESOURCES DEDICATED TO PHYSICIANS, NURSES, AND CONSUMERS ARE AVAILABLE FREE ON THE JOINT COMMISSION'S WEB SITE. SUCH DEDICATED RESOURCES INCLUDE PATIENT SAFETY TOPICS, PHYSICIAN LEADER MONTHLY NEWSLETTER, CORONAVIRUS (COVID-19) RESOURCES, AND THE LATEST TOPICS AROUND NURSING AND NURSES ROLES IN PATIENT SAFETY.
FORM 990, PART VI, LINE 1A - DELEGATE BROAD AUTHORITY TO A COMMITTEE	THE BOARD OF DIRECTORS MAY, BY RESOLUTION, APPOINT AN EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE SHALL CONSIST OF ONE COMMISSIONS APPOINTED BY EACH MEMBER OF THE CORPORATION TO THE BOARD OF COMMISSIONS AND ONE COMMISSIONER APPOINTED BY THE BOARD OF COMMISSIONERS.
	IT SHALL BE THE DUTY OF THE EXECUTIVE COMMITTEE TO EXERCISE THE POWERS OF THE BOARD WHEN THE BOARD IS NOT IN SESSION, INCLUDING, WITHOUT LIMITATION, TO TAKE SUCH EMERGENCY ACTIONS FOR THE BOARD AS MAY BE REQUIRED BETWEEN MEETINGS OF THE BOARD, AND OTHERWISE EXERCISE THE AUTHORITY OF THE BOARD OF COMMISSIONERS IN THE MANAGEMENT OF THE CORPORATION TO THE EXTENT THAT THE BOARD MAY LAWFULLY PROVIDE BY RESOLUTION; COUNCIL WITH THE PRESIDENT REGARDING CERTAIN MATTERS; AND ACT UPON RECOMMENDATION OF THE CHAIR OF THE BOARD ON THE APPOINTMENTS TO THE STANDING COMMITTEES.
FORM 990, PART VI, LINE 3 - DELEGATION OF MANAGEMENT DUTIES	THE JOINT COMMISSION HIRED KIM MICHAEL-LEE THROUGH A CONTRACTUAL AGREEMENT WITH RANDSTAD DIGITAL LLC TO PERFORM THE DUTIES OF CHIEF FINANCIAL OFFICER FROM MAY THROUGH DECEMBER.
FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS	THE JOINT COMMISSION HAS FIVE CORPORATE MEMBERS WHO MUST APPROVE CHANGES TO THE ORGANIZATION'S BYLAWS AND ARTICLES OF INCORPORATION. THE MEMBERS ASSIST WITH APPOINTING COMMISSIONERS TO THE BOARD. IN ADDITION, THE MEMBERS MUST APPROVE THE DISSOLUTION OF THE ORGANIZATION.

Return Reference - Identifier	Explanation
FORM 990, PART VI, LINE 7A - MEMBERS OR STOCKHOLDERS ELECTING MEMBERS OF GOVERNING BODY	SEE NARRATIVE FOR LINE 6
FORM 990, PART VI, LINE 7B - DECISIONS REQUIRING APPROVAL BY MEMBERS OR STOCKHOLDERS	SEE NARRATIVE FOR LINE 6
FORM 990, PART VI, LINE 8B - COMMITTEE AUTHORITY TO ACT ON BEHALF OF GOVERNING BODY	SEE NARRATIVE FOR LINE 1A
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	THE JOINT COMMISSION'S MANAGEMENT, INCLUDING THE CFO, COO, CONTROLLER, CORPORATE COMPLIANCE & PRIVACY OFFICER, AND GENERAL COUNSEL PERFORMED A DETAILED REVIEW OF THE FORM 990 WITH THE PAID TAX PREPARER. ONCE THIS LEVEL OF REVIEW WAS PERFORMED, A THOROUGH WALK THROUGH OF FORM 990 WAS DONE WITH THE FINANCE COMMITTEE PRIOR TO FILING. A COPY OF THE FORM 990 WAS PROVIDED TO THE ENTIRE BOARD OF COMMISSIONERS PRIOR TO FILING. A FINAL FILED PUBLIC DISCLOSURE COPY OF THE RETURN WILL BE PLACED ON THE ORGANIZATION'S WEBSITE FOR THE PUBLIC ONCE ACCEPTED BY THE IRS.
FORM 990, PART 9 0.04706 0.5333	3 rg (FILING.)Tj 2 PART

Joint Commission on Accreditation of Healthcare Organizations - 36-2229255

Page 2

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	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under	(f) Share of total income	(g) Share of end-of- year assets	(I Dispropo alloca		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		j) eral or aging ner?	(k) Percentage ownership
		country)		sections 512-514)			Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)	-											

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.		Yes	No
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?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		
b	Gift, grant, or capital contribution to related organization(s)	1b		
С	Gift, grant, or capital contribution from related organization(s)	1c		
d	Loans or loan guarantees to or for related organization(s)	1d		
е	Loans or loan guarantees by related organization(s)	1e		
f	Dividends from related organization(s)	1f		
g	Sale of assets to related organization(s)	1g		
h	Purchase of assets from related organization(s)	1h		
i	Exchange of assets with related organization(s)	1i		
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		

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Part VI Unrelated Organizations Taxable as a Partnership.	n	7	7	7	✓ 7 `▼	ы <i>m</i> 0, <sub>*Ź</sub>	*	37.	

## Part IV Identification of Related Organizations Taxable as a Corporation or Trust (continued)

(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) Se 512(b contr enti	o)(13) olled
								Yes	No
	SEE STATEMENT	CHINA	JCR	C CORPORATION	(110,789)	54,719	100.00	<	
(2) JOINT COMMISSION ARABIA MANAGEMENT COMPANY 2886 NORTHERN RING ROAD, RIYADH, 13511, OC	SEE STATEMENT	SAUDI ARABIA	JCR	C CORPORATION	1,659,337	2,081,867	100.00	<	

Part	V	I
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**Supplemental Information.** Provide additional information for responses to questions on Schedule R (see instructions).

Return Reference - Identifier	Explanation
SCHEDULE R, PART IV,	