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Form **990-EZ**

Department of the Treasury Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section
512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total

assets less than \$1,250,000 at the end of the year may use this form. ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

2009

OMB No. 1545-1150

Open to Public Inspection

	A Fo	or 2009 d	calendar yea	ır, or tax y	ear beginnlı	ng JULY	01	, 20	09, and en	ding	JUN:	E 30		, 20 10
		heck if iplicable			of organizat								er id	entification number
) [7	ddress cha	Please ange use IRS	HOMER	LAUGHLI	N CHINA	COLLE	CTORS ASS	CIATIO	N				54-1905820
· i	Na	ame chang	label or		& street (or F	.O. box, if n	naıl ıs not	delivered to stre	et addr)	Room/	E	Telepho	ne nı	ımber
] Ini	itial return	print or type.						,			·		
	Te	erminated	See Specific	1921	GALLOW	S ROAD	S	TE 750		750			(6	31)689-3616
	┥ .	nended ret	turn Instruc-		wn, state or					J:	_	Group E	_	
A CONTRACTOR STORY		plication ending	tions		A VA 2							Number.	_	
] -							mpt chari	table trusts mu	st attach	G	Accol	_		: X Cash Accrual
1	Ĭ				ed Schedule							(specify)		
ī	W	Vebsite	: ►HTTP	://ww	W.HLCC	A.ORG		- :		Н				nization is not required
			npt status (ch				nsert no.)	4947(a)(1)	or 52	_		_		orm 990, 990-EZ, or 990-PF)
Ī						<u> </u>				receir				more than \$25,000. A
		_	_					tion chooses to	_					
ī								, file Form 990 inst			_			132,010
Ī								ssets or Fu					ctions	
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				-				contracts				_	2	
		1	_		_	_							3	25,455
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		1					•				_			
	D							ibtract line 5b fr)			5c	
	Ë							G). If any amount is						
	ピエンモアン	l l						f contributions	_	-				
	Ņ								6a		41,	066		
	Ĕ		-	=					6b			303		
								ubtract line 6b fi	rom line 6a	1)			6c	16,763
					' = '		=		7a	,		299		
					• •				7b	_		621		
								7b from line 7a	a)			.#.1	7c	17,678
•			Other revenu						,)	8	1,190
		1		•								_▶	9	61,086
-													10	3,500
	-	11 1	Benefits paid	to or for r	nembere C	SEIVED) [] []						11	
	EXPEN												12	
	P						1 (7)	ntractors				_	13	855
		14	Occupancy, i	rent. utilitie	SI 1YU V	LO ZUIU tenance	RS-([14	
	SES	J	Printing, publ	. 1	1		100					[15	31,149
ගු	S	16	Other expens	ses (descri	be DGG) Falltad	hment						16	21,516
Q								· · · · · · · · · · · · · · · · · · ·				_ ▶	17	57,020
爱 -		18						9)					18	4,066
SCANNED DEC	ASSE EE	19	-	-	• •			e 27, column (A						
	ΕŞ	-			_	• .	-					[19	44,158
	ŦĘ	20						lanation)					20	
M	S	1	_			-	•	s 18 through 20					21	48,224
	Pa							(B) are \$1,250,0					of F	
		XX. 5d			the instructi							of year		(B) End of year
, _{(S})	22	Cash, sa	avings, and ir				•			· /	3(,511	22	47,939
			_						F-			399	23	285
- Carr	24		sets (describ						, , <u>,</u> ,		13	3,248	24	
		Total as	_ '						´			1,158	25	48,224
			bilities (desc		,,,,,				٦٢			0	26	0
2			-	_	line 27 of co	lumn (B) m ນ	ist agree	with line 21)	·····		44	,158	27	48,224

	m 990-EZ (2009) HOMER LAUGHL					Page 2
P	art III Statement of Program Servi	ce Accomplishme	nts (See the instruction	s for Part III.)		Expenses
Wh	at is the organization's primary exempt purpose	7 See attachm	ent #6		1 ' '	ired for section 501(c)(3)
	scribe what was achieved in carrying out the org			ncise manner,		01(c)(4) organizations and
	cribe the services provided, the number of pers				for ot	n 4947(a)(1) trusts, optional hers.)
	See attachment #7	20110111011				
						
	(Grants \$ 3,500) if this amo	vint includes foreign gra	nts, check here		200	42 400
29	(Grants \$ 3,500) It this arric	um includes loreign gra	nis, check here		28a	42,408
29						
						
						
	(Grants \$) If this amo	ount includes foreign gra	nts, check here	· · · · · · · · • • • • • • • • • • • •	29a	
30			<u> </u>			
			_			
	(Grants \$) If this amo	unt includes foreign gra	nts, check here	▶ 🗍	30a	
31	Other program services (attach schedule)					-
	(Grants \$) If this armo	unt includes foreign gra	nts, check here	▶ 🗍	31a	
32	Total program service expenses (add lines 2				32	42,408
	art IV List of Officers, Directors, T				nsated.	
		(b) Title and average	(c) Compensation	(d) Contributions	s to	(e) Expense
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0)	employee benefit pl deferred compens		account and other allowances
Se	e attachment #8	devoted to position	enter -oj	deterred dempens	21.0.1	
	e accaemment #0					
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JVA	09 990FZ2 TWF 33405 Copyright For	ms (Software Only) - 2009 TV	v			Form 990–EZ (2009)

HOMER LAUGHLIN CHINA COLLE 54-1905820

	rt V Other Information (Note the statement requirements in the instructions for Part V.)		F	age
	** * * Other mornation (note the statement requirements in the histractions for Part V.)		Vos	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed		163	110
	description of each activity	33		X
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the			+
	changes	34		x
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but		1	1
	not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			1
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice,	ĺ		Ī
	reporting, and proxy tax requirements?	35a	X	
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	X	
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during			
	the year? If "Yes," complete applicable parts of Schedule N	36		X
	Enter amount of political expenditures, direct or indirect, as described in the instructions 37a]
	Did the organization file Form 1120-POL for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			1
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		X
þ	If "Yes," complete Schedule L, Part II and enter the total amount involved			1
39	Section 501(c)(7) organizations. Enter:			1
а	Initiation fees and capital contributions included on line 9	İ		
b	Gross receipts, included on line 9, for public use of club facilities			1
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under			1
	section 4911 ▶; section 4912 ▶; section 4955 ▶			ŧ
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction	į		•
	during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			ļ
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		}	1
	Schedule L, Part I	40b		X
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on			
	organization managers or disqualified persons during the year under sections			1
	4912, 4955, and 4958			1
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c		}	
	reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			1
	transaction? If "Yes," complete Form 8886-T	40e	<u> </u>	X
41	List the states with which a copy of this return is filed. NONE			
42a	The organization's books are in care of ▶ See attachment #9 Telephone no. ▶			
	Located at ▶ ZIP + 4 ▶			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority			
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	
	account)?	42b		X
	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.	1		
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	L	X
	If "Yes," enter the name of the foreign country: ▶			_
43	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-EZ in lieu of Form 1041 Check here			▶ [
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			<u> </u>	
	5 10		Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of	ł		
	Form 990-EZ	44	 _	X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes,"			

Paid Preparer's

Use Only

Firm's name (or yours

if self-employed), address, and ZIP + 4

No

EIN

Phone no. >

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No. 1545-0047 2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate Instructions.

Name of the organization HOMER LAUGHLIN CHINA COLLECTORS ASSOCIATION

Employer Identification number 54-1905820

101	,117.1	C INTOCITE	114 01111111 04	JEED CTORD 710	DOCIN	T T O 11				3020		_
Pa	rt I	Reason	for Public Char	ity Status (All organ	izations mi	ust comple	ete this par	t.) See ins	tructions.			_
The o	orga	inization is not a	private foundation b	ecause it is: (For lines 1	through 1	1, check o	only one bo	ox.)				
1		A church, conve	ention of churches, o	r association of churche	es describe	ed in secti	lon 170(b)	(1)(A)(l).				
2	П	A school descri	bed in section 170(b)(1)(A)(II). (Attach Sche	duie E.)							
3	П	A hospital or a	cooperative hospital :	service organization des	scribed in	section 17	70(b)(1)(A)	(111).				
4	П	A medical resea	arch organization ope	erated in conjunction wit	th a hospit	al describe	ed in secti	on 170(b)	(1)(A)(III).	Enter the	hospital's name	,
	ш	city, and state:	-									
5	П		operated for the ber	nefit of a college or univer	ersity own	ed or oper	ated by a	governme	ntal unit d	escribed ir	section	_
	ب	•	. (Complete Part II.)	J	•	•	·	_				
6	П	A federal, state.	or local government	or governmental unit d	escribed ir	section	170(b)(1)(A)(v).				
7	Н			es a substantial part of r					om the ge	neral publi	c described in	
-	ш	_	1)(A)(vi). (Complete	-	• •	J			_	-		
8	П			ion 170(b)(1)(A)(vi). (Co	omplete Pa	art II.)						
9	卜			es: (1) more than 33 1/3			m contribu	tions, men	nbership fo	ees, and a	ross	
•	13			exempt functionssubj								
				ne and unrelated busine								
		acquired by the	organization after Ju	ine 30, 1975 See secti o	on 509(a)(2	2). (Compl	lete Part III	.)				
10	П	An organization	organized and oper	ated exclusively to test f	for public s	afetv. See	section 5	509(a)(4).				
11	Н			ated exclusively for the					to carry or	ut the		
••	Ш			pported organizations of							n	
				bes the type of support								
		a Type I	ь Птур		ype III-Fu					ype III-Ot	her	
_	П			e organization is not co	• •	-	-		اسا			
-	Ш	nersons other t	han foundation mana	gers and other than on	e or more	publicly st	uncom, u, ported o	rganizatio	ns describ	ed in secti	on	
		509(a)(1) or sec		.90.0 4.1.0 0 1.1.0 1.1.1.1		,,	• •	J				
				determination from the	IDS that it	ic a Tuno	I Type II	or Tune III	eunnortin	a		
f				determination from the						9		Г
		•										L
g		_		inization accepted any o	giit or conti	iibuudii iic	offi ally of t	ii le				
		following perso		Notrale extens alone	or togothe	er with nor	aana daaa	ribod in (ii)	•		Yes N	<u> </u>
		(I) A person w	no directly or indirec	tly controls, either alone ody of the supported org	or togethe	er with per	50115 ue 50	inbed iii (ii)	,	T ₄	1g(l) X	
				scribed in (i) above?							1g(li) X	
		• •	•	son described in (i) or (i						_	1g(III)	
_		• •	•							· · · · · ·	19(11)	-
h		Provide the folio	owing information ab	out the supported organ	lization(s).						· · · · · · · · · · · · · · · · · · ·	—
a a	Jam	e of supported	(ii) EIN	(III) Type of organization	(IV) is the	organization	(V) Did yo	u notify the	, ,	Is the	(vii) Amount o	f
٠, .		ganization	,		in col. (i) li				organizatio	ed in the	support	
				above or IRC section	governing	document?	of your	support?	U.S			
				(see instructions))	V	N _a	Voc	No	Yes	No		
					Yes	No	Yes	140	165	140		—
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For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

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

(Complete only if you checked the box on line 9 of Part I)

Sec	tion A. Public Support	DOX OII IIII O O	.,,,				
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	22029	22835	24452	26487	25455	121258
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	50333	58979	58829	56071	105364	329576
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			į			
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	72362	81814	83281	82558	130819	450834
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b					ļ	
8	Public support (Subtract line 7c from line 6.)	<u> </u>			<u> </u>	<u> </u>	450834
	tion B. Total Support		1	1 1 2		1	
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	72362	81814	83281	82558	130819	450834
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	188	380	394	96		1058
	sources	100	360	394	90	 	1036
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b	188	380	394	96	1	1058
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	2605	2334	1466	1126	1190	8721
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	75155	84528	85141	83780	132009	460613
14	First five years. If the Form 990 is for the organization, check this box and stop here	•		•	year as a section	` ' ' '	▶∏
Sec	tion C. Computation of Public Sup	port Percer	ntage				
15	Public support percentage for 2009 (line 8, co	olumn (f) dıvıde	d by line 13, coli	ımn (f))		15	97.88 %
16	Public support percentage from 2008 Schedu	ile A, Part III, lir	ne 15			16	97.42 %
Sec	tion D. Computation of Investment	Income Pe	rcentage				
17	Investment income percentage for 2009 (line	10c, column (f)	divided by line	13, column (f)).		17	0 %
18	Investment income percentage from 2008 Sc	hedule A, Part I	III, line 17			18	0 %
19a	33 1/3 % support tests 2009. If the organi	zation did not d	check the box or	line 14, and line	e 15 is more tha	n 33 1/3 %, and	
	not more than 33 1/3 %, check this box and s	top here. The	organization qua	alifies as a public	cly supported or	ganization	▶ 🏻
b	33 1/3 % support tests 2008. If the organi						_
	18 is not more than 33 1/3 %, check this box		_			_	⊢
20	Private foundation. If the organization did no	ot check a box	on line 14, 19a, d	or 19b, check thi	s box and see ir	nstructions,	▶ 🗍

9CHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047 2009

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Department of the Treasury Internal Revenue Service

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, 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," to Form 990, Part IV, line 5 (Proxy Tax), then

If the organization answered "Yes," to 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.

• Section 501(c)(4), (5), or (6) organizations. Complete Part III **Employer Identification number** Name of organization HOMER LAUGHLIN CHINA COLLECTORS ASSOCIATION 54-1905820 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 3 Volunteer hours Part 1-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ 2 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? X No Yes If "Yes," describe in Part IV. Part I-C | Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, 3 Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. 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 (d) Amount paid from (e) Amount of political (a) Name (b) Address (c) EIN contributions received and filing organization's promptly and directly funds. If none, enter -0-. delivered to a separate political organization If none, enter -0-.

Part II-A Complete if the organization				B) and filed Form	1 5768 (election
under section 501(h)).					
Check ► If the filing organization belongs	_	•			
3 Check ▶ If the filing organization checked	l box A and "Ilmi	tea control" provisio	ns apply.		
Limits on Lobbyl (The term "expenditures" mea	•			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence pub	olic opinion (gras	ss roots lobbying)			<u> </u>
b Total lobbying expenditures to influence a le			·	····	
c Total lobbying expenditures (add lines 1a ar	nd 1b)		[
d Other exempt purpose expenditures			[
e Total exempt purpose expenditures (add line	es 1c and 1d)				
f Lobbying nontaxable amount Enter the amo	ount from the fol	lowing table in both			
columns	· •				
If the amount on line 1e, column (a) or (b)	is: The lobby	ing nontaxable ame	ount is:		
Not over \$500,000	20% of the a	mount on line 1e.			
Over \$500,000 but not over \$1,000,000		s 15% of the excess ove			
Over \$1,000,000 but not over \$1,500,000		s 10% of the excess ove			
Over \$1,500,000 but not over \$17,000,000		s 5% of the excess over	\$1,500,000.		
Over \$17,000,000	\$1,000,000.		——— -		
g Grassroots nontaxable amount (enter 25% ofh Subtract line 1g from line 1a. If zero or less,			F		
h Subtract line 1g from line 1a. If zero or less, Subtract line 1f from line 1c. If zero or less,			F		
If there is an amount other than zero on eith				1720 reporting	
					Yes No
(Some organizations that columns i	t made a section below. See the	instructions for line	o not have to es 2a through	2f on page 4.)	ve
Lobb	ying Expenditu	res During 4-Year A	veraging Per	rlod	
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 200	8 (d) 2009	(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))					
Grassroots lobbying expenditures					
(150% of line 2d, column (e)) 1 Grassroots lobbying expenditures	rms (Software Only) – 2009 TW		Schedule C (F	orm 990 «

			(a)		(b)			
		Yes	No		Am	ount		
	During the year, did the filing organization attempt to influence foreign, national, state or local							
	egislation, including any attempt to influence public opinion on a legislative matter or			l				
	eferendum, through the use of:			•				
	/olunteers?	į į	1	1				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?							
	Media advertisements?			1				
	Mailings to members, legislators, or the public?						_	
	Publications, or published or broadcast statements?	<u> </u>		 			_	
	Grants to other organizations for lobbying purposes?			T			_	
	Direct contact with legislators, their staffs, government officials, or a legislative body?						_	
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						_	
	Other activities? If "Yes," describe in Part IV						_	
	Total. Add lines 1c through 1i,						_	
	Old the activities in line 1 cause the organization to be not described in section 501(c)(3)?	······					_	
	f "Yes," enter the amount of any tax incurred under section 4912			1				
	f "Yes," enter the amount of any tax incurred by organization managers under section 4912						_	
	f the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		İ					
	Complete if the organization is exempt under section 501(c)(4), sect	ion s	01(c	;)(5), (or se	ctio	n	
<u> </u>	501(c)(6).		`				_	
						1		
					_	Yes	9	
	Were substantially all (90% or more) dues received nondeductible by members?					Yes	<u>s</u>	
	Were substantially all (90% or more) dues received nondeductible by members?						<u>s</u>	
2 C	Old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if	ion (501(c	;)(5), (2 3 or se	ectio	'n	
e c Sart	Old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if "Yes."	ion (Part	 501(c	;)(5), (2 3 or se	ectio	'n	
art	Old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if "Yes." Oues, assessments and similar amounts from members	ion (501(c	;)(5), (2 3 or se	ectio	'n	
e c	Old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if "Yes." Oues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	ion (501(c	;)(5), (2 3 or se	ectio	'n	
e c	Complete if the organization is exempt under section 501(c)(4), section 162(e) nondeductible lobbying and political expenditures (do not Include amounts of political expenses for which the section 527(f) tax was paid).	ion { Part	501(c	;)(5), (2 3 or se	ectio	'n	
2	Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	ion (501(c	;)(5), (2 3 or se	ectio	'n	
art C	Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not Include amounts of political expenses for which the section 527(f) tax was paid). Current year. Carryover from last year	Part	1 2a 2b	;)(5), (2 3 or se	ectio	n	
e c	Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year. Carryover from last year	Part	1 2a 2b 2c	;)(5), (2 3 or se	ectio	'n	
e c T	Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	Part	1 2a 2b	;)(5), (2 3 or se	ectio	n	
2	Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues f notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	Part	1 2a 2b 2c	;)(5), (2 3 or se	ectio	n	
2	Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year. Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues f notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excestoes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political estimate of nondeductible lobbying and political estimate of nondeductible lobbying and political estimate of nondeductible lobbying and political estimate of nondeductible lobbying and political estimate of nondeductible lobbying and political estimate of nondeductible lobbying and political expenditures of nondeductible lobbying and political expensions.	Part	1 2a 2b 2c 3	;)(5), (2 3 or se	ectio	n	
2 C C C C C C C C C C C C C C C C C C C	Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues f notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	Part	1 2a 2b 2c	;)(5), (2 3 or se	ectio	n	

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2009

Complete If the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or If the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Open to Public Department of the Treasury ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Inspection Internal Revenue Service Name of the organization **Employer Identification number** HOMER LAUGHLIN CHINA COLLECTORS ASSOCIATION 54-1905820 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e | Solicitation of non-government grants b Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events C In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees 2a or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?..... X No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (III) Did fundraiser (vi) Amount paid to (i) Name of individual (II) Activity (Iv) Gross receipts (v) Amount paid to have custody (or retained by) or entity (fundraiser) from activity (or retained by) fundor control of raiser listed in col. (i) organization contributions? Yes No

3	registration o	J	J	r licensed to s		mpt trom	
							<u> </u>
	_						

Pa	rt II		_		•			
$\overline{}$		more than \$15,000 on Form 990-EZ	(a) Event #1	gross receipts greater the (b) Event #2	(c) Other events	(d)	Total ev	
			(a) CVOIR #1	(b) Event #2	(c) Other events		col. (a) 1	
Ŗ			(event type)	(event type)	(total number)		col. (c)	-
E V								
E	1	Gross receipts				1		
U	2	Less: Charitable						
Е	3	contributions				+		
	3	minus line 2)						
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-					
	4	Cash prizes				↓		
D								
I R	5	Noncash prizes				+		
E	6	Rent/facility costs						
Ť								
E X	7	Food and beverages						
Р		_		•				
E N	8	Entertainment				+-		
ENSE	9	Other direct expenses						
s								
	10	Direct expense summary. Add lines 4 thr)
(F)	11	Net income summary. Combine line 3, co				<u>. </u>		
ra	rt III	than \$15,000 on Form 990-EZ, line 6		111 990, 1 ait 14, iiie 19, t	reported more			
				(b) Pull tabs/instant	(c) Other gaming			ng (add
Ā			(a) Bingo	bingo/progressive bingo	(c) Other garning	col. ((a) thru c	ol. (c))
RE>EXUE	_					1		
	1	Gross revenue				+		
	2	Cash prizes						
RECT								
E	3	Noncash prizes				 		
P		Pont/feeility conto						
E N S E S	4	Rent/facility costs				+		
E	5	Other direct expenses		,			_	
			Yes%	I L	1 🏳 ' ' ' ' '	%		
	6	Volunteer labor	X No	X No	X No	<u> </u>		······································
	7	Direct expense summary. Add lines 2 thi	rough 5 in column (d)			. ,		
	′	bliect expense summary. Add lines 2 th	ough 5 in column (u)					
	8	Net gaming income summary. Combine	line 1, column d, and lin	e7 <u></u>	<u>.</u> >			
					- "		Υ.	es No
9		ter the state(s) in which the organization of				—		x
a		the organization licensed to operate gamil	ng activities in each of th	ese states?			9a	
b	"	No," explain:						
10a	We	ere any of the organization's gaming licens	ses revoked, suspended	or terminated during the	tax year?		10a	X
b	If "	Yes," explain						1
								1
11	Do	es the organization operate gaming activi	ties with nonmembere?				11	[†] x
12		the organization a grantor, beneficiary or t						-1-
		med to edminister charitable gaming?				1	. 49	X

Sched	ule G (Form 990 or 990-EZ) 2009 HOMER LAUGHLIN CHINA COLLE 54-1905820			age 3
	t I		Yes	No
13	Indicate the percentage of gaming activity operated in:			l
а	The organization's facility	4		Ī
Ь	An outside facility	4		ŧ
14	Enter the name and address of the person who prepares the organization's gaming/special events books			
	and records:			
	Name ▶			
	Address ▶			
15a	Does the organization have a contract with a third party from whom the organization receives gaming	45.		v
	revenue?	15a		X
Ь	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount			1
	of gaming revenue retained by the third party ▶\$			1
С	If "Yes," enter name and address of the third party:			
	Name ▶			
	Address ▶			
16	Gaming manager information:			
	Name ▶			
	Gaming manager compensation ▶ \$			
	Description of services provided ▶			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			-
	retain the state gaming license?	17a		X
ь	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent			Į
	ın the organization's own exempt activities during the tax year ▶ \$		<u> </u>	<u> </u>
JVA	09 990G3 TWF 33414 Copyright Forms (Software Only) - 2009 TW Schedule G (Form S	90 or 9	990-E	Z) 20

SCHEDULE OF GROSS PROFIT OR	(LOSS) FROM S	SALE OF INVEN	NTORY
Attachment 1: page 1 - 990-EZ Page 1, P	art I, line	7	Keep for Your Records
Keep For Your Records For calendar year 2009 or tax period beginning 07-	01-2009 , and		-2010.
Name of Organization HOMER LAUGHLIN CHINA COLLECTORS ASSOCIA	TION	Employer Idea 54 - 19058	ntification Number
Type of Inventory sold	Gross Sales	Cost of Goods	Gross Profit or (Loss)
EXCLUSIVE HOMER LAUGHLIN CHINA (1938-1940 POTTERY) HOMER LAUHGLIN CHINA BOOKS, ROYALTIES &	62,683	46,019	16,664
NOTEPADS	1,616	602	1,014
Total JVA Copyright Forms (Software Only) – 2009 TW L0819F	64,299	46,621	17,678 09_EOEZGR03

Att all mant	SCHEDULE (2: page 1 - 990-EZ Page 1	OF OTHER REVENUE		
Open to Public				
Inspection	For calendar year 2009 or tax period beginning	07-01-2009, and ending		30-2010.
Name of Organizate HOMER LAUC	Hon GHLIN CHINA COLLECTORS ASSO	CIATION	54-190	identification Number 5820
	Description of Other Rever	nue		Amount
ADVERTISI	NG			1,190
			1	
		(
			Total	1,190
			TOTAL [1,150
JVA Copyright Fo	orms (Software Only) - 2009 TW L0819F			09_EOEZGR39

SCHEDULE OF GRANTS Attachment 3: page 1	AND SIMILAR AMOUN - 990-EZ Page 1,	ITS PAID Part I, Line	10 - Grants and Sim	Similar Amounts	ıts Paid	
Open to Public Inspection	or tax	period beginning		and ending 06-30-2010.	-30-2010	•
Name of Organization HOMER LAUGHLIN CHINA	COLLECTORS ASSOCIATION	NOI	E	Employer Identification Number $54-1905820$	on Number	
Class of Activity	Recipie	Recipient's Name and Address	ssa	Amount (FMV)	Purpose of Payment to Affilate	nent to Affiliate
EDUCATION	DOLLARS FOR SCHOLARS				DONATION FOR EDUCATION	OR
	EAST LIVERPOOL, OH 43	43920		3,500		
				3,500		
Relationship	Description of Property	Book Value	How Book Value is Determined	How FMV is	How FMV is Determined	Date of Gift
NONE	САЅН	3,500	CASH	CASH		2010-01
	Total	3,500				
JVA Copyright Forms (Software Only) – 2009 TW	009 TW L0819F					09_EOEZGR110L

SCHEDULE OF OTHER EXPENSES Attachment 4: page 1 - 990-EZ Page 1, Part I, Line 16 Open to Public Inspection For calendar year 2009 or tax period beginning 07 - 01 - 2009, and ending 06-30-2010. Name of Organization **Employer Identification Number** HOMER LAUGHLIN CHINA COLLECTORS ASSOCIATION 54-1905820 **Description of Other Expenses Amount** CONFERENCES, CONVENTIONS, AND MEETINGS 1,591 BANK CHARGES 5,512 CREDIT CARD FEES DUES & SUBSCRIPTIONS 75 LICENSE & TAXES 25 OFFICE SUPPLIES 5,812 REPAIRS 861 60 TELEPHONE 6,954 WEBSITE EXPENSE 114 DEPRECIATION EXPENSE ADVERTISING EXPENSES 396 Depreciation 114 21,516 Total

JVA

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09_EOEZGR77

SCHEDULE OF OTHER ASSETS								
Attachment 5: page 1 - 990-EZ Page 1, Part I, Line 24								
Open to Public								
Inspection	For calendar year 2009 or tax period beginning	07-01-2009, and en						
Name of Organizat	HLIN CHINA COLLECTORS ASSO	Employer Ide 54 - 19058	ntification Number					
		End	EOY FMV					
	Description of Other Assets	of Year	of Year	(990-PF Only)				
INVENTORY-	CHINA POTTERY	13,248						
				-				
				1.				
				,				
			I					
•								
			<u> </u>					
	Total	ls 13,248		L				

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09_EOEZGR05

PRIMARY EXEMPT PURPOSE Attachment 6: page 1 - 990-EZ Page 2, Part III Open to Public 06-30-2010. For calendar year 2009 or tax period beginning 07-01 , and ending Inspection **Employer Identification Number** Name of Organization 54-1905820 HOMER LAUGHLIN CHINA COLLECTORS ASSOCIATION Primary Purpose HLCCA IS DEDICATED TO PROVIDE A SERIOUS EDUCATIONAL FORUM AND COMMUNICATION TOOL FOR ALL THOSE WHO ARE INTERESTED IN THE IMPORTANT CONTRIBUTION THAT HOMER LAUGHLIN CHINA WARES HAS MADE TO AMERICAN CULTURE, FROM 1873 TO THE PRESENT.

PROGRAM SERVICE ACCOMPLISHMENT Attachment 7: page 1 - 990-EZ Page 3, Part III Open to Public For calendar year 2009 or tax period beginning 07 - 01 - 2009, and ending 06-30-2010. Inspection **Employer Identification Number** Name of Organization HOMER LAUGHLIN CHINA COLLECTORS ASSOCIATION 54-1905820 Part III - Statement of Program Service Accomplishments Grants and allocations 3,500 Amount includes foreign grants | Program service expenses 42,408 **Exempt Purpose Achievements** PROVIDING INFORMATION ON THE HOMER LAUGHLIN CHINA WARES. EDUCATIONAL SCHOLARSHIPS FOR NEEDY STUDENTS IN THE AREA OF EAST LIVERPOOL, OHIO (HOME OF THE HOMER LAUGHLIN CHINA COMPANY).

CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Attachment 9, page 1 990-F7 Dage 2 Dart IV								
Attachment 8: page 1 - 990-EZ Page 2, Part IV Open to Public								
	pection For calendar year 2009 or tax period beginning 07-01-2009, and ending 06-30-2010.							
Name of Organization	tification Number							
HOMER LAUGHLI				54-19058				
(A) Name a	na Address	(B) Title and Average Hrs. per Week	(C) Compensation (If not paid, enter 0)	(D) Cont. to Employee Ben. Plans & Def. Comp.	(E) Expense Account			
SANDRA BOND		PRESIDENT	not paid, effect of	Den. Flans & Der. Comp.	& Other Allowances			
1402 S CARR A		2.00						
			0	0	0			
		SECRETARY						
VALPARAISO, I		12.50	0	o	0			
HAROLD FOX		VICE	١	J	O			
3377 FALCON A		PRESIDENT						
SIGNAL HILL,		5.00						
90755-4811			0	0	0			
MERRILL MILLER		TREASURER						
19 STRATTON L		12.50						
STONY BROOK, 11790-3213	NI		0	o	0			
11/90-3213			ĺ	Ĭ	· ·			
		,						
			<u> </u>					
JVA Copyright Forms (Soi	tware Only) -2009 TW LC	0819F			09_EOEZPVA			

Attachment 9 - 990-EZ Page 3, Part V, Line 42a Open to Public Inspection	• • •		BOOKS A	RE IN CAR	E OF	
Open to Public Inspect Attachmen	t 9 - 990-EZ Pac	ne 3 Part V	Line 42a	a		
Employer Identification Number HOMER LAUGHLIN CHINA COLLECTORS ASSOCIATION 54-1905820	Open to Public					06-30-2010.
Part V - Line 42a	Name of Organiza	ition				Employer Identification Number
or Business Name: Street Address						
U.S. Address: Zip code	or			MERRII	L MILLER	
Zip code 11790-3213 City STONY BROOK State NY	Street Address .			<u>19 ST</u>	RATTON LAN	Е
or Foreign Address City Province or State Country Postal code Phone Number (631) 689-3616	U.S. Address:					
Province or State Country Postal code	or	11790-3213	city STONY BROO	K	Sta	te <u>NY</u>
Country	City					
Postal code	Province o	r State	·			
Phone Number (631) 689-3616	Country					<u> </u>
	Postal cod	e				
Fax Number	Phone Nu	mber				(631) 689-3616
	Fax Numb	er				

L0819F

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

OMB No. 1545-0172

2009

Department of the Treasury Internal Revenue Service (99)

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No 67

Name(s) shown on return HOMER LAUGHLIN CH	TNIA COLLE		ctivity to which th				Identifying number
				TINE 16			54-1905820
	ense Certain / listed property. c	Property Under Somplete Part V before y	ection 1/9 You complete Par	• 1			
1 Maximum amount See the ins					_	Τ.	1 22 22 22
2 Total cost of section 179 prope						1	\$250,000
3 Threshold cost of section 179 prope						2	#000 000
4 Reduction in limitation. Subtract						3	\$800,000
5 Dollar limitation for tax year. Su						-	
				• •	•	_	250,000
	on of property	/b) C	ost (busn, use on		cted cos	5	250,000
(a) Description	in or property	(1) (1)	ost (Dusii, use Oil	iy) (c) Ele	cied cos	 -	-
			 				1
7 Listed property. Enter the amou	unt from line 29	<u>L</u> _	7	. +			-
8 Total elected cost of section 17			_			8	
9 Tentative deduction Enter the						9	
10 Carryover of disallowed deduc						10	· · · · · · · · · · · · · · · · · · ·
11 Business income limitation. Ent		=			uctions)		250,000
12 Section 179 expense deduction		-		•		12	
13 Carryover of disallowed deduc						L. <u>'</u>	
Note: Do not use Part II or Part III							<u> </u>
		ce and Other Dep		not include lis	ted prop	ertv.)	(See instructions.)
14 Special depreciation allowance						Г <u></u>	
during the tax year (see instruc						14	
						15	
15 Property subject to section 168(f)(1) election							
Part III MACRS Depreci	ation (Do not in	clude listed property.) (See instructions)			
	· · · · · · · · · · · · · · · · · · ·	Section					
17 MACRS deductions for assets	placed in service i	n tax years beginning b	efore 2009			17	114
18 If you are electing to group any	assets placed in	service during the tax y	ear into one or m	ore			······································
general asset accounts, check	here				▶ □		
Section B	Assets Placed in	Service During 2009	Tax Year Using t	he General D	epreciat	lon S	ystem
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr. (business/investment use only see instructions)	(d) Recovery period	(e) Convention	(f) Me	thod	(g) Depreciation deduction
19a 3-year property							
b 5-year property	1						
c 7-year property	7			1		_	
d 10-year property	<u> </u>						
e 15-year property			Ī				
f 20-year property							=
g 25-year property			25 yrs		S/I		
h Residential rental			27.5 yrs.	MM	S/I		
property			27.5 yrs.	MM	S/I	=	
l Nonresidential real			39 yrs.	MM	S/l	-	
property				MM	S/l		
Section C A	ssets Placed In S	Service During 2009 Ta	x Year Using th	e Alternative	Deprecia	ation	System
20a Class life					S/l		
b 12-year			12 yrs.		S/l	<u> </u>	
c 40-year			40 yrs.	MM	S/L		
Part IV Summary (See ins							
21 Listed property. Enter amount f	rom line 28					21	
22 Total. Add amounts from line 1							
and on the appropriate lines of				ictions		22_	114
23 For assets shown above and p	laced in service di	uring the current year, e	nter the				
portion of the basis attributable	to section 263A c	osts	23				
For Paperwork Reduction Act Not	tice, see separate	instructions.					Form 4562 (2009)