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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 black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

2012

Open to Public Inspection

	. 0	2012 Calendar year, or tax year beginning	enumy					
В	Check if applicabl	C Name of organization		D Employer identific	ation number			
	Addre chang	TAHOE MARITIME MUSEUM INC						
	Name Chang	Doing Business As		94-30	73894			
Γ	Initial	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite					
F	Termir	· · · · · · · · · · · · · · · · · · ·	1100111100111	•	525-9253			
F	ated Amend			G Gross receipts \$	727,457.			
-	return Applic			·-··				
	tion tion			H(a) Is this a group ref	Yes X No			
		· · ·		for affiliates?				
-		SAME AS C ABOVE	7.50	H(b) Are all affiliates incl				
		empt status X 501(c)(3) 501(c)()	or 52	⊣	ist (see instructions)			
		e: ► TAHOEMARITIME.ORG	· · · · · ·	H(c) Group exemption				
		organization: X Corporation	L Yea	r of formation; 1988 M	State of legal domicile: CA			
P	art I	Summary						
e e	1	Briefly describe the organization's mission or most significant activities $\ \ { t TO} \ \ { t S'}$	TIMUL	ATE INTEREST	IN,			
Governance	1	INCREASE KNOWLEDGE OF, AND MAINTAIN HISTO	ORIC 1	WATERCRAFT IN	THE LAKE			
Ë	-2	Check this box if the organization discontinued its operations or dispose	sed of mo	re than 25% of its net as:	sets			
Š	07. 07.	Number of voting members of the governing body (Part VI, line 1a)		3	13			
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	11			
න් ග		Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	6			
Activities	6	Total number of volunteers (estimate if necessary)		6	35			
÷		Total unrelated business revenue from Part VIII, column (C); line 12		7a	0.			
ĕ	. (2 / a			7b	0.			
	 ^	Net unrelated business taxable income from Form 990-T, line	}					
	Ł		-JUH	Prior Year	Current Year			
ě	8	Contributions and grants (Part VIII, line 1h)	S-0sc	606,354.	309,199.			
ē	9	Program service revenue (Part VIII, line 2g) 💢 👸 🚜 👸 💆 👸 💆 👸		16,643.	46,819.			
Revenue	. 10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		48,487.	64,133.			
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 13d At 115	-	15,579.	<u>34,032.</u>			
_	12	Total revenue · add lines 8 through 11 (must equal Part VIII, column (A). line 12)		687,063.	454,183.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	<u> </u>			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	<u> </u>			
ģ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		199,008.	172,265.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
ē	b	Total fundraising expenses (Part IX, column (D), line 25)	85.					
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		533,908.	289,130.			
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	732,916.	461,395.			
	1	Revenue less expenses Subtract line 18 from line 12	<u> </u>	<45,853.				
<u> </u>		nevertue less experises. Subtract line 10 from line 12		eginning of Current Year	End of Year			
Net Assets or	2 00	Total access (Dart V. Iran 10)		5,646,830.	5,717,985.			
SSE	20	Total assets (Part X, line 16)	ļ					
et/	21	Total liabilities (Part X, line 26)	<u> </u>	50,170.	10,649.			
뚬	22	Net assets or fund balances Subtract line 21 from line 20		5,596,660.	<u>5,707,336.</u>			
_	art II	Signature Block			 -			
		lties of perjury, I declare that I have examined this return, including accompanying schedule			knowledge and belief, it is			
true	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wi	hich prepare	er has any knowledge.				
		I want the hour			4/30/2			
Sig	ın	Signature of officer		Date 8				
He	re	RICH STOUT, TREASURER						
		Type or print name and title						
		Print/Type preparer's name Preparer's signature		Date Check	PTIN			
Pai	Paid BETH KOHN-COLE 08/02/13 self-employed P00212562							
Pre	parer	Firm's name KOHN COLODNY LLP		Firm's EIN	86-0846032			
	Only	Firm's address 5310 KIETZKE LANE, SUITE 101						
	,	RENO, NV 89511		Phone no. 75	75-828-7300			
Ma	v the I	RS discuss this return with the preparer shown above? (see instructions)		1	X Yes No			
_					Form 990 (2012)			
232	001 12-1	p-12 LHA For Paperwork Reduction Act Notice, see the separate instruction	U113.		1 01111 000 (2012)			

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

F <u>orm</u>	990 (2012) TAHOE MARITIME MUSEUM INC	94-3073894	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		
4			
1	Briefly describe the organization's mission.		
	THE PRIMARY FUNCTION OF THE MUSEUM IS TO STIMULATE INTER		
	INCREASE KNOWLEDGE OF, AND MAINTAIN WATERCRAFT AND MARIN	NE ARTIFACTS	
	SIGNIFICANT IN LAKE TAHOE'S MARITIME HISTORY THROUGH HIS	STORIC	
	PRESERVATION, INTERPRETATION AND PUBLIC EDUCATION.		
2	Did the organization undertake any significant program services during the year which were not listed on		
_			X No
	the prior Form 990 or 990-EZ?	∟ Yes	LA∟ 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?	L Yes	X 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 other	· ·	
	• • • • • • • • • • • • • • • • • • • •	ino total expenses, t	ai i G
	revenue, if any, for each program service reported	1.0	010
4a	(Code) (Expenses \$ 274,864. including grants of \$) (Revenue)		<u>819.</u>)
	THE MISSION OF THE TAHOE MARITIME MUSEUM IS TO STIMULATE	E AN INTERES	<u>T</u>
	IN, INCREASE KNOWLEDGE OF, AND MAINTAIN WATERCRAFT AND I	MARINE ARTIF	ACTS_
	SIGNIFICANT IN LAKE TAHOEOS MARITIME HISTORY THROUGH TH	E HIGHEST	
	STANDARDS OF HISTORIC PRESERVATION, INNOVATIVE INTERPRE		
	PUBLIC EDUCATION.	11111011 11111	
	PUBLIC EDUCATION.		
			
			
4b	(Code) (Expenses \$) (Revenue	.e \$)
			
4c	(Code) (Expenses \$	ue \$)
			
			
		_	
		_	
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 274,864.		
		Form 9	90 (2012)

Form 990 (2012) TAHOE MARITIME MUSEUM INC
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
_	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		х
6	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	_5_		
o	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
•	Schedule D, Part III	8	х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	_		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			٠,,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
đ	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	44.1		v
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d 11e		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1 le		Δ_
'	the organization's separate or consolidated infancial statements for the tax year include a footble that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
19a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		**
124	Schedule D, Parts XI and XII	12a		x
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	_		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40	x	
10	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		
19	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			990	(2012)

Form 990 (2012) TAHOE MARITIME MUSEUM INC 94-3073894 Page 4
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		·	
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> X</u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			3.5
	Schedule K If "No", go to line 25	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04		
_	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
2 5a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	204		- 22
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Х	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	_X	
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			47
	If "Yes," complete Schedule N, Part I	31	-	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	20		х
22	Schedule N, Part II	32	-	
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? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
.	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
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? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			-
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(2012)

Par	Check if Schedule O contains a response to any question in this Part V				$\overline{}$
	Office in Schedule O Contains a response to any question in this rait v				
10	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	8		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamil		1		
Ŭ	(gambling) winnings to prize winners?	,	1c	х	1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				$\overline{}$
	filed for the calendar year ending with or within the year covered by this return 2a	6			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	Х	1
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	1	3a	ŀ	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
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)?	L	4a_		X_
b	If "Yes," enter the name of the foreign country. ▶				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	İ		ſ	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_	5a		<u>X</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	-	5c		├──
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?	-	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts				1
_	were not tax deductible?	-	6b		
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to	n the navor2	7a	Х	ļ
a	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Tille payor .	7b	X	<u> </u>
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	}-			
Ū	to file Form 8282?	Ì	7c		x
d					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as re-	quired?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form	n 1098-C?	7h		ļ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations Did the supporting			ı	
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during to	the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			ı	
а	Did the organization make any taxable distributions under section 4966?	-	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	-	9b		
10	Section 501(c)(7) organizations. Enter		ļ	i	
a	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		İ	ı	
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter			Ì	,
'' a	Gross income from members or shareholders	[ĺ		
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
-	amounts due or received from them)	İ			
12a	1010		12a		
b	the second secon			7	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				<u></u>
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O				
b	Enter the amount of reserves the organization is required to maintain by the states in which the		1	l I	
	organization is licensed to issue qualified health plans			İ	
С	Enter the amount of reserves on hand				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	Г	14a		X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b	990	(2012)
			LOUIN	220	(2012)

Form 990 (2012)

TAHOE MARITIME MUSEUM INC

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

	Check if Schedule O contains a response to any question in this Part VI						X
Sec	tion A. Governing Body and Management					 -	
		1	ı			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		13			
	If there are material differences in voting rights among members of the governing body, or if the governing			į			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		!	_			
þ	Enter the number of voting members included in line 1a, above, who are independent	1b	<u> </u>	11	ĺ	ĺ	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	np with	any other		i		
	officer, director, trustee, or key employee?			Ļ	2	_X_	
3	Did the organization delegate control over management duties customarily performed by or under the	he dire	ct supervision	-			
	of officers, directors, or trustees, or key employees to a management company or other person?			L	3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form	990 wa	as filed?	_	4		_X_
5	Did the organization become aware during the year of a significant diversion of the organization's as	ssets?		_	5		_X_
6	Did the organization have members or stockholders?				6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint	one or	ļ	ļ	1	
	more members of the governing body?			_	7a		<u>X</u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or	- 1			
	persons other than the governing body?			L	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ear by th	ne following:				
а	The governing body?			_	8a	<u> </u>	
b	Each committee with authority to act on behalf of the governing body?			L	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached	at the			1	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenu	e Code)				
				г		Yes	No
	Did the organization have local chapters, branches, or affiliates?			}	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	chapte	rs, affiliates,	İ		ļ	
	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b	37	
	Has the organization provided a complete copy of this Form 990 to all members of its governing both	dy beto	ore filing the form	' -	11a	<u> </u>	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990						
	Did the organization have a written conflict of interest policy? If "No," go to line 13		44-0		12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			-	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	res, a	escribe	- }		x	
40	In Schedule O how this was done			-	12c	X	
13	Did the organization have a written whistleblower policy?			F	13	X	
14 15	Did the organization have a written document retention and destruction policy?	ual been	ndonondor*	-	14		
15	Did the process for determining compensation of the following persons include a review and approx		idehendeur				
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official	•			15a		x
	Other officers or key employees of the organization				15a 15b		X
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			 	טטו		- 42
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement v	with a				
6	taxable entity during the year?		· · · · · ·		16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its i	participation				
_	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization						
	exempt status with respect to such arrangements?			_ [16b	[
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶CA						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	-T (Sec	tion 501(c)(3)s or	ıly) av	/aılab	le	
	for public inspection. Indicate how you made these available. Check all that apply						
	Own website Another's website X Upon request Other (explain		•				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	conflict	of interest policy	, and	fınan	cıal	
	statements available to the public during the tax year						
20	State the name, physical address, and telephone number of the person who possesses the books a	and rec	ords of the organ	nızatı	on 🕨		
	TAHOE MARITIME MUSEUM INC - 530-525-9253						
3200	5205 WEST LAKE BLVD., HOMEWOOD, CA 96141					000	·00 · 2 ·
2-10-					Form	990	(2012)

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

Check if Schedule O contains a response to any question 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 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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and 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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A)	(B)	(C) Position					(D)	(E)	(F)	
Name and Title	Average	(do				than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	ıs bot ır/trus	han ,	compensation	compensation	amount of
	week	—			10010	174445	,	from	from related	other
	(list any hours for	ied	ļ			_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	60	ige ige			satec		(W-2/1099-MISC)	(***2/1099-141130)	organization
	organizations	Individual trustee or director	Institutional trustee		yee	를	'	(11 27 1000 111100)		and related
	below	ge	nto		Key employee	st co	ᡖ			organizations
	line)		Instit	Officer	Key e	Highest compensated employee	Former			_
(1) GREG BETTY	1.00									
DIRECTOR		X						0.	0.	0
(2) POLLY BREDT	20.00	1			}	}				
DIRECTOR		X	<u> </u>					0.	0.	0
(3) TOM BREDT	20.00				ļ	}				
PRESIDENT		X		Х				0.	0.	0
(4) CHERYL CAPLAN	3.00	1						_	_	
DIRECTOR		X	ļ		_	_		0.	0.	0
(5) TERRY CLAPHAM	1.00	ļ								
DIRECTOR		X		-	<u> </u>	₩	<u> </u>	0.	0.	0
(6) ROY DRYER	1.00	ł								_
DIRECTOR	1 22	X	├—					0.	0.	0
(7) RICHARD LASHBROOK	1.00	∤								
DIRECTOR	1 00	X	ļ—	-	-	-		0.	0.	0
(8) STEVE LIND	1.00	┨						_	0.	_
DIRECTOR	1 00	X				\vdash		0.	<u> </u>	0
(9) BARRY LUDWIG	1.00	١,,						0.	0.	_
DIRECTOR	1.00	X	-	-				U.	<u></u>	0
(10) JEFF PETERSON	1.00	X						0.	0.	0
DIRECTOR	5.00	├ ^			-	\vdash	-	<u> </u>	0.	
(11) RICH STOUT CFO	3.00	х		x		'		0.	0.	0
(12) SUE STOUT	1.00	1	\vdash	21						<u>_</u>
DIRECTOR	21.00	x						0.	0.	0
(13) SARAH FIELDS	1.00			1		<u> </u>				
SECRETARY		X		х				٥.	0.	0
(14) JESSE SIESS HADLEY	40.00									
EXECUTIVE DIRECTOR		1		Х				66,100.	0.	0
		<u> </u>	L			L				
]				1				
		<u> </u>								Form 990 (20)

Form 990 (2012)

Section	B. I	ndepend	ent Con	tractors
---------	------	---------	---------	----------

	(A) Name and business address	NONE	(B) Description of services	(C) Compensation
				-
		<u> </u>		
Total number of	of independent contractors (including bu	t not limited to those lis	sted above) who received more than	

Form 990 (2012)

\$100,000 of compensation from the organization

Form 990 (2012) TAHOE MARITIME MUSEUM INC
Part VIII Statement of Revenue

		Check if Schedule O conf	tains a response	to any question i	n this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1 a	Federated campaigns	1a				·· <u>-</u>	
og a	b	Membership dues	1b	122,590.	·			
S, E	c	Fundraising events	1c					
ar la	þ	Related organizations	1d					
S,E	е	Government grants (contribut	tions) 1e					1
Figure	f	All other contributions, gifts, gran	nts, and					1
ğ ş		similar amounts not included abo	ove 1f	186,609.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines	s 1a-1f \$					
<u>8</u> 8	h	Total. Add lines 1a-1f		>	309,199.			
1				Business Code	.*.			
<u>s</u>	2 a		ACCESSIO	900099	30,000.	30,000.		
E S	ь	ADMISSION FEES		900099	16,819.	16,819.		
Program Service Revenue	C							
e a	d							ļ
5 5	е							
_	f	All other program service reve	enue					<u> </u>
	9	Total. Add lines 2a-2f			46,819.			
	3	Investment income (including	ı dıvıdends, ınter	est, and			·	
		other similar amounts)		▶	50,817.			50,817.
	4	Income from investment of ta	x-exempt bond p	proceeds 🕨				
	5	Royalties						
			(ı) Real	(II) Personal				
	6 a	Gross rents						Į
	b	Less rental expenses						
	C	Rental income or (loss)		L				
	d	Net rental income or (loss)		<u> </u>				
	7 a	Gross amount from sales of	(i) Securities	(II) Other			•	
l		assets other than inventory	264,748.	-	•			
	þ	Less cost or other basis	254 422					
		and sales expenses	251,432.					
		Gain or (loss)	13,316.		12 216			12 216
		Net gain or (loss)			13,316.			13,316.
e	8 a	Gross income from fundraisin		1				
l e		including \$						
Other Reven		contributions reported on line	•	20 001	'			
Ĕ		Part IV, line 18	a					
₹		Less: direct expenses	b	11,550.	27,265.			27,265.
ľ		Net income or (loss) from fun	-		41,203.			21,203.
	∍ a	Gross income from gaming an Part IV, line 19						
ı	L	Less: direct expenses	a b					
		Net income or (loss) from gan	_					
		Gross sales of inventory, less	-					
ľ	io a	and allowances	a a	17,073.			I	
	h	Less: cost of goods sold	b					
		Net income or (loss) from sale	_	10,500.	6,767.			6,767.
	<u>u</u>	Miscellaneous Revent		Business Code	<u> </u>			<u> </u>
İ	11 a							
	b							
	c					-		
	d	All other revenue						
}		Total, Add lines 11a-11d		•				
_	12	Total revenue. See instructions.		>	454,183.	46,819.	0.	98,165.
23200 12-10-	9							Form 990 (2012)

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 to any question in this Part IX (A) (D) Fundraising Do not include amounts reported on lines 6b, Management and general expenses Total expenses Program service 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 66,100. 66,100 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 106,165 44,954 48,864. 12,347. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 10 Payroll taxes Fees for services (non-employees). 11 a Management 385. 385. b Legal 15,845 15,845. Accounting С Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other, (If line 11g amount exceeds 10% of line 25, 7,113. 7,113 column (A) amount, list line 11g expenses on Sch O.) 12 Advertising and promotion 9,742. 9.742. Office expenses 13 1,265. 1,265 14 Information technology Royalties 15 43,521 43,521 16 Occupancy 2,124 2,124. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest Payments to affiliates 21 127,028 127,028. 22 Depreciation, depletion, and amortization 1,020 5,181 6,201 23 Insurance 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.) 36,167. 36,001 166 0. EXHIBITS AND COLLECTION 14,769. 4,765 2,222 7,782. OTHER DIRECT COSTS 13,414. 13,414 BOAT RIDE 11,556. SUPPORT 11,556 d MEMBERSHIP e All other expenses 461,395. 274,864. 154,846 31,685. Total functional expenses. Add lines 1 through 24e 25 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

Par		2012) TAHOE MARITIME Balance Sheet	HODEOH INC			3073894 Page 11
		Check if Schedule O contains a response to any	question in this Part X	·		
				(A)		(B)
				Beginning of year		End of year
	1	Cash - non-interest-bearing	_	238,516.	1	250,489
l	2	Savings and temporary cash investments	_		2	
	3	Pledges and grants receivable, net	<u> </u>	10,000.	3	0
	4	Accounts receivable, net	 	<u> </u>	4	
	5	Loans and other receivables from current and fo				
		trustees, key employees, and highest compensa	ted employees Complete		ا ۔ ا	
ļ	_	Part II of Schedule L	-		5	
- 1	6	Loans and other receivables from other disqualif	· ·		1 1	
ł		section 4958(f)(1)), persons described in section			1 1	
		employers and sponsoring organizations of sect		6		
2	7	employees' beneficiary organizations (see instr) Notes and loans receivable, net	Complete Part II of SCITE	21,555.	7	18,476
Assets	7 8	Inventories for sale or use		17,099.	8	14 647
۲	9	Prepaid expenses and deferred charges		15,583.	9	14,647 9,979
		Land, buildings, and equipment cost or other	, , <u> </u>	13,303.		<u> </u>
	.04	basis Complete Part VI of Schedule D	10a 4,490,253.			
	b	Less accumulated depreciation	10b 608,093.	4,008,854.	10c	3,882,160
	11	Investments - publicly traded securities			11	
	12	Investments - other securities See Part IV, line 1	1,334,223.	12	1,524,267	
	13	Investments - program-related See Part IV, line		13		
1	14	Intangible assets		14		
ŀ	15	Other assets. See Part IV, line 11		1,000.	15	17,967
	16	Total assets. Add lines 1 through 15 (must equa	al line 34)	5,646,830.	16	5,717,985
	17	Accounts payable and accrued expenses	<u> </u>	35,097.	17	10,649
ļ	18	Grants payable			18	<u>-</u>
	19	Deferred revenue	<u> </u>		19	
	20	Tax-exempt bond liabilities	-		20	
ß	21	Escrow or custodial account liability Complete F			21	
	22	Loans and other payables to current and former				
Liabilities		key employees, highest compensated employee	s, and disqualified persons			
-		Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrela			23	
	24	Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, pa			24	
ļ	25	parties, and other liabilities not included on lines	•			
ı		Schedule D	17-24) Complete Falt X O	15,073.	25	0_
	26	Total liabilities. Add lines 17 through 25		50,170.	26	10,649
		Organizations that follow SFAS 117 (ASC 958), check here X and			
ري		complete lines 27 through 29, and lines 33 an				
<u> </u>	27	Unrestricted net assets		5,579,091.	27	5,670,998
B	28	Temporarily restricted net assets		17,569.	28	36,338
	29	Permanently restricted net assets			29	
5		Organizations that do not follow SFAS 117 (A	SC 958), check here ▶ 🔲			
Net Assets or Fund balances		and complete lines 30 through 34.				
Sia	30	Capital stock or trust principal, or current funds	Ļ		30	
22	31	Paid-in or capital surplus, or land, building, or eq	uipment fund		31	
<u> </u>	32	Retained earnings, endowment, accumulated in	come, or other funds	F F0.4 44.5	32	F 800 000
-	33	Total net assets or fund balances		<u>5,596,660.</u>	33_	5,707,336

5,707,336. 5,717,985. Form **990** (2012)

5,596,660. 5,646,830.

Total liabilities and net assets/fund balances

orm	990 (2012) TAHOE MARITIME MUSEUM INC 94-	-3073894	4 Pa	ige 12
Par	t XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)		54,1	
2	Total expenses (must equal Part IX, column (A), line 25)		<u>61,3</u>	
3	Revenue less expenses Subtract line 2 from line 1			<u> 212.</u> :
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))			<u> 60.</u>
5	Net unrealized gains (losses) on investments	1	17,8	<u> 88.</u>
6	Donated services and use of facilities 6			
7	Investment expenses			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain in Schedule O)			<u>0.</u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	5,7	07,3	<u> 36.</u>
Par	t XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			<u> </u>
			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X	↓
	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			
	X Separate basis Consolidated basis Both consolidated and separate basis	1		
b	Were the organization's financial statements audited by an independent accountant?	2t	,	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis	; ,		1
	consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			ļ
С	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?	20	z X	┷
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule C)		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Au			
	Act and OMB Circular A-133?	38	<u>a</u>	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required au	ıdıt		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			<u> </u>
		For	m 990	(2012)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(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.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of	the organizati	on						E	mployer	identificati	on nu	mber
			ARITIME MUSE						9	4 - 3073	894	
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this par	t) See inst	ructions				
The organ	iization is not a	a private foundation	because it is: (For lines	1 through ¹	11, check o	only one b	ox)					
1 📙	•		s, or association of chur			ction 170	(b)(1)(A)(i)					
2 📙			'0(b)(1)(A)(ii). (Attach Sc									
3 📙	•	•	tal service organization									
4 🗀		•	operated in conjunction	with a hos	pital descr	ibed in se	ection 170	(b)(1)(A)(ii	ı). Enter	the hospital	's nam	ie,
_ [city, and stat								A -l			
5 📖	_	,	benefit of a college or up	niversity ov	wnea or op	perated by	a governi	nentai uni	t describ	ea in		
e [(b)(1)(A)(ıv). (Comple		t dagarda	d in aa-4:-	- 470/bV	4\/A\/\					
6 <u> </u>	•		ent or governmental uni					r from the	general	nublic desc	ribod i	n
رهي ،	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)											
8 🗔			section 170(b)(1)(A)(vi).	(Complete	Part II)							
9 🗀			eives (1) more than 33			rom contri	ibutions m	nembersbi	n fees a	ind aross re	ceints	from
-	•	•	nctions - subject to certa						•	_		
			axable income (less sec									
		509(a)(2). (Complete			,			, ,			•	
10 🔲			perated exclusively to te	st for publ	ic safety S	See sect io	on 509(a)(4	1).				
11 🔲	An organizati	on organized and or	perated exclusively for the	he benefit (of, to perfo	rm the fu	nctions of,	or to carr	y out the	purposes c	of one	or
	more publicly	supported organiza	ations described in secti	on 509(a)(1) or section	on 509(a)(2	2) See sec	ction 509(a)(3). Ch	eck the box	that	
	describes the	type of supporting	organization and compl	ete lines 1	1e through	11h						
	a 🔲 Type		* ·		nctionally i	-				n-functional		-
e			at the organization is not									n.
	foundation m	nanagers and other t	than one or more publicl	y supporte	ed organiza	itions des	cribed in s	ection 50	9(a)(1) or	section 509	}(a)(2).	
f	If the organiz	ation received a writ	tten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				_
		rganization, check th										L
g			organization accepted a								<u> </u>	Γ
			lirectly controls, either a	lone or tog	ether with	persons o	described	in (ii) and (iii) below	I	Yes	No
	•		upported organization?	,						11g(i)		
		· ·	n described in (i) above?		o2					11g(ii) 11g(iii)		-
L	. ,	-	a person described in (i) a about the supported or							1 19(11)	1	<u> </u>
h	Provide trie i	ollowing information	about the supported of	yarıızatıorı	(5)							
(1) No		(**) [14]	(III) Turn of average	(iv) Is the (organization	(v) Did vo	u notify the	(vi) l	the	(vii) Amount	t of mo	notoni
	of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9		sted in your	organiza	tion in col.	organizáti (i) organiz	on in col.	` '	port	netal y
Oi gi	amzanon		above or IRC section	governing	document?	(i) of you	r support?	Ü.S	.?		P 0	
			(see instructions))	Yes	No	Yes	No	Yes	No	_		
									<u> </u>			
-												
								<u> </u>				
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		ļ	ļ	ļ	ļ	ļ	ļ	ļ. 		<u> </u>		
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				 	ļ				 -			
			 	+	 	_	 	 -	 -	 -		
					.							
Total			the least of	<u> </u>			<u> </u>	S-1	A /F-	000 01		
LMA For F	-aperwork Re	eauction ACT Notice	, see the Instructions f	or				ocneau	e A (FOI	m 990 or 99	かいにん)	ZU 12

232021 12-04-12

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012 TAHOE MARITIME MUSEUM INC Part II Support Schedule for Organizations Described in Sections (Form 990 or 990-EZ) 2012 TAHOE MARITIME MUSEUM INC 94-3073894 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	ction A. Public Support					<u> </u>				
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received (Do not									
	include any "unusual grants ")	1,146,151.	558,650.	2,113,352,	618,854.	356,018.	4,793,025,			
2	Tax revenues levied for the organ-					, _				
	ization's benefit and either paid to	ļ								
	or expended on its behalf									
3	The value of services or facilities									
	furnished by a governmental unit to					1:				
	the organization without charge									
4	Total. Add lines 1 through 3	1,146,151.	558,650.	2,113,352,	618,854.	356,018.	4,793,025.			
5	The portion of total contributions						<u> </u>			
-	by each person (other than a									
	governmental unit or publicly		i	•						
	supported organization) included	1								
	on line 1 that exceeds 2% of the						ı			
	amount shown on line 11,		,							
	column (f)	ľ					2,455,653,			
6	Public support. Subtract line 5 from line 4						2,337,372,			
	ction B. Total Support		···		· · · · · · · · · · · · · · · · · · ·	<u> </u>	2,337,372.			
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
	Amounts from line 4	1,146,151,	558,650.	2,113,352,	618,854.	356,018.	4,793,025,			
8	Gross income from interest,	1,140,151,	330,70301	2,110,552,	020,0020	33373231	4,755,025.			
Ü	dividends, payments received on									
	securities loans, rents, royalties									
	and income from similar sources	4,797.	89.	162.	32,338.	64,133.	101,519.			
۵	Net income from unrelated business	4,757.	05.	102.	32,330.	04/1551	101/313.			
3	activities, whether or not the									
	business is regularly carried on			ļ						
10	Other income Do not include gain									
10	or loss from the sale of capital									
	assets (Explain in Part IV)									
14	Total support. Add lines 7 through 10	-				-	4.894.544.			
	Gross receipts from related activities,	etc (see instructi	one)			12	4,034,344,			
	First five years. If the Form 990 is for			d fourth or fifth ta	ay vear as a sectio					
13	organization, check this box and stor	<u> </u>	mat, accord, triii	a, rourar, or marrie	ex your as a soons	11 00 1 (0)(0)				
Sec	ction C. Computation of Publ		rcentage		·					
	Public support percentage for 2012 (column (f))		14	47.75 %			
	Public support percentage from 2011	• • • • • • • • • • • • • • • • • • • •	·	(7)		15	79.21 %			
	33 1/3% support test - 2012. If the o			n line 13, and line	14 is 33 1/3% or n					
	stop here. The organization qualifies	-					▶X			
b	33 1/3% support test - 2011. If the c		-		line 15 is 33 1/3%	or more, check th				
_	and stop here. The organization qual						▶□			
17a	10% -facts-and-circumstances tes				e 13, 16a or 16b a	and line 14 is 10%	or more.			
	and if the organization meets the "fac	_								
	meets the "facts-and-circumstances"			="			▶ 🗀			
h	10% -facts-and-circumstances tes	•	•	• •	=	17a, and line 15 is	10% or			
		•								
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization									
12	Private foundation. If the organization		-	•			, \			
_10	ritrate louildadoll, il the organizatio	m did flot cileck a	OOX OIT III IE 10, 10	<u>a, 100, 170, 01 170</u>		dula A (Form 000				

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 or if the organization failed to qualify under Part II. If the organization fails to

Section A. Public Support	OW, please com	piete Fait II)	·			····
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and				<u> </u>		
membership fees received (Do not				!		
include any "unusual grants ")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose			}	}	1	
3 Gross receipts from activities that					 	
are not an unrelated trade or bus-						
iness under section 513					1	
-					 	
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf					-	
5 The value of services or facilities]		
furnished by a governmental unit to						
the organization without charge						<u> </u>
6 Total. Add lines 1 through 5					<u> </u>	
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons		<u> </u>			<u> </u>	
b Amounts included on lines 2 and 3 received			1			1
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the			Ť			
amount on line 13 for the year					<u> </u>	
c Add lines 7a and 7b				<u></u>	<u></u>	
8 Public support (Subtract line 7c from line 6)					<u> </u>	
ection B. Total Support						
alendar year (or fiscal year beginning in) ► 📜	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
Oa Gross income from interest,						
dividends, payments received on securities loans, rents, royalties				j		ļ
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses		1				
acquired after June 30, 1975						
c Add lines 10a and 10b						
1 Net income from unrelated business						
activities not included in line 10b,						
whether or not the business is regularly carried on						
12 Other income Do not include gain		 			 	
or loss from the sale of capital						
assets (Explain in Part IV.)		f				
 Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the form 100 is for the for 100 is for the form 100 is	<u> </u>		and for make on fifth 4.		on F01(a)(3) argonia	L
•	ne organization	s iirst, second, trii	ra, loarth, or mai t	ax year as a secu	on 50 r(c)(5) organiz	
check this box and stop here section C. Computation of Public	Support Pe	ercentage				
5 Public support percentage for 2012 (lin			column (fl)		15	9
6 Public support percentage from 2011 S		•			16	9
ection D. Computation of Invest			- <u>-</u> -			
7 Investment income percentage for 201					17	9
8 Investment income percentage from 20	•	• • • • • • • • • • • • • • • • • • • •	-, -, -, -, -, -, -, -, -, -, -, -, -, -		18	
9a 33 1/3% support tests - 2012. If the o			on line 14, and line	e 15 is more than	<u> </u>	
more than 33 1/3%, check this box and						▶
b 33 1/3% support tests - 2011. If the o						and
line 18 is not more than 33 1/3%, chec	-					
20 Private foundation If the organization		• =		=	_	

232023 12-04-12

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

Inspection

Name of the organization

Employer identification number

	TAHOE MARITIME MUS	EUM INC	94-3073894
Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)	•	
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fu	nds
_	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		only
•	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Par		nanization answered "Yes" to Form 990. Part IV	
1	Purpose(s) of conservation easements held by the organizati		·
•	Preservation of land for public use (e.g., recreation or e		ally important land area
	Protection of natural habitat	Preservation of a certified h	· ·
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form of a c	conservation easement on the last
_	day of the tax year		
	ouy of the tax your		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d		• •	
•	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the orga	
·	year ▶	sacoa, change and a community of the orga	
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per		
•	violations, and enforcement of the conservation easements in		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense state	ement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizar		
	Conservation easements		
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statement a	and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	nibition, education, or research in furtherance o	of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	bes these items	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	relating to these items		
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial gain	
	the following amounts required to be reported under SFAS 1		
а	Revenues included in Form 990, Part VIII, line 1	·	▶ \$
	Assets included in Form 990, Part X		► \$ ► \$

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

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 TAHOE MARITIME MUSEUM INC 94-3073894 Page							
Par	t III Organizations Maintaining C	collections of Art	, Historical Tre	easures, <u>c</u>	r Other	Similar As	sets(continued)
3	Using the organization's acquisition, accessi	on, and other records,	check any of the t	following that	t are a sig	nificant use of	its collection items
	(check all that apply)						
а	X Public exhibition	d	Loan or exch	nange progra	ıms		
b	Scholarly research	е	Other				
С	X Preservation for future generations						
4	Provide a description of the organization's co	ollections and explain	how they further th	e organizatio	on's exem	pt purpose in	Part XIII
5	During the year, did the organization solicit of	r receive donations of	art, historical treas	sures, or othe	er sımılar a	assets	
	to be sold to raise funds rather than to be ma	aintained as part of the	e organization's co	llection?			Yes X No
Par	t IV Escrow and Custodial Arran	gements. Complete	e if the organization	n answered "	Yes" to F	orm 990, Part	IV, line 9, or
	reported an amount on Form 990, Pa	rt X, line 21					
1a	Is the organization an agent, trustee, custod	ian or other intermedia	ary for contribution	s or other as	sets not ir	ncluded	
	on Form 990, Part X?						Yes No
b	If "Yes," explain the arrangement in Part XIII	and complete the folio	owing table				
							Amount
С	Beginning balance					1c	
d	Additions during the year					1d	
е	Distributions during the year					1e	
f	Ending balance					1f	
2a	Did the organization include an amount on F	orm 990, Part X, line 2	12				Yes No
	If "Yes," explain the arrangement in Part XIII						
Par	t V Endowment Funds. Complete	f the organization ans	wered "Yes" to For				
		(a) Current year	(b) Prior year	(c) Two year	s back (d) Three years b	ack (e) Four years back
1a	Beginning of year balance	1,334,223.	1,500,000.		O.		
b	Contributions			1,50	000.		
С	Net investment earnings, gains, and losses	177,762,	<9,527,	>			
d	Grants or scholarships						
е	Other expenditures for facilities						
	and programs	<12,282.>	<156,250,	>	····		
f	Administrative expenses						
g	End of year balance	1,524,267	1,334,223.		0.000.		
2	Provide the estimated percentage of the cur		(line 1g, column (a)) held as			
а	Board designated or quasi-endowment	100.00	%				
b	Permanent endowment	%					
С	Temporarily restricted endowment ▶	%					
	The percentages in lines 2a, 2b, and 2c show						
За	Are there endowment funds not in the posse	ession of the organizat	ion that are held a	nd administe	red for the	e organization	
	by						Yes No
	(i) unrelated organizations						3a(i) X
	(ii) related organizations						3a(ii) X
b	If "Yes" to 3a(ii), are the related organization						
4	Describe in Part XIII the intended uses of the						
Par	rt VI Land, Buildings, and Equipn	1					(a) Daalees-lee-
	Description of property	(a) Cost or oth basis (investment)				cumulated reciation	(d) Book value
		Dasis (investm		(other)	uepi	- COLACIOIT	120 007
	Land			0,807.		65 222	120,807. 3,755,106.
	Buildings	-	4,32	0,438.	5	<u>65,332.</u>	3,133,106.
	Leasehold improvements			1 240	-	10 222	2 016
	• •			1,248.		18,232.	3,016.
	Other			7,760.		24,529.	3,231.
Total	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part 🗵	<u>, column (B), line 1</u>	U(c))			<u>3,882,160.</u>

Schedule D (Form 990) 2012

Part VII Investments - Other Securities. See			94-30/3894 Pag
a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost	t or end-of-year market value
Financial derivatives			
Closely-held equity interests			
Other	1 504 065		
(A) MUTUAL FUNDS	1,524,267.	END-OF-YEAR MAR	KET VALUE
(B)	-		
(C)	-		
(D)			
(E) (F)			
(G)			
(H)			
(1)			
al (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	1,524,267.		
art VIII Investments - Program Related. Se		i.	
(a) Description of investment type	(b) Book value	(c) Method of valuation. Cost	or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)		······································	
(8)			
(9)			
10)			
tal. (Col. (b) must equal Form 990, Part X, col (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, line			
(a) [[]	Description		(b) Book value
(1)			
(2)			
(3)			
(4)	 		
(5)			
(6)			
(7)			
(8)			
(9)			
(10)	451		
tal. (Column (b) must equal Form 990, Part X, col. (B) line rart X Other Liabilities. See Form 990, Part X, I	no 25		
(a) Description of liability		b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
10)			
(11)			
A. I. (Calverer (h) access a several Forms 000. Florid V. and (D) line	25.)		
tal. (Column (b) must equal Form 990, Part X, col (B) line	/		·

12-10-12

		(Form 990) 2012 TAHOE MARITIME MUSEUM INC			3073894	Page 4
Pai	rt XI	Reconciliation of Revenue per Audited Financial Stateme	nts With Revenue per R	eturr	1	
1	Total	revenue, gains, and other support per audited financial statements		1		
2	Amou	nts included on line 1 but not on Form 990, Part VIII, line 12.			-	
а	Net u	nrealized gains on investments	2a			
b	Donat	ed services and use of facilities	2b			
С	Reco	veries of prior year grants	2c			
d		(Describe in Part XIII)	2d			
е		nes 2a through 2d		2e		
3		act line 2e from line 1		3		
4	Amou	nts included on Form 990, Part VIII, line 12, but not on line 1				
а		ment expenses not included on Form 990, Part VIII, line 7b	4a			
b		(Describe in Part XIII)	4b			
		nes 4a and 4b		4c		
5		revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5		
		Reconciliation of Expenses per Audited Financial Statement	ents With Expenses per	Retu	rn	
1		expenses and losses per audited financial statements		1		
2		nts included on line 1 but not on Form 990, Part IX, line 25		_		
a		red services and use of facilities	2a			
-		vear adjustments	2b	i [
	Other		2c	1		
-		(Describe in Part XIII)	2d			
		•	_20	20	I	
		nes 2a through 2d		2e 3		
3		act line 2e from line 1		-3		
4		nts included on Form 990, Part IX, line 25, but not on line 1.			1	
		tment expenses not included on Form 990, Part VIII, line 7b	4a		I	
		(Describe in Part XIII)	_4b		I	
		nes 4a and 4b		4c		
<u>5</u>		expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5		
		Supplemental Information				
		nis part to provide the descriptions required for Part II, lines 3, 5, and 9, Part II			2b, Part V, line	4; Paπ
		rt XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to			DOORT O 3	
PA.	KT I	II, LINE 1A: THE MUSUEM'S COLLECTIONS	CONSIST OF MARIN	E V	ESSELS A	ממד
401	TODO	MILAN HAVE HERMODECAL CECNIEFCANCE DED	TAINING TO LAKE	៣ភដ	∩E' 3 NTD 7	DE
10	LOKS	THAT HAVE HISTORICAL SIGNIFICANCE PER	TAINING TO LAKE	IAII	OR WIND E	TV E
HE	LD F	OR EDUCATIONAL AND CURATORIAL PURPOSES	IN A MUSEUM WHI	СН	IS OPEN	то
rH1	E PU	BLIC. EACH ITEM IS CATALOGED, PRESERV	ED AND CARED FOR	., A	ND	
		TIES VERIFYING THEIR EXISTENCE AND ASS			-	<u></u>
				<u></u>		-
?EI	RFOR	MED REGULARLY.				

PART III, LINE 4: THE MUSUEM'S COLLECTIONS, WERE WERE ACQUIRED THROUGH

Schedule D (Form 990) 2012

SCHEDULE G

Department of the Treasury

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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.

OMB No 1545-0047

Open To Public Inspection

Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Name of the organization **Employer identification number** 94-3073894 TAHOE MARITIME MUSEUM INC Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not Part I required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants а b Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events C In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or Yes ___ No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b 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 have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser from activity or entity (fundraiser) organization listed in col (i) Yes_ No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

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

Schedule G (Form 990 or 990-EZ) 2012

	edu irt	le G (Form 990 or 990-EZ) 2012 TAHOE M Fundraising Events. Complete if the					1-3073894 Page 2
[[of fundraising event contributions and gr	_				·
			(a) Event #1		Event #2	(c) Other events	<u> </u>
			SPECIAL			NONE	(d) Total events (add col. (a) through
			EVENTS				col. (c))
Φ			(event type)	(e	vent type)	(total number)	COI. (C))
Revenue	1	Gross receipts	38,801.				38,801.
_				ļ			
	2	Less. Contributions					
	3	Gross income (line 1 minus line 2)	38,801.		-1		38,801.
	4	Cash prizes					
s	5	Noncash prizes		<u> </u>			
Direct Expenses	6	Rent/facility costs					
Irect E	7	Food and beverages					
	8	Entertainment					
	9	Other direct expenses	11,536.				11,536.
	10	Direct expense summary Add lines 4 through	h 9 ın column (d)			>	11,536
_	11	Net income summary Combine line 3, colum	n (d), and line 10				27,265.
Pa	art		answered "Yes" to Form	990, Pa	rt IV, line 19, or i	reported more than	
		\$15,000 on Form 990-EZ, line 6a		(L) Di	III toba (instant		(d) Total saming (odd
Revenue			(a) Bingo		ıll tabs/instant rogressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
ven							
æ	1	Gross revenue]			
	i i			<u> </u>			-
ses	2	Cash prizes					
Expenses	3	Noncash prizes					
Direct	4	Rent/facility costs					
	5	Other direct expenses					:
	Ĭ		Yes %	☐ Ye	es %	Yes	%
	6	Volunteer labor	No	No.	<u> </u>	□ No	
	7	Direct expense summary. Add lines 2 throug	h 5 ın column (d)			•	· ()
	8	Net gaming income summary Combine line	1, column d, and line 7				>
9	En	ter the state(s) in which the organization opera	ites gaming activities.				
		the organization licensed to operate gaming a					Yes No
b	lf "	No," explain			-		
	_						
10-	\//e	ere any of the organization's gaming licenses re	evoked suspended or te	rminated	I during the tax		Yes No
		Yes," explain			=		
	_						
2320	82 0	1-07-13				Schedule G (F	Form 990 or 990-EZ) 2012

Sch	edule G (Form 990 or 990-EZ) 2012 TAHOE MARITIME MUSEUM INC	94-3073894 Page 3
	Does the organization operate gaming activities with nonmembers?	Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	
	to administer charitable gaming?	Yes No
13	Indicate the percentage of gaming activity operated in	
а	The organization's facility	_13a
b	An outside facility	13b %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and recoil	rds
	Name	
	Address	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b	olf "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amo	ount
	of gaming revenue retained by the third party > \$	
c	: 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.	
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
	retain the state gaming license?	Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent	
	organization's own exempt activities during the tax year > \$	
Pa	ITT IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, coli	umns (iii) and (v), and Part III,
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional info	ormation (see instructions)
	-	
		

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No 1545-0047

Open To Public Inspection

Name o	of the organization							1 -	er iden		ion nu	mber
			RITIME MU					<u>94-3</u>	<u> 10738</u>	394		
Part	 j		•		•	section 501(c)(4) org						
	Complete if the					art IV, line 25a or 25t	o, or Form 990-EZ, P	art V, line	40b			
1 (a)	Name of disqualified	person (b) Relationship bet			lified (c) Description of tran	saction		(d) Corrected		
			person and o	rganiza	ation	<u> </u>	<u> </u>			_ Y	es	No
		-								-		
	· <u> </u>				-			-		+	_	
				_						$\neg \mid \neg$		
2 Er	nter the amount of tax	incurred by the	e organization mai	nagers	or disc	qualified persons du	ring the year under					
se	ection 4958							>	\$			
3 Er	nter the amount of tax,	If any, on line	2, above, reimburs	sed by	the or	ganization		•	\$			
Dort	III Lagna ta an	d/or Erom I	nterested Per									
Part	J											
						, Part V, line 38a or l	Form 990, Part IV, III	ie 26, or ii	tne org	anızatı	on	
	(a) Name of	(b) Relationsh	90, Part X, line 5, (c) Purpose		an to or	(e) Original	(f) Balance due	(g) In	(h) A	proved	i m v	/ritten
11	nterested person	with organization	26 1000	fror	m the ization?	principal amount	amount (1) Balance due		, by bo	pard or mittee?		ment?
		organization			From			Yes N	\rightarrow	T	Yes	No
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Total					·	▶ \$	<u> </u>	<u> </u>	-			-
Part	III Grants or As	ssistance B	enefiting Inte	reste	d Pe	rsons.					•	
	Complete if the	organization ar	nswered "Yes" on	Form	990, Pa	art IV, line 27						
(a) Name of interested	person	(b) Relationship			(c) Amount of	(d) Type		(4	e) Purp		f
		ĺ	interested per the organiz		ıd	assistance	assistan	ce		assist	ance	
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2012

. <u>Schedule L (Form 990 or 990-EZ) 2012</u> TAHOE	MADITIME MICEIM INC		94-3073	201	Dogg 0
Part IV Business Transactions Invol	ving Interested Persons.		<u> </u>	034	Page 2
	d "Yes" on Form 990, Part IV, line 28a, 28	3b. or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	òrganız	aring of zation's nues?
				Yes	No_
TOM BREDT/K.M.R. MGT LLC	PAST BOARD PRES.		THE MUSUEM		X
DAVE OLSEN	CURRENT BOARD PRES.	30,000.	TRADED A IT		Х
	<u> </u>	· · · · · · · · · · · · · · · · · · ·			_
					
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			W. 200		
Part V Supplemental Information	al information for responses to question	s on Schedule I. (see	instructions)		
	TRANSACTIONS INVOLVI				
SCH L, PART IV, BUSINESS	TRANSACTIONS INVOLVI	NG INIERESI	ED FERSONS:		
(A) NAME OF PERSON: TOM B	REDT/K.M.R. MGT LLC				
<u> </u>					
(D) DESCRIPTION OF TRANSA	CTION: THE MUSUEM HA	S A LEASE F	OR WAREHOUS	<u>E</u>	
SPACE WITH RPP MANAGEMENT	LLC (A COMPANY OWN	ED BY THE P	RESIDENT OF	THE)
	ALSO ON THE BOARD).		CALLS FOR		
MUSEUM TO BE A SUBTENANT	TO RPP MANAGEMENT LL	THE SUE	LEASE ALSO	CALL	<u>s</u>
FOR A RENTAL AMOUNT OF \$0	, WITH A FAIR MARKET	VALUE OF T	HE RENT AND)	
COMMON AREA COSTS TO BE P	ATD BV DDD MANACEMEN	T T.T.C AC A	CHARTTARLE		
COLUMN AVEN CORTS TO DE L	WID DI VEE BUNGGRADIA	T THE WOLK	CIMICATURE		

/ A \	NT N M E	$\triangle E$	PERSON:	DAME	OT.CEN
(A)	NAME	()r	PERSON:	DAVE.	CHASTAN

(D) DESCRIPTION OF TRANSACTION: TRADED A ITEM IN THE COLLECTION VALUED

AT \$30,000 FOR A PRIOR YEAR LIABILITY OWED TO THE CURRENT BOARD PRESIDENT

FOR SERVICES PERFORMED RELATING TO RACKS USED TO HOUSE THE EXHIBIT.

DONATION TO THE MUSEUM. THE 2012 VALUE OF THIS DONATION IS \$222,866.

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form

990, Part IV, lines 29 or 30.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service 990, Part IV, lines 29 or 3

_____ ► Attach to Form 990.

Name of the organization **Employer identification number** 94-3073894 TAHOE MARITIME MUSEUM INC Types of Property Part I (a) (b) (c) (d) Check If Number of Noncash contribution Method of determining contributions or amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1g Art · Works of art Art - Historical treasures Art - Fractional interests Books and publications Clothing and household goods 5 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded Securities - Closely held stock 10 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 15 16 Real estate - Commercial Real estate - Other 17 Collectibles 18 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens Archeological artifacts 24 222,866. COMPARABLE RENTAL RA (WAREHOUSE REN) 25 26 Other 27 Other 28 Other Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for 30a Х the entire holding period? b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? Х 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a X contributions? b If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

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

Schedule M (Form 990) (2012)

describe in Part II

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

OMB No 1545-0047 ついせつ

Name of the organization

Complete to provide information for responses to specific questions of Form 990 or 990-EZ or to provide any additional information. ➤ Attach to Form 990 or 990-EZ.

n	Open to Public Inspection	
	identification number 073894	
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OR TO F	'ILING.	
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TAHOE MARITIME MUSEUM INC FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MI TAHOE BASIN. FORM 990, PART VI, SECTION A, LINE 2: POLLY AND TOM BRED RICH AND SUE STOUT ARE MARRIED. FORM 990, PART VI, SECTION B, LINE 11: DRAFT COPIES OF T PROVIDED TO THE TREASURER VIA EMAIL FOR THEIR REVIEW PRI FORM 990, PART VI, SECTION B, LINE 12C: OFFICERS AND DIR DISCLOSE CONFLICTS ANNUALLY. THE EXECUTIVE COMMITTEE WI AND DECIDE THE APPROPRIATE ACTION. FORM 990, PART VI, SECTION C, LINE 18: THE MUSEUM'S GOVE POLICIES AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REC FORM 990, PART VI, SECTION C, LINE 19: THE MUSEUM'S GOVE POLICIES AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REC FORM 990, PART XI, RECONCILIATION OF NET ASSETS NON CASH REVENUE AND EXPENSES FORM 990, PART_XII OVERSIGHT THE BOARD OF TRUSTEES, ESPECIALLY THE TREASURER, REVIEWS THE REVIEWED FINANCIAL STATEMENTS IN DETAIL PRIOR TO THE ISSUANCE BY THE INDEPENDENT LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2012) 232211 01-04-13

Schedule O (Form 990 or 990 EZ) (2012)	Page 2
Name of the organization TAHOE MARITIME MUSEUM INC	Employer identification number 94-3073894
ACCOUNTANT. THE TREASURER IS ALSO INVOLVED IN THE PROCES	S OF ENGAGING
THE INDEPENDENT ACCOUNTANT TO ENSURE THEY ARE QUALIFIED T	O PERFORM THE
SERVICES.	
