



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

OMB No 1545-0047

2012

Open to Public
Inspection

A For the 2012 calendar year, or tax year beginning 07/01, 2012, and ending 06/30, 2013

B Check applicable

☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization

EXPLORERS CLUB

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

46 EAST 70TH STREET

Room/suite

City, town or post office, state, and ZIP code

NEW YORK, NY 10021

F Name and address of principal officer: ALAN H. NICHOLS

46 EAST 70TH STREET, NEW YORK, NY 10021

D Employer identification number

13-1866795

E Telephone number

(212) 628-8383

G Gross receipts \$ 3,779,619.

H(a) Is this a group return for affiliates? Yes ☒ No ☐H(b) Are all affiliates included? Yes ☐ No ☐

If "No," attach a list (see instructions)

H(c) Group exemption number 9267

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c)() (Insert no) ☐ 4947(a)(1) or ☐ 527

J Website: WWW.EXPLORERS.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ☐ L Year of formation 1904 M State of legal domicile: NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities:

TO PROMOTE THE SCIENTIFIC EXPLORATION OF LAND, SEA, AIR, AND SPACE BY SUPPORTING RESEARCH AND EDUCATION IN THE PHYSICAL, NATURAL AND BIOLOGICAL SCIENCES.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a) 3 18.

4 Number of independent voting members of the governing body (Part VI, line 1b) 4 18.

5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 13.

6 Total number of volunteers (estimate if necessary) 6 23.

7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0

7b Net unrelated business taxable income from Form 990-T, line 34 7b 0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	1,889,691.	1,894,711.
9 Program service revenue (Part VIII, line 2g)	146,338.	128,915.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	42,953.	177,411.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-107,952.	-109,889.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,971,030.	2,091,148.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	195,836.	196,913.
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	660,269.	746,134.
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) 55,163.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,115,020.	913,706.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,971,125.	1,856,753.
19 Revenue less expenses. Subtract line 18 from line 12	-95.	234,395.
20 Total assets (Part X, line 16)	Beginning of Current Year 8,109,403.	End of Year 8,311,123.
21 Total liabilities (Part X, line 26)	842,389.	615,851.
22 Net assets or fund balances. Subtract line 21 from line 20.	7,267,014.	7,695,272.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

Date

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

PAUL HAMMERSCHMIDT

Preparer's signature

Date

Check ☐ if PTIN

self-employed

P01384178

Firm's name BDO USA, LLP

Firm's EIN 13-5381590

Firm's address 100 PARK AVENUE, NEW YORK, NY 10017

Phone no 212-885-8000

May the IRS discuss this return with the preparer shown above? (see instructions)

X Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2012)

JSA
2E1010 1 000

40303U 702V 5/15/2014 9:15:52 AM V 12-7.12

PAGE 1

SCANNED JUN 30 2015

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☒ X

1 Briefly describe the organization's mission

TO PROMOTE THE SCIENTIFIC EXPLORATION OF LAND, SEA, AIR, AND SPACE BY
SUPPORTING RESEARCH AND EDUCATION IN THE PHYSICAL, NATURAL AND
BIOLOGICAL SCIENCES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code:) (Expenses \$ 1,414,235 including grants of \$ 196,913.) (Revenue \$ 130,903.)

ATTACHMENT 1

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

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

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 1,414,235.

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 (see instructions)?	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 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 similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	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	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8 X	
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	X
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 X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a 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	X
c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	X
d 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 Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a X	
b 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	X
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	X
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, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

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	X
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	X
24 a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25 a 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	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 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, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26	X
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).		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28a	X
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? 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 Schedule N, Part II.	32	X
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	X
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	X
35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 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)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V. ☐

	1a	1b	1c	2a	2b	3a	3b	4a	5a	5b	5c	6a	6b	7a	7b	7c	7d	7e	7f	7g	7h	8	9a	9b	10a	10b	11a	11b	12a	12b	13a	13b	13c	14a	14b	
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	0																																			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		0																																		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?																																				
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return				13																																
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?					X																															
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).																																				
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?							X																													
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O																																				
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?								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																																				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?									X																											
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?										X																										
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?																																				
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?												X																								
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?																																				
7 Organizations that may receive deductible contributions under section 170(c).																																				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?									X																											
b If "Yes," did the organization notify the donor of the value of the goods or services provided?										X																										
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?																X																				
d If "Yes," indicate the number of Forms 8282 filed during the year																																				
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?										X																										
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?										X																										
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?																																				
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?																																				
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?																																				
9 Sponsoring organizations maintaining donor advised funds.																																				
a Did the organization make any taxable distributions under section 4966?																																				
b Did the organization make a distribution to a donor, donor advisor, or related person?																																				
10 Section 501(c)(7) organizations. Enter																																				
a Initiation fees and capital contributions included on Part VIII, line 12																																				
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities																																				
11 Section 501(c)(12) organizations. Enter																																				
a Gross income from members or shareholders																																				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)																																				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?																																				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year																																				
13 Section 501(c)(29) qualified nonprofit health insurance issuers.																																				
a Is the organization licensed to issue qualified health plans in more than one state?																																				
Note: See the instructions for additional information the organization must report on Schedule O.																																				
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans																																				
c Enter the amount of reserves on hand																																				
14a Did the organization receive any payments for indoor tanning services during the tax year?																																				
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O																																				

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 18		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b Enter the number of voting members included in line 1a, above, who are independent 1b 18		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 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 appoint one or more members of the governing body? 7a	X	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b	X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body? 8a	X	
b Each committee with authority to act on behalf of the governing body? 8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9		X

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates? 10a	X	
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b	X	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a		X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c	X	
13 Did the organization have a written whistleblower policy? 13	X	
14 Did the organization have a written document retention and destruction policy? 14		X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official 15a	X	
b Other officers or key employees of the organization 15b		X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ☒ NY

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. ☒ GRACIE ALMEIDA, 46 EAST 70TH STREET, NEW YORK, NY 10021 212-628-8383

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question in this Part VII ☒ X**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.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ALAN H. NICHOLS PRESIDENT	20.00	X		X				0	0	0
(2) ROBERT J. ATWATER VP MEMBERSHIP	3.00	X		X				0	0	0
(3) CONSTANCE DIFEDE VP FLAG & HONOR	3.00	X		X				0	0	0
(4) DONALD T. MORLEY VP OPERATIONS	3.00	X		X				0	0	0
(5) CAPT. NORMAN L. BAKER DIRECTOR	3.00	X						0	0	0
(6) BRIAN M. BOON DIRECTOR	3.00	X						0	0	0
(7) JAMES M. CLASH DIRECTOR	3.00	X						0	0	0
(8) CATHERINE COOKE (FROM 5/13) DIRECTOR	3.00	X						0	0	0
(9) JIM DELGADO (FROM 3/13) DIRECTOR	3.00	X						0	0	0
(10) JAMES M. EDWARDS DIRECTOR	3.00	X						0	0	0
(11) J. MARK FOWLER, JR. DIRECTOR	3.00	X						0	0	0
(12) RICHARD GARRIOTT DIRECTOR	3.00	X						0	0	0
(13) SCOTT W. HAMILTON DIRECTOR	3.00	X						0	0	0
(14) BRIAN P. HANSON DIRECTOR	3.00	X						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) KENNETH HOWERY DIRECTOR	3.00	X						0	0	0
(16) KENNETH M. KAMLER DIRECTOR	3.00	X						0	0	0
(17) LEE V. LANGAN DIRECTOR	3.00	X						0	0	0
(18) MABEL L. PURKERSON DIRECTOR	3.00	X						0	0	0
(19) PAUL SCHUCHERT (FROM 10/12) EXECUTIVE DIRECTOR	40.00			X				32,309.	0	6,785.
(20) MATTHEW WILLIAMS (THRU 10/12) EXECUTIVE DIRECTOR	40.00			X				110,075.	0	23,116.
(21) JULIANE M. CHASE VP RESEARCH & EDUCATION	3.00			X				0	0	0
(22) WILL J. ROSEMAN VP LECTURES & PROGRAMS	3.00			X				0	0	0
(23) ALEXANDER WALLACE VP CHAPTERS	3.00			X				0	0	0
(24) ROBERT E. MARONEY TREASURER	20.00			X				0	0	0
(25) MARK KASSNER TREASURER	6.00						X	11,750.	0	0
1b Sub-total								0	0	0
c Total from continuation sheets to Part VII, Section A								154,134.	0	29,901.
d Total (add lines 1b and 1c)								154,134.	0	29,901.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
3	X	
4		X
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 2		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **1**

Part VIII Statement of RevenueCheck if Schedule O contains a response to any question in this Part VIII ☒ X

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b	816,474			
	c	Fundraising events	1c	770,513			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	307,724			
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		1,894,711			
Program Service Revenue	2a	CLUB EVENTS	Business Code	900099	105,555	105,555	
	b	TRAVEL PROGRAM	900099	8,073	8,073		
	c	JOURNAL SUBSCRIPTIONS & ADVERTISING	541800	7,950	7,950		
	d	PUBLIC LECTURE SERIES		7,337	7,337		
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		128,915			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		58,588		58,588
4		Income from investment of tax-exempt bond proceeds		0			
5		Royalties		0			
6a		Gross rents	(i) Real	158,484			
b		Less: rental expenses	(ii) Personal				
c		Rental income or (loss)		158,484			
d		Net rental income or (loss)		158,484		158,484	
7a		Gross amount from sales of assets other than inventory	(i) Securities	1,111,475			
b		Less: cost or other basis and sales expenses	(ii) Other				
c		Gain or (loss)		992,652			
d		Net gain or (loss)		118,823		118,823	
8a		Gross income from fundraising events (not including \$ 770,513 of contributions reported on line 1c) See Part IV, line 18	ATCH 3	231,525			
b		Less: direct expenses		680,298			
c		Net income or (loss) from fundraising events	ATCH 4	-448,773		-448,773	
9a		Gross income from gaming activities See Part IV, line 19					
b		Less: direct expenses					
c		Net income or (loss) from gaming activities		0			
10a		Gross sales of inventory, less returns and allowances		17,509			
b	Less: cost of goods sold	ATCH 5	15,521				
c	Net income or (loss) from sales of inventory		1,988	1,988			
Miscellaneous Revenue			Business Code				
11a	LEGAL FEES WRITE OFF	900099	112,178		112,178		
b	FILM SHOOT	900099	51,999		51,999		
c	MISCELLANEOUS	900099	14,235		14,235		
d	All other revenue						
e	Total. Add lines 11a-11d		178,412				
12	Total revenue. See instructions		2,091,148	130,903		65,534	

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response to any question in this Part IX ☐

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	0			
2 Grants and other assistance to individuals in the United States. See Part IV, line 22.	196,913.	196,913.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	0			
4 Benefits paid to or for members.	0			
5 Compensation of current officers, directors, trustees, and key employees.	123,796.	123,796.		
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	15,880.		15,880.	
7 Other salaries and wages.	441,886.	317,747.	96,135.	28,004.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	14,417.	10,813.	2,883.	721.
9 Other employee benefits.	91,545.	63,287.	22,606.	5,652.
10 Payroll taxes.	58,610.	43,958.	11,722.	2,930.
11 Fees for services (non-employees):				
a Management.	0			
b Legal.	16,329.	14,696.	1,470.	163.
c Accounting.	41,266.	37,140.	3,714.	412.
d Lobbying.	0			
e Professional fundraising services. See Part IV, line 17.	0			
f Investment management fees.	15,000.		15,000.	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	43,953.	39,558.	3,956.	439.
12 Advertising and promotion.	0			
13 Office expenses.	236,273.	225,555.	9,646.	1,072.
14 Information technology.	6,185.	4,639.	1,237.	309.
15 Royalties.	0			
16 Occupancy.	130,246.	97,685.	26,049.	6,512.
17 Travel.	8,139.	6,390.	1,418.	331.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19 Conferences, conventions, and meetings.	2,503.	1,877.	501.	125.
20 Interest.	0			
21 Payments to affiliates.	0			
22 Depreciation, depletion, and amortization.	111,200.	100,080.	11,120.	
23 Insurance.	94,195.	70,647.	18,839.	4,709.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a CLUB EVENTS	129,814.		129,814.	
b BAD DEBT	50,544.	37,908.	10,109.	2,527.
c LICENSES/PERMITS/FEES	4,627.	4,164.	416.	47.
d MISCELLANEOUS	23,432.	17,382.	4,840.	1,210.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e.	1,856,753.	1,414,235.	387,355.	55,163.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).	0			

Part X Balance SheetCheck if Schedule O contains a response to any question in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	0	1	0
	2 Savings and temporary cash investments	1,685,606.	2	924,437.
	3 Pledges and grants receivable, net	400,000.	3	300,000.
	4 Accounts receivable, net	117,134.	4	114,151.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	25,837.	8	21,448.
	9 Prepaid expenses and deferred charges	22,473.	9	46,614.
	10a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D	10a	5,204,097.	
	b Less: accumulated depreciation	10b	1,665,615.	
		2,825,654.	10c	3,538,482.
	11 Investments - publicly traded securities	3,032,699.	11	3,365,991.
	12 Investments - other securities. See Part IV, line 11	0	12	0
	13 Investments - program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
15 Other assets. See Part IV, line 11	0	15	0	
16 Total assets. Add lines 1 through 15 (must equal line 34)	8,109,403.	16	8,311,123.	
Liabilities	17 Accounts payable and accrued expenses	439,543.	17	220,493.
	18 Grants payable	0	18	0
	19 Deferred revenue	402,846.	19	395,358.
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0	25	0
	26 Total liabilities. Add lines 17 through 25	842,389.	26	615,851.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	4,121,404.	27	4,250,531.
	28 Temporarily restricted net assets	679,829.	28	969,380.
	29 Permanently restricted net assets	2,465,781.	29	2,475,361.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	7,267,014.	33	7,695,272.
	34 Total liabilities and net assets/fund balances	8,109,403.	34	8,311,123.

Form 990 (2012)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,091,148.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,856,753.
3	Revenue less expenses Subtract line 2 from line 1	3	234,395.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,267,014.
5	Net unrealized gains (losses) on investments	5	193,863.
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	7,695,272.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990. <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	

Form 990 (2012)

SCHEDULE A-
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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 organization

EXPLORERS CLUB

Employer identification number

13-1866795

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 ☒ 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 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a ☐ Type I b ☐ Type II c ☐ Type III-Functionally integrated d ☐ Type III-Non-functionally integrated
 - e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
 - f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box. ☐
 - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i)		
(ii) A family member of a person described in (i) above? 11g(ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii)		
 - h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2012

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

Section A. Public Support

Calendar 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")	1,086,602.	1,845,408.	1,457,922.	1,889,691.	1,894,711.	8,174,334.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3.	1,086,602	1,845,408	1,457,922	1,889,691.	1,894,711.	8,174,334.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						688,173.
6 Public support. Subtract line 5 from line 4						7,486,161.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	1,086,602	1,845,408.	1,457,922.	1,889,691.	1,894,711.	8,174,334.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	270,872	203,242	215,187	264,963.	217,072.	1,171,336.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) - ATCH. 1	4,128	8,329	-337,130	-329,962.	-270,361.	-924,996
11 Total support. Add lines 7 through 10						8,420,674.
12 Gross receipts from related activities, etc (see instructions)					12	664,330
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	88.90 %
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	85.78 %
16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 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		<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 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		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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 qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar 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.")						
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						
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						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b.						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 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)						
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐
- b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐
- 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2008	2009	2010	2011	2012	TOTAL
SPECIAL EVENTS NET INCOME			-346,385.	-366,558.	-448,773.	-1,161,716.
LEGAL FEES WRITE OFF					112,178.	112,178.
FILM SHOOT					51,999.	51,999.
MISCELLANEOUS	4,128	8,329	9,255.	36,596	14,235.	72,543.
TOTALS	<u>4,128</u>	<u>8,329</u>	<u>-337,130</u>	<u>-329,962</u>	<u>-270,361</u>	<u>-924,996</u>

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

EXPLORERS CLUB

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.

OMB No 1545-0047

2012

Open to Public
Inspection

Employer identification number

13-1866795

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 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 funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

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

Schedule D (Form 990) 2012

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition
 b ☒ Scholarly research
 c ☒ Preservation for future generations
 d ☐ Loan or exchange programs
 e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☒ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. ☐

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2,975,055.	2,380,399.	1,990,786.	1,817,949.	2,083,238.
b Contributions	40,918.	22,136.	340.	480.	710.
c Net investment earnings, gains, and losses	193,016.	-90,558.	424,023.	216,442.	-201,569.
d Grants or scholarships	47,997.	34,414.	27,250.	44,085.	56,930.
e Other expenditures for facilities and programs					
f Administrative expenses		-697,492.	7,500.		7,500.
g End of year balance	3,160,992.	2,975,055.	2,380,399.	1,990,786.	1,817,949.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ▶ 4.3633 %
 b Permanent endowment ▶ 17.3271 %
 c Temporarily restricted endowment ▶ 78.3096 %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		253,847.		253,847.
b Buildings		3,557,987.	1,207,162.	2,350,825.
c Leasehold improvements				
d Equipment		489,844.	458,453.	31,391.
e Other		902,419.		902,419.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).				3,538,482.

Schedule D (Form 990) 2012

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
(I) _____		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(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)		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶

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

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

1	Total revenue, gains, and other support per audited financial statements		1	2,270,781.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments	2a	193,863.	
b	Donated services and use of facilities	2b	770.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	194,633.
3	Subtract line 2e from line 1		3	2,076,148.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	15,000.	
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	15,000.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	2,091,148.

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

1	Total expenses and losses per audited financial statements		1	1,842,523.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	770.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	770.
3	Subtract line 2e from line 1		3	1,841,753.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	15,000.	
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	15,000.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	1,856,753.

Part XIII Supplemental Information

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

SEE PAGE 5

Part XIII Supplemental Information (continued)

PART III, LINE 4:

THE ORGANIZATION POSSESSES A LIBRARY, AN ARCHIVES AND MANUSCRIPTS REPOSITORY, AND AN OBJECT COLLECTION, COLLECTIVELY KNOWN AS "RESEARCH COLLECTIONS". THE COLLECTIONS CONTAIN APPROXIMATELY 13,000 VOLUMES, 550 LINEAR FEET OF ARCHIVES AND MANUSCRIPTS, AND 900 OBJECTS HOUSED THROUGHOUT THE ORGANIZATION'S LOWELL THOMAS BUILDING. THE ORGANIZATION RECOGNIZES ITS OBLIGATION TO PRESERVE, CONSERVE, AND MAKE AVAILABLE THE UNIQUE AND IMPORTANT RECORDS IN ITS CUSTODY AND THUS EMPLOYS A FULL-TIME CURATOR OF RESEARCH COLLECTIONS TO OVERSEE THE MANAGEMENT OF THE COLLECTIONS, INCLUDING THE FUNCTIONS OF ACQUISITION AND DISPOSAL, ARRANGEMENT AND DESCRIPTION, PRESERVATION, REFERENCE SERVICE, AND ACCESS AND OUTREACH.

THE ORGANIZATION'S COLLECTIONS ARE OF LOCAL, REGIONAL, NATIONAL AND EVEN INTERNATIONAL IMPORTANCE. AMONG THE ORGANIZATION'S TREASURES ARE ITEMS AS VARIED AS PART OF A MEDIEVAL CLOISTER FROM TRIE-EN-BIGORRE IN FRANCE, A TRANSMITTER USED BY ADMIRAL RICHARD BYRD DURING HIS SECOND ANTARCTIC EXPEDITION AND THE NUCLEUS OF A SIGNIFICANT AND VARIED PHOTOGRAPH COLLECTION. THE ORGANIZATION'S COLLECTIONS ARE PARTICULARLY STRONG AT DOCUMENTING POLAR HISTORY AND THE HISTORY OF THE ORGANIZATION ITSELF. THEY COMPRISE UNIQUE RECORDS FOR THE ACTIVITIES OF WELL-KNOWN EXPLORERS SUCH AS CARL AKELEY, ROY CHAPMAN ANDREWS, MARTIN JOHNSON, LOWELL THOMAS, SIR EDMUND HILLARY, JANE GOODALL, SYLVIA EARLE, NEIL ARMSTRONG AND BUZZ ALDRIN.

IN FURTHERANCE OF ITS EDUCATIONAL MISSION TO PROMOTE THE ACQUISITION OF

Part XIII Supplemental Information (continued)

KNOWLEDGE THROUGH EXPLORATION AND PRESERVE THE "INSTINCT TO EXPLORE", THE ORGANIZATION MAKES ITS COLLECTIONS AVAILABLE FOR USE BY A WIDE RANGE OF PEOPLE IN A VARIETY OF FIELDS INCLUDING BIOGRAPHERS, GENEALOGISTS, FILMMAKERS, CURATORS, WRITERS, JOURNALISTS, PHOTO RESEARCHERS, INDEPENDENT ENTHUSIASTS, STAFF MEMBERS, AND STUDENTS. PEOPLE USE THE INFORMATION THAT WE PROVIDE TO PLAN EXPEDITIONS, TO LEARN ABOUT THE HISTORY OF EXPLORATION, AND TO PROMOTE EXPLORATION AND ITS HISTORY IN MAGAZINES, BOOKS, FILM AND OTHER MEDIA. IN ADDITION, THE ORGANIZATION'S RESEARCH COLLECTIONS ARE USED BY MEMBERS AND STAFF TO FURTHER EFFICIENT ADMINISTRATION OF THE ORGANIZATION AS A WHOLE, ALLOWING IT TO FOCUS GREATER RESOURCES ON OTHER PROGRAMMATIC FUNCTIONS.

PART III, LINE 5:

THE ORGANIZATION RECEIVED DONATED PIECES THAT WERE LATER AUCTIONED AT THE ANNUAL DINNER.

PART V, LINE 4:

ENDOWMENT ASSETS INCLUDE THOSE ASSETS OF DONOR-RESTRICTED FUNDS THAT THE ORGANIZATION MUST HOLD IN PERPETUITY, AND AS DIRECTED BY THE DONORS, AND THOSE ASSETS THAT ARE BOARD DESIGNATED, AS APPROVED BY THE BOARD OF DIRECTORS OF THE ORGANIZATION. THE ENDOWMENT FUNDS ARE INVESTED IN CONSERVATIVE VEHICLES SUCH AS MONEY MARKET FUNDS AND MUTUAL FUNDS.

Part XIII Supplemental Information (continued)

PART X, LINE 2:

UNDER FASB ASC 740, "INCOME TAXES", AN ORGANIZATION MUST RECOGNIZE THE TAX BENEFIT ASSOCIATED WITH TAX POSITIONS TAKEN FOR TAX RETURN PURPOSES WHEN IT IS MORE LIKELY THAN NOT THE POSITION WILL BE SUSTAINED UPON EXAMINATION BY A TAXING AUTHORITY. THE EXPLORERS CLUB DOES NOT BELIEVE IT HAS TAKEN ANY MATERIAL UNCERTAIN TAX POSITIONS AND, ACCORDINGLY, IT HAS NOT RECORDED ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS. THE ORGANIZATION HAS FILED FOR AND RECEIVED INCOME TAX EXEMPTIONS IN THE JURISDICTIONS WHERE IT IS REQUIRED TO DO SO. ADDITIONALLY, THE ORGANIZATION HAS FILED IRS FORM 990 INFORMATION RETURNS, AS REQUIRED, AND ALL OTHER APPLICABLE RETURNS IN JURISDICTIONS WHERE SO REQUIRED. FOR THE YEAR ENDED JUNE 30, 2013, THERE WAS NO INTEREST OR PENALTIES RECORDED OR INCLUDED IN THE STATEMENT OF ACTIVITIES. THE ORGANIZATION IS SUBJECT TO ROUTINE AUDIT BY A TAXING AUTHORITY. AS OF JUNE 30, 2013, THE ORGANIZATION WAS NOT SUBJECT TO ANY EXAMINATION BY A TAXING AUTHORITY. THE ORGANIZATION BELIEVES IT IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR THE YEARS PRIOR TO 2010.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service
Name of the organization

EXPLORERS CLUB

**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
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

**Open to Public
Inspection**

Employer identification number

13-1866795

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a ☐ Mail solicitations

b ☐ Internet and email solicitations

c ☐ Phone solicitations

d ☐ In-person solicitations

e ☐ Solicitation of non-government grants

f ☐ Solicitation of government grants

g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

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

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		(a) Event #1 EC ANNUAL DINN. (event type)	(b) Event #2 LT ANNUAL DINN (event type)	(c) Other events (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	879,493.	122,545.		1,002,038.
	2 Less: Contributions	679,293.	91,220.		770,513.
	3 Gross income (line 1 minus line 2).	200,200.	31,325.		231,525.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	149,204.	35,749.		184,953.
	7 Food and beverages	180,000.	36,712.		216,712.
	8 Entertainment	127,000.	15,000.		142,000.
	9 Other direct expenses	119,291.	17,342.		136,633.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				(680,298.)
	11 Net income summary. Combine line 3, column (d), and line 10				-448,773.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				()
	8 Net gaming income summary. Combine line 1, column d, and line 7				

- 9 Enter the state(s) in which the organization operates gaming activities _____
- a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No
- b If "No," explain: _____
- 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No
- b If "Yes," explain: _____

- 11 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
- | | | |
|-------------------------------|-----|---|
| a 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 records

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount 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 in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (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 information (see instructions).

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No 1545-0047

2012

Open to Public
Inspection

EXPLORERS CLUB

Employer identification number
13-1866795

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2012)

JSA

2E1288 1 000 40303U 702V 5/15/2014 9:15:52 AM V 12-7.12

PAGE 27

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 EXPLORATION FUND GRANT	40	72,850			
2 EDDIE BAUER YOUTH GRANT	3	51,066			
3 YOUTH ACTIVITY FUND GRANT	39	47,997			
4 ROLEX GRANT	1	25,000			
5					
6					
7					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PART I, LINE 2:

THE ORGANIZATION TRACKS THE AMOUNT OF EACH FUND IN ACCOUNTING, THEN A
DECISION IS MADE BY TREASURER, VP FOR RESEARCH AND EDUCATION AND
PRESIDENT ON HOW MUCH IS RELEASED IN EACH GIVEN YEAR. HOWEVER, THE AMOUNT
WOULD BE BASED ON THE BALANCE OF THE FUND, WHICH IS DETERMINED BY THE
TREASURER AND BOOKKEEPER.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2012

**Open to Public
Inspection**

Name of the organization

EXPLORERS CLUB

Employer identification number

13-1866795

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2012

Schedule J (Form 990) 2012

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(C)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
MARK KASSNER	(i)	11,750.	0	0	0	0	11,750.	0
1 TREASURER	(ii)	0	0	0	0	0	0	0
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Schedule J (Form 990) 2012

EXPLORERS CLUB

13-1866795

Schedule J (Form 990) 2012

Page 3

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2012

JSA

2E1505 1 000

40303U 702V 5/15/2014 9:15:52 AM V 12-7.12

PAGE 31

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

EXPLORERS CLUB

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2012

**Open to Public
Inspection**

Employer identification number

13-1866795

FORM 990, PART VI, SECTION A, LINE 6:

THE ORGANZIATION WAS INCORPORATED AS A MEMBERSHIP ORGANIZATION.

FORM 990, PART VI, SECTION A, LINE 7A:

EACH YEAR THE VOTING MEMBERS (MAJORITY OF CLUB IS MADE UP OF VOTING
MEMBERS) ELECT FIVE DIRECTORS, EACH OF WHICH SERVE A 3 YEAR TERM. BALLOTS
ARE MAILED AND THE RESULTS ARE ANNOUNCED AT OUR ANNUAL MEETING IN MARCH.
ANNOUNCED AT OUR ANNUAL MEETING IN MARCH.

FORM 990, PART VI, SECTION A, LINE 7B:

THERE ARE DECISIONS AND APPROVALS MADE AT THE BOARD LEVEL THAT ARE NOT
SUBJECT TO APPROVAL BY MEMBERS. HOWEVER, BYLAW AMENDMENTS ARE VOTED ON BY
MEMBERS.

FORM 990, PART VI, SECTION B, LINE 11B:

AN ELECTRONIC DRAFT COPY OF FORM 990 IS EMAILED TO THE EXECUTIVE
COMMITTEE BEFORE FILING WITH IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL BOARD MEMBERS UPON APPOINTMENT AND ANNUALLY THEREAFTER AND MEMBERS OF
MANAGEMENT OF THE ORGANIZATION ARE ASKED TO SIGN A CONFLICT OF INTEREST
DECLARATION ANNUALLY. THE CONFLICT OF INTEREST FORMS ARE SIGNED AND KEPT
ON FILE AND CAN BE ACCESSED BY THE EXECUTIVE DIRECTOR AND THE HEAD OF
BOOKEEPING. IF THE EXECUTIVE DIRECTOR OR HEAD OF BOOKEEPING FIND THAT A

Name of the organization

Employer identification number

EXPLORERS CLUB

13-1866795

MEMBER OR DIRECTOR OR OFFICER VIOLATES THE CONFLICT OF INTEREST OR CODE OF CONDUCT DECLARATIONS THEY SIGNED AND COMPLETED, THEY ARE DUTY BOUND TO BRING THE MATTER TO THE EXECUTIVE COMMITTEE. IT HAS ALSO BEEN RESOLVED BY THE ETHICS AND GOVERNANCE COMMITTEE THAT THE MEMBERS OF THE ORGANIZATION ADOPT A BY-LAW REQUIRING ANNUAL AFFIRMATION BY EACH DIRECTOR, OFFICER AND KEY STAFF MEMBER THAT HE OR SHE HAS READ AND WILL ABIDE BY THE REQUIREMENTS OF THE CODE OF CONDUCT FOR OFFICERS AND DIRECTORS OF THE ORGANIZATION.

FORM 990, PART VI, SECTION B, LINE 15A:

A SEARCH COMMITTEE CONSISTING OF BOARD AND CLUB MEMBERS CONDUCTED A SEARCH FOR A SUITABLE EXECUTIVE DIRECTOR. THEY USED COMPARABLE COMPENSATION PAID BY SIMILAR CLUBS TO ESTABLISH THE COMPENSATION AND DOCUMENTED THE DECISION OF THE BOARD.

FORM 990, PART VI, SECTION B, LINE 15B:

THE ORGANIZATION DOES NOT COMPENSATE ANY KEY EMPLOYEES.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

ATTACHMENT 1

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

MEMBERSHIP AND HOUSE - PROGRAMS FOR APPROXIMATELY 3,000 MEMBERS
AND OTHER INTERESTED GROUPS SUCH AS STUDENTS INTERESTED IN CLUB

Name of the organization
EXPLORERS CLUB

Employer identification number
13-1866795

ATTACHMENT 1 (CONT'D)

PROGRAMS FOR EDUCATIONS AND EXPLORATION.

PUBLICATIONS - PUBLICATION OF THE EXPLORERS JOURNAL ON A QUARTERLY BASIS FOR MEMBERS AND OTHERS ON A SUBSCRIPTION BASIS; PUBLICATION OF NEWSLETTERS AND OTHER PERTINENT INFORMATION.

LIBRARY - REFERENCE AND RESEARCH SERVICES FOR MEMBERS, SCHOOLS, STUDENTS, AND OTHER INTERESTED PARTIES. THE LIBRARY CONSISTS OF EXTENSIVE INFORMATION ON EXPLORATION AND OTHER SCIENTIFIC FIELDS.

PUBLIC SERVICE, EDUCATION, EXPEDITIONS, AND RESEARCH - GRANTS AND EXPEDITIONS TO APPROVED STUDENTS AND OTHERS FOR RESEARCH, EXPLORATION AND RELATED ACTIVITIES.

ATTACHMENT 2990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
WEST NEW YORK RESTORATION OF CT, INC. 1800 BOSTON ROAD BRONX, NY 10460	RESTORATION	113,298.

ATTACHMENT 3FORM 990, PART VIII - EXCLUDED CONTRIBUTIONS

<u>DESCRIPTION</u>	<u>AMOUNT</u>
EXPLORERS CLUB ANNUAL DINNER	679,293.
LOWELL THOMAS ANNUAL DINNER	91,220.

Name of the organization

Employer identification number

EXPLORERS CLUB

13-1866795

ATTACHMENT 3 (CONT'D)FORM 990, PART VIII - EXCLUDED CONTRIBUTIONSDESCRIPTIONAMOUNT

TOTAL

770,513.ATTACHMENT 4FORM 990, PART VIII - FUNDRAISING EVENTS

<u>DESCRIPTION</u>	<u>GROSS INCOME</u>	<u>DIRECT EXPENSES</u>	<u>NET INCOME</u>
EXPLORERS CLUB ANNUAL DINNER	200,200.	575,495.	-375,295.
LOWELL THOMAS ANNUAL DINNER	31,325.	104,803.	-73,478.
TOTALS	<u>231,525.</u>	<u>680,298.</u>	<u>-448,773.</u>

ATTACHMENT 5FORM 990, PART VIII - GROSS SALES AND COST OF GOODS SOLD

GROSS SALES LESS RETURNS AND ALLOWANCES	17,509.
INVENTORY AT BEGINNING OF YEAR	25,837.
PURCHASES	11,132.
SALARIES AND WAGES	
OTHER COSTS	
SUBTOTAL	<u>36,969.</u>
MINUS ENDING INVENTORY	21,448.
COST OF GOODS SOLD	<u>15,521.</u>

Form **4562****Depreciation and Amortization**
(Including Information on Listed Property)

OMB No. 1545-0172

2012

Department of the Treasury

Internal Revenue Service (99)

▶ See separate instructions.

▶ Attach to your tax return

Attachment
Sequence No. **179**

Name(s) shown on return

Identifying number

13-1866795**EXPLORERS CLUB**

Business or activity to which this form relates

GENERAL DEPRECIATION**Part I Election To Expense Certain Property Under Section 179***Note: If you have any listed property, complete Part V before you complete Part I.*

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2011 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2013. Add lines 9 and 10, less line 12	13	

*Note: Do not use Part II or Part III below for listed property. Instead, use Part V***Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	111,200.

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2012	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed in Service During 2012 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	

Section C - Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System

20a Class life				S/L	
b 12-year			12 yrs	S/L	
c 40-year			40 yrs	MM	S/L

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	111,200.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?		Yes	No	24b If "Yes," is the evidence written?		Yes	No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)							25	
26 Property used more than 50% in a qualified business use								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use								
		%			S/L -			
		%			S/L -			
		%			S/L -			
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29	

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6
30 Total business/investment miles driven during the year (do not include commuting miles)						
31 Total commuting miles driven during the year						
32 Total other personal (noncommuting) miles driven						
33 Total miles driven during the year. Add lines 30 through 32						
34 Was the vehicle available for personal use during off-duty hours?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
35 Was the vehicle used primarily by a more than 5% owner or related person?						
36 Is another vehicle available for personal use?						

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2012 tax year (see instructions)					
43 Amortization of costs that began before your 2012 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

GENERAL DEPRECIATION

DEPRECIATION

Listed Property

AMORTIZATION

1

*Assets Reliured

JSA
2X9024 1 000

- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box, ☒ **X**
- Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print	Name of exempt organization or other filer, see instructions		Enter filer's identifying number, see instructions	
	EXPLOREERS CLUB		Employer identification number (EIN) or	
	Number, street, and room or suite no. If a P.O. box, see instructions.		13-1866795	
	46 EAST 70TH STREET		Social security number (SSN)	
File by the due date for filing your return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.		NEW YORK, NY 10021	

Enter the Return code for the return that this application is for (file a separate application for each return) ☐ 0 ☒ 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ☒ MAGGIE RODRIGUEZ
Telephone No. ☒ 212 628-8383 FAX No. ☐ _____
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until 05/15, 20 14.
- 5 For calendar year _____, or other tax year beginning 07/01, 20 12, and ending 06/30, 20 13.
- 6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period
- 7 State in detail why you need the extension
INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN
IS NOT YET AVAILABLE BY THIRD PARTIES.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a \$
8b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$
8c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ☒ [Signature] Title ☒ CFO, MA AGA Date ☒ 2/14/14