

efile Public Visual Render	ObjectID: 202523229349300717 - Submission: 2025-11-17	TIN: 13-2940919
Form 990 Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax 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 for instructions and the latest information.	OMB No. 1545-0047 2024 Open to Public Inspection

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

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 ACORD CORPORATION Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 150 CLOVE ROAD 11TH FLOOR City or town, state or province, country, and ZIP or foreign postal code LITTLE FALLS, NJ 07424	D Employer identification number 13-2940919 E Telephone number (845) 620-1700 G Gross receipts \$ 51,020,709
I 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	F Name and address of principal officer: WILLIAM PIERONI 150 CLOVE ROAD 11TH FLOOR LITTLE FALLS, NJ 07424	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions. H(c) Group exemption number
J Website: WWW.ACORD.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: 1978 M State of legal domicile: DE

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO PROMOTE THE INTERESTS OF AND IMPROVE THE EFFICIENCY AND EFFECTIVENESS OF ALL TRADING PARTNERS WITHIN THE VARIOUS SEGMENTS OF THE INSURANCE AND RELATED FINANCIAL SERVICES INDUSTRIES.			
	2 Check this box <input type="checkbox"/>			
	3 Number of voting members of the governing body (Part VI, line 1a)	3		18
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4		17
	5 Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5		48
	6 Total number of volunteers (estimate if necessary)	6		22
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a		0
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b		0
Revenue		Prior Year	Current Year	
	8 Contributions and grants (Part VIII, line 1h)	0	0	
	9 Program service revenue (Part VIII, line 2g)	29,849,099	34,350,490	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,083,387	1,273,284	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0	
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	30,932,486	35,623,774	
Expenses				
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,817	1,213	
	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)	7,505,017	8,864,820	
	16a 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)	6,218,783	5,921,357	
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	13,726,617	14,787,390	
	19 Revenue less expenses. Subtract line 18 from line 12	17,205,869	20,836,384	
Net Assets or Fund Balances		Beginning of Current Year	End of Year	
	20 Total assets (Part X, line 16)	80,120,531	113,372,518	
	21 Total liabilities (Part X, line 26)	37,546,049	57,888,739	
	22 Net assets or fund balances. Subtract line 21 from line 20	42,574,482	55,483,779	

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

Sign Here	Signature of officer TANYA KROCHTA EVP & CHIEF ADMIN. OFFICER			Date 2025-11-17	
	Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date 2025-11-17	Check <input type="checkbox"/> if self-employed	PTIN P00543209
	Firm's name PKF O'CONNOR DAVIES ADVISORY LLC			Firm's EIN 33-1374517	
	Firm's address 300 TICE BOULEVARD SUITE 315 WOODCLIFF LAKE, NJ 07677			Phone no. (201) 712-9800	

May the IRS discuss this return with the preparer shown above? See Instructions. Yes No

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form **990** (2024)

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 ASSOCIATION FOR COOPERATIVE OPERATIONS RESEARCH AND DEVELOPMENT ("ACORD") IS A NOT-FOR-PROFIT CORPORATION ORGANIZED TO PROMOTE THE INTERESTS OF AND IMPROVE THE EFFICIENCY AND EFFECTIVENESS OF ALL TRADING PARTNERS WITHIN THE VARIOUS SEGMENTS OF THE INSURANCE AND PROMOTING THE INTERESTS OF AND IMPROVING THE EFFICIENCY AND EFFECTIVENESS OF ALL TRADING PARTNERS WITHIN THE VARIOUS SEGMENTS OF THE INSURANCE AND RELATED FINANCIAL SERVICES INDUSTRIES BY DEVELOPING STANDARDS, SPECIFICATIONS, AND RELATED IMPLEMENTATIONS TOOLS FOR THE ELECTRONIC EXCHANGE OF INFORMATION AND OTHER INFORMATION PROCESSING. ACORD ALSO SERVES THE PUBLIC INTEREST AND THE INTERESTS OF CONSUMERS OF INSURANCE AND RELATED FINANCIAL SERVICES THROUGH ANALYSIS, EDUCATION, STANDARDS SETTING AND RESEARCH & DEVELOPMENT ACTIVITIES CONCERNING THE ELECTRONIC EXCHANGE OF INFORMATION AND OTHER INFORMATION PROCESSING.

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 \$)

PROMOTING THE INTERESTS OF AND IMPROVING THE EFFICIENCY AND EFFECTIVENESS OF ALL TRADING PARTNERS WITHIN THE VARIOUS SEGMENTS OF THE INSURANCE AND RELATED FINANCIAL SERVICES INDUSTRIES BY DEVELOPING STANDARDS, SPECIFICATIONS, AND RELATED IMPLEMENTATIONS TOOLS FOR THE ELECTRONIC EXCHANGE OF INFORMATION AND OTHER INFORMATION PROCESSING. ACORD ALSO SERVES THE PUBLIC INTEREST AND THE INTERESTS OF CONSUMERS OF INSURANCE AND RELATED FINANCIAL SERVICES THROUGH ANALYSIS, EDUCATION, STANDARDS SETTING AND RESEARCH & DEVELOPMENT ACTIVITIES CONCERNING THE ELECTRONIC EXCHANGE OF INFORMATION AND OTHER INFORMATION PROCESSING.

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

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

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

4e Total program service expenses

Form 990 (2024)

Form 990 (2024)

Page 3

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 18 regarding organizational requirements and reporting.

- 19** Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*
- 20a** Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*
- b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?
- 21** Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*

19		No
20a		No
20b		
21		No

Form 990 (2024)

Form 990 (2024)

Page 4

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
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? <i>If "Yes," complete Schedule J</i>	Yes	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		
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>		
26 Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a 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 A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		No
c 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
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30 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
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 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
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34 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>	Yes	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
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>		No
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	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 <input type="checkbox"/>				
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	16		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			
			1c	

Form 990 (2024)

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
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	48		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O			
4a	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)?		Yes	
b	If "Yes," enter the name of the foreign country: UK See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
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?			No
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	7d		
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	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders	11a		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			

a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15 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.	15	Yes	
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No
17 Section 501(c)(21) organizations. 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.	17		

Form 990 (2024)

Form 990 (2024)

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
1a 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.	1a	18	
b Enter the number of voting members included in line 1a, above, who are independent	1b	17	
2 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?	2		No
3 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?	3		No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6 Did the organization have members or stockholders?	6	Yes	
7a 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?	7a	Yes	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	Yes	
b Each committee with authority to act on behalf of the governing body?	8b	Yes	
9 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? If "Yes," provide the names and addresses in Schedule O	9		No

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

		Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a		No
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?	10b		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	Yes	
13 Did the organization have a written whistleblower policy?	13	Yes	
14 Did the organization have a written document retention and destruction policy?	14	Yes	
15 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?			
a The organization's CEO, Executive Director, or top management official	15a	Yes	

b Other officers or key employees of the organization	15b	Yes	
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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?	16b		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed _____
- 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:
 LISA PLUNKETT 150 CLOVE ROAD 11TH FLOOR LITTLE FALLS, NJ 07424 (845) 620-1700

Form **990** (2024)

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	Officer	Key employee	Highest compensated employee	Former			
(1) WILLIAM PIERONI PRESIDENT & CEO	40.00	X		X			2,818,061	0	114,768	
(2) ROBERT KELLY CHAIR	1.00	X		X			0	0	0	
(3) KEVIN TOBIN VICE-CHAIR	1.00	X		X			0	0	0	
(4) COLLEEN BATMAN DIRECTOR	1.00	X					0	0	0	
(5) KIRK BEHRENS DIRECTOR	1.00	X					0	0	0	
(6) CLYDE BERNSTEIN	1.00	X					0	0	0	

DIRECTOR												
(7) RICHARD BRAME DIRECTOR	1.00	X								0	0	0
(8) BILL DEVINE DIRECTOR THRU 03/27/2024	1.00	X								0	0	0
(9) IAN HAYCOCK DIRECTOR THRU 01/19/2024	1.00	X								0	0	0
(10) BOB JAMES DIRECTOR	1.00	X								0	0	0
(11) MICHAEL JONES DIRECTOR	1.00	X								0	0	0
(12) JOHN KELLINGTON DIRECTOR	1.00	X								0	0	0
(13) MARK KNIPFER DIRECTOR THRU 01/19/2024	1.00	X								0	0	0
(14) VENKAT KRISHNAMOORTHY DIRECTOR	1.00	X								0	0	0
(15) JENNIFER KYUNG DIRECTOR	1.00	X								0	0	0
(16) PAUL LEHMANN DIRECTOR	1.00	X								0	0	0
(17) DAVE MATCHAM FCII DIRECTOR	1.00	X								0	0	0

Form 990 (2024)

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) PATRICK MOLINEUX DIRECTOR	1.00	X						0	0	0
(19) ROBERT RUSBULDT DIRECTOR THRU 01/19/2024	1.00	X						0	0	0
(20) DR CHRISTIAN SCHAFFER DIRECTOR	1.00	X						0	0	0
(21) DR RALF SCHNEIDER DIRECTOR THRU 01/19/2024	1.00	X						0	0	0
(22) CHARLES SYMINGTON DIRECTOR	1.00	X						0	0	0
(23) ABEL TRAVIS DIRECTOR	1.00	X						0	0	0
(24) TANYA J KROCHTA COO	40.00			X				630,292	0	118,183

(25) ANDREW J ZUCKERMAN SVP GOVT. AFFAIRS THRU 02/29/2024	40.00				X			262,194	0	55,452
(26) MARIA LOURDES SORIANO SVP EDUCATION, CONSULTING & ADVOCACY	40.00				X			336,183	0	81,577
(27) DAVID STERNER SVP, RESEARCH & DEVELOPMENT	40.00				X			294,964	0	67,850
(28) LISA PLUNKETT SVP OF FINANCE & OPERATIONS	40.00				X			221,704	0	96,135
(29) MICHAEL DI STEPHAN SVP GOVERNMENT AFFAIRS & GEN. COUNSEL	40.00					X		239,191	0	85,031
(30) RICHARD FLYNN VP COMMUNICATIONS	40.00					X		167,015	0	37,456
(31) SEAN STEWART VP COMMUNICATIONS	40.00					X		213,844	0	92,601
(32) KAREN MOTTLEY BUSINESS ARCHITECT, L&A	40.00					X		152,465	0	62,774
(33) YOLANDA AUSTIN SENIOR DIRECTOR, L&A	40.00					X		156,504	0	51,411
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								5,492,417	0	863,238

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 19

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 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	
5 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
PHILIP BROWN, BURTREE COTTAGE HEBDEN ROAD GRASSINGTON, NORTH YORKSHIRE UK	CONSULTING	248,365
INDEPENDENT INSURANCE AGENTS & BROKERS O 172 S PEYTON STREET ALEXANDRIA, VA 22314	MARKETING SERVICES	200,000
OMNIA PARATUS 9 BURRINGTON GORGE WESTFIELD, NJ 07090	COMMUNICATIONS	180,000

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 3

Form 990 (2024)

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
--	----------------------	-------------------------------------------	-----------------------------------	-----------------------------------------------------------

Federated campaigns	1a
Contributions, Gifts, Grants, Membership dues	1b

OtherAmt	
Similar	
Amounts	
1c Fundraising events	1c
d Related organizations	1d
e Government grants (contributions)	1e
f All other contributions, gifts, grants, and similar amounts not included above	1f
g Noncash contributions included in lines 1a - 1f:\$	1g
h Total. Add lines 1a-1f	

		Business Code				
Program Service Revenue	2a MEMBERSHIP DUES					
		524298	14,894,561	14,894,561		
	b SUBSCRIPTION FEES					
		524298	12,511,250	12,511,250		
	c PRODUCT AND OTHER SERVICES					
		524298	6,944,679	6,944,679		
	d					
e						
f All other program service revenue.						
g Total. Add lines 2a-2f.			34,350,490			
3 Investment income (including dividends, interest, and other similar amounts)			1,268,250		1,268,250	
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
Other Revenue	6a Gross rents	(i) Real				
		(ii) Personal				
	b Less: rental expenses	6b				
	c Rental income or (loss)	6c				
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities	15,401,969			
		(ii) Other				
		b Less: cost or other basis and sales expenses	7b	15,396,935		
	c Gain or (loss)	7c	5,034			
	d Net gain or (loss)			5,034		5,034
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						

10a Gross sales of inventory, less returns and allowances	10a				
b Less: cost of goods sold	10b				
c Net income or (loss) from sales of inventory					
11a	Business Code				
b					
Other Revenue Misc Amt					
d All other revenue					
e Total. Add lines 11a-11d					
12 Total revenue. See instructions		35,623,774	34,350,490	0	1,273,284

Form 990 (2024)

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,213			
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	5,119,849			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,500,474			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	933,468			
9 Other employee benefits	441,421			
10 Payroll taxes	869,608			
11 Fees for services (non-employees):				
a Management				
b Legal	250,334			
c Accounting	140,009			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	50,000			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	359,361			
12 Advertising and promotion	88,446			
13 Office expenses	763,708			
14 Information technology	618,004			
15 Royalties				
16 Occupancy	221,097			
17 Travel	344,359			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				

19 Conferences, conventions, and meetings	9,261		
20 Interest			
21 Payments to affiliates			
22 Depreciation, depletion, and amortization	522,874		
23 Insurance	179,668		
24 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.)			
a VALUE ADDED TAX (VAT)	1,862,273		
b EXCISE TAXES	414,501		
c MISCELLANEOUS EXPENSES	50,832		
d TRAINING & EDUCATION	27,962		
e All other expenses	18,668		
25 Total functional expenses. Add lines 1 through 24e	14,787,390		
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).			

Form 990 (2024)

Form 990 (2024)

Page 11

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
Assets	1 Cash—non-interest-bearing	2,073,575	1	1,139,987
	2 Savings and temporary cash investments	6,572,507	2	14,714,025
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	1,962,910	4	304,701
	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	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	503,601	9	675,363
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,993,172		
	b Less: accumulated depreciation	10b 1,866,214	170,471	10c 126,958
	11 Investments—publicly traded securities	40,913,195	11	38,855,817
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets	1,085,632	14	984,681
	15 Other assets. See Part IV, line 11	26,838,640	15	56,570,986
16 Total assets. Add lines 1 through 15 (must equal line 33)	80,120,531	16	113,372,518	
Liabilities	17 Accounts payable and accrued expenses	3,963,193	17	5,113,849
	18 Grants payable		18	
	19 Deferred revenue	11,829,240	19	20,869,654
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	21,753,616	25	31,905,236

Net Assets or Fund Balances	26	Total liabilities. Add lines 17 through 25	37,546,049	26	57,888,739	
	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.					
	27	Net assets without donor restrictions	42,574,482	27	55,483,779	
	28	Net assets with donor restrictions		28		
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds		29		
	30	Paid-in or capital surplus, or land, building or equipment fund		30		
	31	Retained earnings, endowment, accumulated income, or other funds		31		
	32	Total net assets or fund balances	42,574,482	32	55,483,779	
	33	Total liabilities and net assets/fund balances	80,120,531	33	113,372,518	

Form 990 (2024)

Form 990 (2024)

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	35,623,774
2	Total expenses (must equal Part IX, column (A), line 25)	2	14,787,390
3	Revenue less expenses. Subtract line 2 from line 1	3	20,836,384
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	42,574,482
5	Net unrealized gains (losses) on investments	5	1,947,321
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-9,874,408
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	55,483,779

Part XII Financial Statements and Reporting

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

		Yes	No
1	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.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
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	
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	Yes	
3a	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	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.		

Form 990 (2024)

Form 990 (2024)

Additional Data

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Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

efile Public Visual Render	ObjectID: 202523229349300717 - Submission: 2025-11-17	TIN: 13-2940919
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 <div style="font-size: 2em; font-weight: bold; color: green;">2024</div> 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.

Name of the organization ACORD CORPORATION	Employer identification number 13-2940919
-----------------------------------------------	----------------------------------------------

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."

2 Political campaign activity expenditures. See instructions ▶ \$ _____

3 Volunteer hours for political campaign activities. See instructions

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

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? Yes No

4a Was a correction made? Yes No

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).

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 ▶ \$ _____

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b..... ▶ \$ _____

4 Did the filing organization file **Form 1120-POL** for this year? 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				
2				
3				
4				
5				
6				

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.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 65%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	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 \$1,500,000	\$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.		
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 \$1,500,000	\$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.													
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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2024

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 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:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications or published or broadcast statements?			

f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	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
1	Were substantially all (90% or more) dues received nondeductible by members?	1	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	Yes
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	No

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."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3	
4	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?	4	
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
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Schedule C (Form 990) 2024

Additional Data

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Software ID:
Software Version:

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Table with 2 columns: Name of the organization (ACORD CORPORATION) and Employer identification number (13-2940919)

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

Table with 3 columns: Question number, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

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

Table with 3 columns: Question number, Description, and Yes/No checkboxes. Includes questions 1-9 regarding conservation easements.

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

Table with 3 columns: Question number, Description, and Yes/No checkboxes. Includes questions 1a-2b regarding art and historical treasures.

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

Page 2

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:
Table with columns: Amount, 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance
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.

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g 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 If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?
3b
4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Table with 4 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include: 1a Land, b Buildings, c Leasehold improvements, d Equipment (with values 1,993,172 and 1,866,214), e Other, Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 126,958

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
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (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	15,882
(2) DUE FROM ACORD SOLUTIONS GROUP	55,355,003
(3) OPERATING LEASE - RIGHT OF USE ASSETS	223,871
(4) OVERFUNDED PENSION OBLIGATION	976,230
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	56,570,986

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
DEFERRED COMPENSATION LIABILITY	1,767,748

OPERATING LEASE LIABILITIES	223,872
INVESTMENT IN SUBSIDIARY	29,913,616
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	31,905,236

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	47,116,240
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	1,947,321
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	9,595,145
e	Add lines 2a through 2d	2e	11,542,466
3	Subtract line 2e from line 1	3	35,573,774
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	50,000
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	50,000
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	35,623,774

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

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

1	Total expenses and losses per audited financial statements	1	34,206,943
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	19,479,262
e	Add lines 2a through 2d	2e	19,479,262
3	Subtract line 2e from line 1	3	14,727,681
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	50,000
b	Other (Describe in Part XIII.)	4b	9,709
c	Add lines 4a and 4b	4c	59,709
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	14,787,390

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:	ACORD ACCOUNTS FOR UNCERTAINTY IN INCOME TAXES USING A RECOGNITION THRESHOLD OF MORE-LIKELY-THAN-NOT TO BE SUSTAINED UPON EXAMINATION BY THE APPROPRIATE TAXING AUTHORITY. MEASUREMENT OF THE TAX UNCERTAINTY OCCURS IF THE RECOGNITION THRESHOLD IS MET. MANAGEMENT HAS DETERMINED THAT ACORD HAD NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION OR DISCLOSURE. ACORD IS NO LONGER SUBJECT TO EXAMINATION BY THE APPLICABLE TAXING JURISDICTIONS FOR YEARS PRIOR TO 2021.
PART XI, LINE 2D - OTHER ADJUSTMENTS:	REVENUES FROM CONSOLIDATED ENTITY 9,595,145.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	EXPENSES FROM CONSOLIDATED ENTITY 19,471,609. LOSS ON DISPOSAL 7,653.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	CHANGE IN ACCRUED PENSION LIABILITY TO BE RECOGNIZED IN FUTURE PERIODS 9,709.

Additional Data

[Return to Form](#)

Software ID:
Software Version:

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

Statement of Activities Outside the United States

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 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization ACORD CORPORATION

Employer identification number

13-2940919

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.)

Table with 6 columns: (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), (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. Includes sub-totals and totals for 3a and 3b.

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

Table with 9 columns: (a) Name of organization, (b) IRS code section and EIN (if applicable), (c) Region, (d) Purpose of grant, (e) Amount of cash grant, (f) Manner of cash disbursement, (g) Amount of noncash assistance, (h) Description of noncash assistance, (i) Method of valuation (book, FMV, appraisal, other)

Schedule J (Form 990)

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 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization ACORD CORPORATION

Employer identification number 13-2940919

Part I Questions Regarding Compensation

Table with 3 columns: Question, Yes, No. Contains questions 1a through 9 regarding compensation reporting, including travel, housing, and severance.

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.

Table with 8 columns: (A) Name and Title, (B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC (Base, Bonus & incentive, Other reportable), (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. Lists individuals like WILLIAM PIERONI, TANYA J KROCHTA, MARIA LOURDES SORIANO SVP, DAVID STERNER, and MICHAEL DI STEPHAN.

7 LISA FLYNN
SVP OF FINANCE & OPERATIONS

(i)	173,230	40,000	2,346	30,500	65,635	317,839	0
(ii)	0	0	0	0	0	0	0

7 ANDREW J ZUCKERMAN SVP
GOVT. AFFAIRS THRU 02/29/2024

(i)	36,683	98,220	127,291	4,231	51,221	317,646	0
(ii)	0	0	0	0	0	0	0

8 SEAN STEWART
VP COMMUNICATIONS

(i)	107,457	106,044	343	17,595	75,006	306,445	0
(ii)	0	0	0	0	0	0	0

9 KAREN MOTTLEY
BUSINESS ARCHITECT, L&A

(i)	142,693	7,000	2,772	10,560	52,214	215,239	0
(ii)	0	0	0	0	0	0	0

10 YOLANDA AUSTIN
SENIOR DIRECTOR, L&A

(i)	144,698	10,000	1,806	8,988	42,423	207,915	0
(ii)	0	0	0	0	0	0	0

11 RICHARD FLYNN
VP COMMUNICATIONS

(i)	150,669	14,000	2,346	10,048	27,408	204,471	0
(ii)	0	0	0	0	0	0	0

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	THE PRESIDENT RECEIVED A SOCIAL CLUB MEMBERSHIP FROM THE ORGANIZATION FOR BUSINESS USE. THIS BENEFIT IS TREATED AS A NONTAXABLE WORKING CONDITION FRINGE BENEFIT UNDER SECTION 132(D) OF THE INTERNAL REVENUE CODE.
PART I, LINES 4A-B	ANDREW ZUCKERMAN, SVP GOVERNMENT OF GOVERNMENT AFFAIRS (THRU 2/29/24) RECEIVED A SEVERANCE PAYMENT IN THE AMOUNT OF \$120,000 WHICH REPORTED IN PART II, COLUMN B(III). WILLIAM PIERONI, PRESIDENT AND CEO, RECEIVED A 457(F) DISTRIBUTION IN THE AMOUNT OF \$208,334 IN HIS 2024 W2, WHICH REPORTED IN PART II, COLUMN B(III).

Additional Data

[Return to Form](#)

Software ID:
Software Version:

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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 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
 ACORD CORPORATION

Employer identification number
 13-2940919

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE FOLLOWING MAY BECOME REGULAR MEMBERS OF THE CORPORATION, AS DEFINED IN THE CERTIFICATE OF INCORPORATION, AND SHALL BE REFERRED TO IN THESE BYLAWS AS CORPORATE MEMBERS OF THE CORPORATION: - ANY ORGANIZATION ENGAGED IN THE BUSINESS OF UNDERWRITING, AND/OR SELLING, DISTRIBUTING OR OTHERWISE PROVIDING PROPERTY, CASUALTY, LIFE OR HEALTH INSURANCE, SURETY AND ANNUITIES, OR REINSURANCE; - ANY NON-INSURANCE FOR-PROFIT ORGANIZATION NOT ALSO QUALIFYING TO BE AN ORGANIZATION DESCRIBED IN SECTIONS 2A I OR 2A II OF BY-LAWS HEREOF, AND -ANY NOT-FOR-PROFIT TRADE ASSOCIATION REPRESENTING ORGANIZATIONS DESCRIBED IN SECTION 1A OR 1 B OF THE BY-LAWS, INCLUDING SUCH ORGANIZATIONS THAT MAY ALSO REPRESENT INDIVIDUALS. THE FOLLOWING MAY BECOME ASSOCIATE MEMBERS OF THE CORPORATION, AS DEFINED IN THE CERTIFICATE OF INCORPORATION, AND SHALL BE REFERRED TO IN THESE BYLAWS AS ASSOCIATE MEMBERS OF THE CORPORATION: - ANY ORGANIZATION WHOSE PRIMARY BUSINESS IS PROVIDING HARDWARE, SOFTWARE, TECHNOLOGY OR RELATED SERVICES; - ANY USER GROUP FORMED BY AN ORGANIZATION DESCRIBED IN SECTION 2A I OF BY-LAWS HEREOF OR ITS CUSTOMERS HAVING A COMMON INTEREST IN SPECIFIC PRODUCTS AND SERVICES PURCHASED FROM THAT ORGANIZATION; AND -THE GOVERNMENT OF THE UNITED STATES OR ANY SOVEREIGN NATION, ANY OF THEIR RESPECTIVE STATES OR POLITICAL SUBDIVISIONS, ANY REGIONAL AUTHORITY OF ANY OF THE FOREGOING, AND ANY AGENCY OR OTHER ORGANIZATION CREATED BY ANY OF THE FOREGOING. THE FOLLOWING SHALL BE ASSOCIATE MEMBERS OF THE CORPORATION, AS DEFINED IN THE CERTIFICATE OF INCORPORATION, AND SHALL BE REFERRED TO IN THESE BYLAWS AS SUBSCRIBER MEMBERS OF THE CORPORATION: - ANY ORGANIZATION WHICH, FOR DIRECT OR INDIRECT PAYMENT TO THE CORPORATION, SUBSCRIBES FOR SPECIFIC GOODS OR SERVICES UNDER A SUBSCRIBER PROGRAM APPROVED BY THE BOARD OF DIRECTORS OR A DESIGNATED COMMITTEE OF THE BOARD. EVERY MEMBER OF THE CORPORATION SHALL DESIGNATE A REPRESENTATIVE AND AN ALTERNATE TO REPRESENT IT IN REGARD TO CORPORATION MATTERS AND SHALL GIVE NOTICE IN WRITING OF SUCH DESIGNATION TO THE SECRETARY OF THE CORPORATION.
FORM 990, PART VI, SECTION A, LINE 7A	BOARD OF DIRECTORS' APPROVAL OF INDIVIDUALS NOMINATED FOR BOARD MEMBERSHIP BY THE BOARD'S EXECUTIVE COMMITTEE IS SUBJECT TO ELECTION BY A PLURALITY VOTE OF ACORD MEMBERS ELIGIBLE TO VOTE ON SUCH MATTERS WHO ARE PRESENT AND VOTING IN PERSON OR BY PROXY AT THE MEETING AT WHICH THE NOMINEES ARE VOTED UPON.
FORM 990, PART VI, SECTION A, LINE 7B	BOARD OF DIRECTORS' APPROVAL OF AMENDMENTS TO ACORD'S BYLAWS IS SUBJECT TO A MAJORITY VOTE OF ACORD MEMBERS ELIGIBLE TO VOTE ON SUCH MATTERS WHO ARE PRESENT IN PERSON OR REPRESENTED BY PROXY AT ANY MEETING OF ACORD.
FORM 990, PART VI, SECTION B, LINE 11B	THE ORGANIZATION HAS ITS FORM 990 PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND HAS ESTABLISHED THE FOLLOWING REVIEW PROCESS TO ENSURE THAT THE INFORMATION REPORTED IS COMPLETE AND ACCURATE. AFTER THE FORM 990 HAS BEEN PREPARED THE ORGANIZATION PROVIDES A COPY TO THE AUDIT COMMITTEE FOR REVIEW AND ANY COMMENTS. ONCE ALL COMMENTS HAVE BEEN ADDRESSED THE RETURN IS SUBMITTED TO THE INTERNAL REVENUE SERVICE FOR FILING. THE 990 IS NOT REVIEWED BY THE ENTIRE BOARD BEFORE FILING WITH THE IRS BUT IS AVAILABLE TO BE POSTED ON THE BOARD'S WEBSITE IF NEEDED.
FORM 990, PART VI, SECTION B, LINE 12C	ANNUALLY, THE ORGANIZATION'S DIRECTORS (REGARDING NON-TRANSACTION-SPECIFIC MATTERS), OFFICERS AND KEY EMPLOYEES ARE REQUIRED TO RESPOND TO THE CONFLICT OF INTEREST DISCLOSURE POLICY AND DOCUMENTS ARE REVIEWED INITIALLY BY HOUSE COUNSEL FOR POSSIBLE REFERRAL TO THE PRESIDENT OF THE ORGANIZATION FOR FURTHER CONSIDERATION AND APPROPRIATE ACTION IF WARRANTED. CERTAIN RESPONSES, INCLUDING THOSE FROM NON-KEY-EMPLOYEE STAFF MEMBERS, MAY BE ADDRESSED IN THE FIRST INSTANCE DIRECTLY TO THE PRESIDENT OF THE ORGANIZATION OR BROUGHT TO THE ATTENTION OF THE HEAD OF THE HUMAN RESOURCES DEPARTMENT FOR CONSIDERATION AND POSSIBLE REFERRAL TO THE PRESIDENT OF THE ORGANIZATION FOR FURTHER CONSIDERATION AND APPROPRIATE ACTION IF WARRANTED. A DIRECTOR OR OFFICER DISCLOSING A POTENTIAL CONFLICT REGARDING A PARTICULAR TRANSACTION MAKES THE DISCLOSURE TO THE PRESIDENT OR CHAIRMAN OF THE BOARD OF DIRECTORS (CHAIR) THROUGH THE CORPORATE SECRETARY FOR DETERMINATION AS TO WHETHER THERE IS IN FACT A CONFLICT OR APPEARANCE OF A CONFLICT. IN THE CASE OF A DIRECTOR, IF IT IS DETERMINED THAT A CONFLICT OR APPARENT CONFLICT EXISTS REGARDING A PARTICULAR TRANSACTION, THE CONFLICT OR APPARENT CONFLICT IS REPORTED TO THE EXECUTIVE COMMITTEE OR THE FULL BOARD. IF THE PARTICULAR TRANSACTION REQUIRES A VOTE OF THE BOARD OR ONE OF ITS COMMITTEES, THE AFFECTED DIRECTOR DOES NOT VOTE ON THE MATTER. IN THE CASE OF AN OFFICER, IF IT IS DETERMINED THAT THERE IS IN FACT A CONFLICT REGARDING A PARTICULAR TRANSACTION, THE PRESIDENT OR CHAIR EXERCISES BEST JUDGMENT ON THE APPROPRIATE COURSE TO FOLLOW. THIS MAY INCLUDE APPROVING THE TRANSACTION IF THE PRESIDENT OR CHAIR IS REASONABLY CERTAIN THAT THE BEST INTERESTS OF THE ORGANIZATION WILL BE SERVED BY SUCH AN APPROACH; REFERRING THE ISSUE TO LEGAL COUNSEL FOR ADVICE; OR REFERRING THE ISSUE TO THE FULL BOARD OR APPROPRIATE BOARD COMMITTEE FOR DECISION. IN THE CASE OF A POTENTIAL CONFLICT REGARDING A PARTICULAR TRANSACTION INVOLVING EITHER THE PRESIDENT OR THE CHAIR, THE AFFECTED PARTY NOTIFIES THE OTHER THROUGH THE CORPORATE SECRETARY WITH THE CONFLICT THEN BEING REPORTED TO THE FULL BOARD. IF THE PARTICULAR TRANSACTION REQUIRES A VOTE OF THE BOARD OR ONE OF ITS COMMITTEES, THE PRESIDENT OR CHAIR DOES NOT VOTE ON THE MATTER.

FORM 990, PART VI, SECTION B, LINE 15	THE CEO, SENIOR MANAGEMENT TEAM, AND OTHER OFFICERS AND EMPLOYEES' COMPENSATION IS REVIEWED ANNUALLY BY A COMPENSATION COMMITTEE USING COMPENSATION STUDIES AND COMPARING COMPENSATION TO OTHER SIMILAR-SIZED ORGANIZATIONS. ONCE FINALIZED, THE COMMITTEE WILL SEND ITS APPROVAL. THIS PROCESS WAS LAST UNDERTAKEN IN 2024. COMPENSATION WAS DOCUMENTED IN A MEETING THAT WAS NOT INCLUDED IN THE BOARD MINUTES.
FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS OF THE CORPORATION ARE AVAILABLE ON THE COMPANY'S PUBLIC WEBSITE. ACORD DOES NOT MAKE THE CONFLICT OF INTEREST POLICY, THE FINANCIAL STATEMENTS, OR FORM 990 AVAILABLE TO THE PUBLIC.
FORM 990, PART XI, LINE 9:	CHANGE IN ACCRUED PENSION LIABILITY TO BE RECOGNIZED IN FUTURE PERIODS 9,709. LOSS ON INVESTMENT IN SUBSIDIARY -9,876,464. LOSS ON DISPOSAL OF ASSETS -7,653.
FORM 990, PART XII, LINE 2C:	THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT. THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

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

[Return to Form](#)

Software ID:
Software Version:

SCHEDULE R (Form 990)

(Rev. January 2025)

Department of the Treasury Internal Revenue Service

Name of the organization ACORD CORPORATION

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 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

13-2940919

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

Table with 6 columns: (a) Name, address, and EIN of disregarded entity; (b) Primary activity; (c) Legal domicile; (d) Total income; (e) End-of-year assets; (f) Direct controlling entity.

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.

Table with 7 columns: (a) Name, address, and EIN of related organization; (b) Primary activity; (c) Legal domicile; (d) Exempt Code section; (e) Public charity status; (f) Direct controlling entity; (g) Section 512(b)(13) controlled entity?

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.

Table with 11 columns: (a) Name, address, and EIN of related organization; (b) Primary activity; (c) Legal domicile; (d) Direct controlling entity; (e) Predominant income; (f) Share of total income; (g) Share of end-of-year assets; (h) Disproportionate allocations; (i) Code V-UBI amount; (j) General or managing partner; (k) Percentage ownership.

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.

Table with 9 columns: (a) Name, address, and EIN of related organization; (b) Primary activity; (c) Legal domicile; (d) Direct controlling entity; (e) Type of entity; (f) Share of total income; (g) Share of end-of-year assets; (h) Percentage ownership; (i) Section 512(b)(13) controlled entity?

(1) ACORD SOLUTIONS GROUP INC INSURANCE RELATED SUPPORT CA ACORD CORPORATION C 9,595,145 28,806,330 100.000 %

130 CLEVELAND BLVD
LITTLE FALLS, NJ 109653100
81-2988120

Table with 10 columns and 10 rows, mostly empty.

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?

Table with 10 columns (a-s) and 2 columns (Yes/No) for various transaction types like interest, gifts, loans, etc.

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.

Table with 4 columns: (a) Name of related organization, (b) Transaction type, (c) Amount involved, (d) Method of determining amount involved.

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

Table with 11 columns: (a) Name, address, and EIN of entity; (b) Primary activity; (c) Legal domicile; (d) Predominant income; (e) Are all partners section 501(c)(3) organizations?; (f) Share of total income; (g) Share of end-of-year assets; (h) Disproportionate allocations?; (i) Code V-UBI amount; (j) General or managing partner?; (k) Percentage ownership.

