

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

CHANGE OF ACCOUNTING PERIOD

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013

Open to Public

Α	For the 2	013 calend	ar year, or tax year beginni	ng 7/01	, 2013, a	and ending	12/3		, 2013	
В	Check if app	olicable.	С	.,				D Employer Iden	tification Number	
	Addres	s change	GETTYSBURG TRAVEI	COUNCIL, INC.				23-1488	3763	
	Name o	change	D/B/A DESTINATION	N GETTYSBURG				E Telephone nun		
	Initial r	-	571 W. MIDDLE STF	EET				(717) 3	334-6274	
	Termin		GETTYSBURG, PA 17	1325				<u>,,,,,</u>		
	H	ed return						G Gross receipts	\$ 1,267,	128
	\vdash	ea return ation pending	F Name and address of principal	officer. NORRIS FLO	THERE	THE	(a) Is this a	group return for sub		X _{No}
	☐ whbiics	ron henning	SAME AS C ABOVE	AND THE	CVIIA		• •		□ '**	No No
_	Tax-exem	nt etable	501(c)(3) X 501(c) (6) ◀ (insert no.)	4947(a)(1) or	527	If 'No,	subordinates include attach a list (see in	istructions)	٠٠
÷	Websit		W. GETTYSBURG. TRAV		וו (ו) אוידטדן		(a) Group	exemption number	>	
K					11.0	ear of formation			legal domicile PA	
_		organization.		Association Other	15,	ear of formation	1. 190	1 State of	legal domicile FA	
:F:d		Summar	ve the organization's mission	n or most significant ac	tivities: TII	IE CETTV	CDIIDC	TO A VIET C	OUNCEL INC	
		-	CIAL TOURISM PROM	_	==				OUNCIL INC	<u></u>
Activities & Governance			TRAVEL DESTINATIO						11 to W	
'nar		marrie.	TIVADE DESTINATIO	T' EVODOCTING W	· + 72777 777		7+7-7T			
Ver	2 Che	eck this bo	x If the organization	discontinued its operation	ions or dispos	sed of more	than 25	% of its net ass	sets	
ဗ			ting members of the govern						1	13
ං ජ ග			lependent voting members					4		13
ij			of individuals employed in o			<u></u>				56
Ή			of volunteers (estimate if no	• •		RECE	11/5-			45
Ă			d business revenue from P				r A' C'	· · · · · · · · · · · · · · · · · · ·		0.
	b Net	unrelated	business taxable income fr	om Form 990-T, line 34				76 اي 🕂		<u>0.</u>
		باد بطرسان	and aroute (Dest) (III to 1	h)	302	APR 22	2014	rior Year	Current Ye	
ē			and grants (Part VIII, line 1		· •••• •• •	· · · · · · · · · · · · · · · · · · ·		,352,714.	1,054,	
Ę	9 Pro	ogram serv	ice revenue (Part VIII, line :	29)	1	200=		<u> </u>		053.
Revenue	10 Inv 11 Oth	esiment in	come (Part VIII, column (A)), iiies 3, 4, and 70)		JOUP!	∥, U 7	- 24,512.	10,	<u>,878.</u>
_			e (Part VIII, column (A), line — add lines 8 through 11 (i			e 12)	7	,597,997.	1,183,	903
—			milar amounts paid (Part IX				 	38,305.		,700.
			to or for members (Part IX,					30,303.	 	, 100.
	l				566 70A	220	904			
es	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10). 566,794 Professional fundraising fees (Part IX, column (A), line 11e)								,904.
Expenses			- '	•	• • • • • • • • • • • • • • • • • • • •		AND TORRESON	BEING TELEMOTERS OF ANY WAR TO BE STORE THE		The Marian
Ä			ing expenses (Part IX, colu				建一种工作的			
-	I .		es (Part IX, column (A), line					917,549.		<u>,849.</u>
			es. Add lines 13-17 (must e				1	.,522,648.		<u>,453.</u>
_,	19 Re	venue less	expenses. Subtract line 18	from line 12				75,349.		<u>,450.</u>
A ST			-					ng of Current Year		
Assets Beland	20 Tot		Part X, line 16)		1 1 1 1		1	., 426, 772.	1,693	
Net /	21 101			• • • • • • • • • • • • • • • • • • • •			<u> </u>	174,816.	167	<u>,143.</u>
			fund balances Subtract lin	e 21 from line 20			<u> </u>	l,251,956.	1,526	<u>,395.</u>
Pà	itill遭	Signatu	e Block							
Unde	er penalties of	f perjury, I dec	are that I have examined this return, in	cluding accompanying schedules	and statements, a	and to the best of	my knowle	dge and belief, it is tr	rue, correct, and	
		I. ()	Control than the control to based on the		o	-40.		4/1:21		
c:		Signati	State Comment	<u> </u>			l	4/13-//	7	
Sig He	gΠ re						-			
. 10	16		HARD BEAMER print name and title.			 .	CHAI	LTAIVIA		
			reparer's name	Preparer's signature		Date ,		Check If	PTIN	-/ -
Ď-	الہ:	1			CPA	4/	,		P00970952	1
Pa	ıd eparer			BROSIUS & EMR		1.11.21.2		self-employed	1200310332	
Us	eparer e Only	Firm's nam	20220 110100-		TCV LC			Eirm's FIN ► 2	3-2175024	
-3	- Unity	Firm's addr							3-21/3024 17) 238-044	16
Ma	the IDC	discress #F		PA 17110	ructions)			Phone no (7.	. X Yes	No No
			s return with the preparer seduction Act Notice, see th			,	0112		Form 99	
~~	m rui ra	pei WUIR R	evuction ACL NOTICE, See in	e separate ilistructions	•	166	\0113L 1	1/00/13	1 01111 33	- (1)

	m 990 (2013) GETTYSBURG TRAVEL COUNCIL,		23-1	<u> 488763</u>	Page 2
Par	Statement of Program Service Accompl				
	Check if Schedule O contains a response or note to	any line in this Part III	<u> </u>		
1	Briefly describe the organization's mission:				
	THE GETTYSBURG TRAVEL COUNCIL INC.,	THE OFFICIAL TOURISM	PROMOTION AGE	NCY MARKETS	
	GETTYSBURG - ADAMS COUNTY AS A PREMI				
	ECONOMIC IMPACT.		W. T. WODDOC THO W		
	ECONOMIC IMPACI.				
2	2 Did the organization undertake any significant program ser				
	Form 990 or 990-EZ?		**** **** * * * * * * * * * * * * * * *	· Yes X	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 X	No
	If 'Yes,' describe these changes on Schedule O.				
4	Describe the organization's program service accomplishme	ents for each of its three largest i	nrooram services, as mi	easured by expen-	Ses
·	Section 501(c)(3) and 501(c)(4) organizations and section	4947(a)(1) trusts are required to	report the amount of gra	ants and allocation	ns to
	others, the total expenses, and revenue, if any, for each p	rogram service reported			
4 a	a (Code) (Expenses \$	ncluding grants of \$) (Revenue	\$)
	PROMOTION OF GETTYSBURG, ADAMS COUNT				
	I WOUND THE GETTION OF ADMIN COOM	TO THE PROPERTY OF P			-
			 		
	_				
4 1	b (Code:) (Expenses \$	ncluding grants of \$) (Revenue	\$)
-				·	
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
			1		
				· · · · ·	
40	c (Code: ) (Expenses \$ 1	ncluding grants of \$	) (Revenue	\$	)
•				· <del></del>	
					. – – –
4	d Other program services. (Describe in Schedule O )				
-7 (		of \$	(Revenue \$	``	
	(Expenses \$ including grants	of \$)	Q TO VOTIGO Y		

GETTYSBURG TRAVEL COUNCIL, INC. 23-1488763 Page 3 Partil & Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete 1 Х X Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . . 2 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 Х 4 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 Х 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, 6 X 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' Х 8 Х 9 X 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, 11 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 Х 11 a Х 11 b Х 11 c 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 X X e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X 11 e 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 Х 11 f X 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and X If the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional . . . . . . 12 b Х 13 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E... X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a **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......... Х 14b Х 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV Х 16

X 19 X 20 20 b

Form 990 (2013)

17

18

Х

Х

b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

Form 990 (2013)

BAA

Part IV: Checklist of Required Schedules (continued) Yes No 21 - Did the-organization report more than \$5,000 of grants or other assistance to any domestic organizations or _ 21 X government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II . . Х 22 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 X 23 Х 24a 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 **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* 25b Schedule L. Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II Х 26 Х 27 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): X 28a a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV ..... 28b X Х 28c X Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M... 29 29 Х 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Х 32 Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, Х and V, line 1 34 X 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?. 35a 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 36 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...... Х 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 Х Note. All Form 990 filers are required to complete Schedule O 38

TEEA0104L 11/11/13

Part V Statements Regarding Other IRS Filings and Tax Compliance			
Check if Schedule O contains a response or note to any line in this Part V			
		Yes	No
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 10	<b>建</b> 達	<b>100</b>	飞 翘
<b>b</b> Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . 1 b 0			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		X X	
(gambling) winnings to prize winners?	<b>李</b> 莲	A	
ments, filed for the calendar year ending with or within the year covered by this return [2a] 56	2 b	X	1.00
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	Z 0 € Z 51 S	SCORAL	<b>产型地域</b>
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	3.2	元章	X
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule 0</i>	3 b		
4 a 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)?.	4 a		Х
b If 'Yes,' enter the name of the foreign country. ▶	學遊		<b>建</b>
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	1982		
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a 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?	6 a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		!
	登録書	A. Ser	1
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?	7 a		
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		
d If 'Yes,' indicate the number of Forms 8282 filed during the year		经验	经验
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e	-,,,,,,,,	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
as required?	7 g		ļ
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		
	1855.	70000	(Asia)
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?	8	FEE	
	TOTAL DE	rátsaái	子生物域
9 Sponsoring organizations maintaining donor advised funds.		F. 512	1
a Did the organization make any taxable distributions under section 4966?	9 a	├	<del>                                     </del>
b Did the organization make a distribution to a donor, donor advisor, or related person?	3 D	13516	2020
10 Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12		響	
			1
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>一瓣</b> 。		
11 Section 501(c)(12) organizations. Enter:	1 1 - of	题	1
a Gross income from members or shareholders	1875	1 2 and 1	1,7
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in fieu of Form 1041?.	12 a	1	<u> </u>
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b		ا المحادث المادة ال	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		P. of	-
a Is the organization licensed to issue qualified health plans in more than one state?	13 a	<b></b>	<u> </u>
Note. See the instructions for additional information the organization must report on Schedule O	27		\ ·
b Enter the amount of reserves the organization is required to maintain by the states in	23.	1 **	
which the organization is licensed to issue qualified health plans	-11	5	
c Enter the amount of reserves on hand	14-		<del> </del> х
14 a Did the organization receive any payments for indoor tanning services during the tax year?	14 a	<del></del>	+^
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	140	<u>′1                                    </u>	

_	The condition of the transfer			
Par	Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or characteristics.	, and nges	for ın	=
	Check if Schedule O contains a response or note to any line in this Part VI		_	X
Sec	tion A. Governing Body and Management			
		$-\top$	Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 13			
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? SEE SCHEDULE O	2	X	-300
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		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? SEE SCH 0	4	х	
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	Х	X
7 a	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?SEE .SCHEDULE 0	7 a	Х	
t	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.			
	The governing body?	8 a	X	
t	Each committee with authority to act on behalf of the governing body?	8 b	Х	
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		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	enue		
			Yes	No
	a Did the organization have local chapters, branches, or affiliates?	10 a		X
	of 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?	10 b	v	
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11 a	X	75-5-69 15-5-6-93
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O  a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	in the state of	
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b		
(	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done SEE SCHEDULE. O	12 c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	a The organization's CEO, Executive Director, or top management officialSEE SCHEDULE Q	15 a	X	· ·
ì	b Other officers of key employees of the organization	15 b		X
16.	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a	WARDS	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 taken steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		
	ction C. Disclosure			
17	1011			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) avainspection. Indicate how you make these available. Check all that apply.  Own website  Another's website  X Upon request  Other (explain in Schedule O)	ıılable	for pu	iblic
19	Describe in Schedule 0 whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements avail	able to		
20	the public during the tax year SEE SCHEDULE O  State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	nızatı	าก	
	► PATRICIA KAAS 571 WEST MIDDLE STREET GETTYSBURG PA 17325 (717) 334~6274	CI (I)	** 1	

Form 990 (2013) GETTYSBURG TRAV	EL COU	NCIL	, ]	INC					23-1488	763 Page <b>7</b>
Part VII Compensation of Officers, Independent Contractors	Directo					ey En	nplo	oyees, Highest Co	ompensated Emple	oyees, and
Check if Schedule O contains a										<u></u>
Section A. Officers, Directors, Tru	stees, k	(ey E	mp	loy	ee	s, an	d H	ighest Compens	sated Employees	
<ul> <li>1 a Complete this table for all persons required organization's tax year.</li> <li>List all of the organization's current of compensation. Enter -0- in columns (D), (E),</li> </ul>	ficers, dire	ectors,	trus	tees	s (w	hethe	r ınd	ividuals or organizati	-	
<ul> <li>List all of the organization's current ke</li> <li>List the organization's five current high</li> <li>who received reportable compensation (Box organization and any related organizations)</li> </ul>	nest comp	ensate	ed er	mplo	уе	es (oth	er tl	nan an officer, directo	or, trustee, or key emp	
<ul> <li>List all of the organization's former off of reportable compensation from the organiz</li> <li>List all of the organization's former direction</li> <li>organization, more than \$10,000 of reportab</li> </ul>	ation and ectors or	any re trustee	late s th	d or lat r	gan ece	iizatior ived, i	ns n the	e capacity as a forme	r director or trustee o	
List persons in the following order individua employees, and former such persons.	trustees	or dire	ctor	s; ın	stiti	utional	trus	stees; officers; key er	nployees; highest con	npensated
Check this box if neither the organization	nor any i	related	org	anız	atio	n com	преп	sated any current off	icer, director, or truste	ee
(A) Name and Title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)					h an i	(D)  Reportable compensation from	( <b>E</b> )  Reportable  compensation from	<b>(F)</b> Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	individual trustee or director	Institutional trustee	the organization		related organizations (W-2/1099-MISC)	compensation from the organization and related organizations			
(1) MIKE HANSON	2	$[ \  \  ]$								
DIRECTOR	0	X						0.	0.	0.

0

Х

Х

0.

0.

0.

(2) ANDREA PROULX

PAST CHAIRMAN

STATE OF CHOIL Y' OLLICCIO! PLICOCOLO! LIC	131003,	1107		<u>ıhı</u>	<u> </u>	.63,	air	d Highest Go.	nponsacea zin	To your (dominada)
(A) Name and title	Average hours per week	do x off individu	not ch unles	Pos heck ss pe	sition more erson direct	than the structure of t	one n an tee)	Reportable compensation from the organization (W-2/1099-MISC)	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(15)										
(16)										
(17)										
(18)					-					
(19)		-								
(20)										
(21)		_			<u> </u>					
(22)		<u> </u>								
(23)								-		
(24)			Н							
(25)		1-		_	-		_	<u> </u>		
1 b Sub-total	1	1_					<u> </u>	102,165.	0.	8,087.
c Total from continuation sheets to Part VII, Sectio							<b>&gt;</b>	0.	0.	0.
d Total (add lines 1b and 1c) .  2 Total number of individuals (including but not limit	ted to the	se lis	sted	abo	ove)	who	rec	102,165. eived more than S	0 . 100,000 of reporta	8,087. ble compensation
<ul> <li>from the organization ► 1</li> <li>3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for such the organization and related organizations greate such individual</li> <li>5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes</li> </ul>	reportabler than \$1	<i>al</i> . le cor 50,00	nper 00? <i>I</i>	nsal If 'Y	tion 'es'	and o	othe	er compensation f Schedule J for	rom	Yes No
Section B. Independent Contractors								-		
Complete this table for your five highest compensation from the organization Report com	pensation	epend of for t	he c	cor	nda	yea	r en	received more trading with or withing	n the organization's	tax year (C)
Name and business add	ress							Description		Compensation
				_		···				
	· -									·
Total number of independent contractors (including \$100,000 of compensation from the organization)		it limi	ted t	to th	nose	liste	d al	bove) who receive	ed more than	
BAA		TEEA	0108L	. 11	/11/1	3				Form <b>990</b> (2013

Far	t∗VI	Statement of Rev				, line in this Dart VII			П
100 M		Check if Schedule O	contains a	respo		(A)	(B)	(C)	····· <u>L</u>
						Total revenue	Related or	Unrelated	<b>(D)</b> Revenue
						ļ	exempt function	business revenue	excluded from tax under sections
			之。此				revenue	Teveriuc	512-514
S 5	1 a	Federated campaigns		1 a				性性學學學	<b>经产品的</b>
E R	b	Membership dues .	[	1 b					
S S		Fundraising events		1 c					
F 등		Related organizations		1 d					
S. S.	е	Government grants (contribution	ons)	1 e	1,054,872.				
문의	f	All other contributions, gifts, g similar amounts not included a	rants, and						
題				<u> 1f</u>	100.				
N S	_	Noncash contributions included		-					
<u>~</u>	n	Total. Add lines 1a-1f	• • • • • • • • • • • • • • • • • • • •	<del></del>	Business Code	1,054,972.	Carried Assessment	はできるのではは	是是有一个。 1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的10000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的1000年的10
副	2 a	MEMBERSHIP ASSI	e e e Me Ne	,	Busiless Code	99,740.	99,740.		
뎵		MISCELLANEOUS		날	<del></del>	18,313.	18,313.		
끯	c	HTOCEPPWREGOO	TINCOME			10,313.	10,313.	<u> </u>	
옯	d			╌┑╼╁					
S S	е					<del></del>			
용	f	All other program service	e revenue		· · · · · · · · · · · · · · · · · · ·				
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	g	Total. Add lines 2a-2f				118,053.	<b>设建设建设</b>	<b>经营业的</b>	<b>学者学科学科学</b>
	3	Investment income (incl	uding divid	dends	, interest and				
	_	other similar amounts) .				10,196.			10,196.
J	4	Income from investment		empt l	bond proceeds				
	5	Royalties ,	(i) Re	· ·	(ii) Personal	erskierindskiidhi.ama	TO SERVE THE SERVE HE	TREE SERVICE AND A SERVICE	\$14.7 A15930 FEBR
ŀ	6 2	Gross rents	(I) Ne	<u> </u>	(ii) Fersorial				
		Less: rental expenses							
		Rental income or (loss)			<del></del>				
		Net rental income or (lo	ss)		<del>                                     </del>			THE STATE OF THE PROPERTY OF THE PARTY OF TH	CONSIST SELECTION IN
i		Gross amount from sales of	(i) Secu		(ii) Other		<b>建造社会基本</b>	<b>阿里斯斯斯</b>	
	, u	assets other than inventory	84,	177	. 30.				
ľ	b	Less: cost or other basis							
1		and sales expenses .		449					
		Gain or (loss)		728					
						682.	682.	Remarks to the control of the contro	Mario Phono (200) - Phono Calabora
벌	8 a	Gross income from fund	Iraising ev	ents					
ENUE		(not including . \$ of contributions reported	on line 1	<u>6)</u>	1				
8									
OTHER REV	ь	Less: direct expenses							
5		Net income or (loss) fro		sing e	vents	All the state of the second second		Spiritual Control	LEWISSEME SALES
ļ		Gross income from gam		-	<u> </u>	THE TRANSPORT	<b>建筑和政策和</b> 力	"是我是一个他们的对外	<b>非常是是一个工程</b>
	<i>-</i>	See Part IV, line 19			a		<b>建工工程</b>		
		Less: direct expenses			b	م المراجعة			
	С	Net income or (loss) fro	m gamıng	activi	ties ▶				
	10 a	Gross sales of inventory and allowances	, less retu	urns		The state of the state of the			· 克斯斯· · · · · · · · · · · · · · · · · ·
ļ						3	1975年		(中華語) 注意
- 1		Less: cost of goods sold			P		المستخدة لقد قدست		
		Net income or (loss) fro Miscellaneous Reven		riivei	Business Code		B' , Y 1 - 153 65 '- 175	Comments	Control of the second
	11 a					المُناسِّة	The standard of the same	and her with the tile the same	
	b	,				<u> </u>	<del></del>	<del>                                     </del>	<del></del>
- 1	c						<del> </del>	1	1
	d	All other revenue							
		Total. Add lines 11a-11d		· · · · · ·			- C 1100	12- 51 - E.	r (15) - 23 / 1
لب		Total revenue. See instr	ructions		<u>,                                      </u>	1,183,903.	118,735.	0.	10,196.
BAA					TEE	A0109L 07/08/13			Form <b>990</b> (2013)

# PartiX Statement of Functional Expenses

Do n 6b, 7	ot include amounts reported on lines b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	11,700.			
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
-	Benefits paid to or for members			學的智慧的學	
5	Compensation of current officers, directors, trustees, and key employees	57,229.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	218,988.			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,162.			
9	Other employee benefits	24,663.			
10	Payroll taxes	23,862.			
11	Fees for services (non-employees):				
	Management				
	Legal	92.	<u></u>		
	: Accounting	6,288.			
	Lobbying		The state of the s	D. POTOS SANTON POR SA	
	Professional fundraising services. See Part IV, line 17.		THE STATE OF THE S	別の必然の対象の対象	<del></del>
	Investment management fees Other, (If line 11g amt exceeds 10% of line 25, column				
•	(A) amount, list line 11g expenses on Schedule O)	5,850.			<u> </u>
	Advertising and promotion	408,156.			
13	Office expenses	9,107.			
14	Information technology				
15 16	Royalties	3,709.			
17	Travel	7,684.	······································		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	7,004.			
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates .	10.015			
22	Depreciation, depletion, and amortization	18,815. 2,884.			
23 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)	2,004.			
	POSTAGE AND SHIPPING PREPOSITIONING	44,778. 29,635.			
(	150TH EXPENSE	11,009.			
(	REPAIRS AND MAINTENANCE	9,463.			
. (	All other expenses	12,379.		ļ <u>-</u>	
25	Total functional expenses. Add lines 1 through 24e	910,453.			
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 ► ☐ if following SOP 98-2 (ASC 958-720)				

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash – non-interest-bearing	35,680.	1_	4,431.
	2	Savings and temporary cash investments	54,007.	2	603,386.
-	3	Pledges and grants receivable, net		3	
- 1	4	Accounts receivable, net	477,740.	4	254,950.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L.		2 開業	
	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		6	
A S	7	Notes and loans receivable, net		7	
ASSETS	8	Inventories for sale or use		8	
T S	9	Prepaid expenses and deferred charges	27,747.	9	40,410.
	10 a	Land, buildings, and equipment cost or other basis.  Complete Part VI of Schedule D			
		Less: accumulated depreciation	581,892.	10 c	569,826.
	11	Investments – publicly traded securities	249,706.	11	220,535.
ı	12	Investments – other securities See Part IV, line 11	2157,001	12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	<u> </u>
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,426,772.	16	1,693,538.
ㅋ	17	Accounts payable and accrued expenses	164,096.	17	62,742.
	18	Grants payable		18	
	19	Deferred revenue	10,720.	19	104,401.
L.	20	Tax-exempt bond liabilities		20	
A	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
BILL	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		22	
إإ	23	Secured mortgages and notes payable to unrelated third parties		23	
S	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		25	
	26	Total liabilities. Add lines 17 through 25	174,816.	26	167,143.
ZET 4		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
S	27	Unrestricted net assets	1,251,956.	27	1,526,395.
SETS	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
R F.		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
מבכיו	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
٦ ۲	32	Retained earnings, endowment, accumulated income, or other funds		32	
<b>B女」女之い世の</b>	33	Total net assets or fund balances	1,251,956.	33	1,526,395.
Š	34	Total liabilities and net assets/fund balances	1,426,772.	34	1,693,538.
BA	Δ		<del> </del>		Form 990 (2013)

LOIL	1990 (2013) GETTYSBURG TRAVEL COUNCIL, INC.	23-1488	763 Faye 12
Par	tiXII Reconciliation of Net Assets		
	Check if Schedule O contains a response or note to any line in this Part XI		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,183,903.
2	Total expenses (must equal Part IX, column (A), line 25)	2	910,453.
3	Revenue less expenses. Subtract line 2 from line 1	3	273,450.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,251,956.
5	Net unrealized gains (losses) on investments , ,	5	989.
6	Donated services and use of facilities	6	
7	investment expenses	7	
8	Prior period adjustments	. 8	
9	Other changes in net assets or fund balances (explain in Schedule 0)	. 9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	10	1 506 205
in as		. 10	1,526,395.
Fai	Financial Statements and Reporting		F
	Check if Schedule O contains a response or note to any line in this Part XII	······································	
			Yes No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.		
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?	•	2a X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviseparate basis, consolidated basis, or both:	riewed on a	
	Separate basis Consolidated basis Both consolidated and separate basis		
t	Were the organization's financial statements audited by an independent accountant?		. 2b X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sebasis, consolidated basis, or both:	eparate	
	Separate basis   Consolidated basis   Both consolidated and separate basis		
C	: If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh review, or compilation of its financial statements and selection of an independent accountant?	t of the audit	2c X
	If the organization changed either its oversight process or selection process during the tax year, explain		
	ın Schedule O.		
3 a	ı As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single	За Х
ł	olf 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the	required au	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 Ы
BAA			Form <b>990</b> (2013)

#### **SCHEDULE C** (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations. Complete Parts I-A and B Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B Do not complete

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

	,	ganizations: Complete Part III.	OIII 330-L2, Fait V, II	ine soc (i toxy Tax), the	•					
Name	of organization			Employer identifica	tion number					
GET	TYSBURG TRAVEL COU	NCIL, INC.		23-1488763						
Par	t I-A? Complete if the org	ganization is exempt under section!	501(c) or is a secti	on 527 organization	1					
	•	organization's direct and indirect political ca								
					<b>&gt;</b>					
A-1-2	- TELEGIS TAZION	rganization is exempt under secti								
1	-	se tax incurred by the organization under s								
2	2 Enter the amount of any excise tax incurred by organization managers under section 4955 . ▶\$									
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for the	his year?		Yes No					
4 a	Was a correction made?				. Yes No					
	If 'Yes,' describe in Part IV.									
		rganization is exempt under secti								
1	Enter the amount directly exp	pended by the filing organization for section	527 exempt function	activities ►\$						
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities									
3	Total exempt function expendine 17b	ditures Add lines 1 and 2. Enter here and c	on Form 1120-POL,	,▶\$						
4	Did the filing organization file	Form 1120-POL for this year?			Yes X No					
5	- <del>-</del>	and employer identification number (EIN) on the control of the con			ch the filing Also enter the n, such as a separate					
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-					
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										

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

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013	3 GETTYSBURG '	TRAVEL COUNCIL,	INC.	23-148	8763 Page 2				
Part II A Complete if t section 501(	he organization i	s exempt under secti	on 501(c)(3) and file	d Form 5768 (election	on under				
A Check ► If the filin	ng organization belor	gs to an affiliated group (	and list in Part IV each a	affiliated group member	's⁻name, —				
		share of excess lobbying							
B Check ► I if the filin	ig organization checl	ked box A and 'limited cor	ntrol' provisions apply.						
(The term	Limits on Lobbyi 'expenditures' mea	ng Expenditures ns amounts paid or incurr	ed.)	(a) Filing organization's totals	(b) Affiliated group totals				
1 a Total lobbying expenditu	ires to influence pub	lic opinion (grass roots lot	obying)						
<b>b</b> Total lobbying expenditu	ures to influence a le	yıng)		·					
c Total lobbying expenditu	ures (add lines 1a an								
d Other exempt purpose e	expenditures								
e Total exempt purpose e	xpenditures (add line	es 1c and 1d)	, , , ,						
	f Lobbying nontaxable amount. Enter the amount from the following table in both columns								
If the amount on line 1e, colu	ımn (a) or (b) is:	amount is.	<b>对数据的</b>						
Not over \$500,000		20% of the amount on line 1e.							
Over \$500,000 but not over \$1,		\$100,000 plus 15% of the excess							
Over \$1,000,000 but not over \$	· · ·	over \$1,000,000.							
Over \$1,500,000 but not over \$		over \$1,500,000.							
Over \$17,000,000			<b>经验证明是</b>	<b>《作品》第一次第二次第二次</b>					
_	g Grassroots nontaxable amount (enter 25% of line 1f)								
h Subtract line 1g from lin									
i Subtract line 1f from line									
j If there is an amount ot section 4911 tax for this		er line 1h or line 1i, did th		1 4720 reporting	. Yes No				
(So	me organizations the	4-Year Averaging Period at made a section 501(h) e as below. See the instruct	election do not have to c	omplete all of the five 1 2f.)					
	Lobb	ying Expenditures During	4-Year Averaging Perio	d					
Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) Total				
2 a Lobbying non-taxable amount									
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))									
c Total lobbying expenditures									
d Grassroots nontaxable amount									
e Grassroots ceiling amount (150% of line 2d, column (e))									
f Grassroots lobbying expenditures					200 200 570 600				
BAA				Schedule C (Fo	rm 990 or 990-EZ) 2013				

	II·B深	Complete (election	e if the	organi	zation	is exemp		3) and h	as NOT file	d Form !	5768
_							 			(a)	

	<del></del>	(a	1)	(i	<del></del>	
	each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description e lobbying activity.	Yes	No	Amo	<u> </u>	<del></del>
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c	Media advertisements?			W-1-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?			<del></del>		
	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i	遊戲学				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-	Service Control	e a	
b	If 'Yes,' enter the amount of any tax incurred under section 4912					2 447.00 \$2.4
c	If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912		鏈			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			紅紫海	A WAY	温温
Par	划 A Complete if the organization is exempt under section 501(c)(4), section 50	(c)(5	), or			
	section 501(c)(6).					
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		• •	1		<u> X</u>
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?					X
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?					X
-Par	tillis Complete if the organization is exempt under section 501(c)(4), section 50' (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.'	l(c)(5 Part	i), or III-A	section 5 , line 3, is	01(c	)
<del>1</del>	Dues, assessments and similar amounts from members		1		99,7	740.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a	Current year		2 a			
b	Carryover from last year		2 b	_		
	: Total		2 c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic					_
	expenditure next year?	Lai	4	}		0.
5	Taxable amount of lobbying and political expenditures (see instructions)		5			0.
	tilV Supplemental Information			<u> </u>		
Prov	ide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group II-B, line 1 Also, complete this part for any additional information	list); f	Part II	-A, line 2; a	nd	
				- · - <del>-</del>		
				_		
						- <del></del> -

### SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

2013

Open to Public

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number Name of the organization GETTYSBURG TRAVEL COUNCIL, INC. 23-1488763 D/B/A DESTINATION GETTYSBURG Particol 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).... 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? Yes No 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 Yes No impermissible private benefit? Partill》 Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space 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 1 2 a **b** Total acreage restricted by conservation easements ........ 2 b 2 c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic 2 d structure listed in the National Register ......... 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 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 ▶\$ 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)?.... 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 Rart 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. 1 a 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 ▶\$ 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 . ..▶\$

Schedule D (Form 990) 2013 GETT	YSBURG TRA	AVEL COUNCIL,	INC.	23-148	
Part   Organizations Maintain	ning Collection	ons of Art, Histori	cal Treasures, or O		
3 Using the organization's acquisition (check all that apply)	on, accession,	and other records, ch	eck any of the following	g that are a significant us	e of its collection
a Public exhibition		<b>⊢</b>	or exchange programs	5	
<b>b</b> Scholarly research		e Othe	r	<del></del>	
c Preservation for future gener					
Provide a description of the orga     Part XIII		•		, , ,	· in
5 During the year, did the organiza to be sold to raise funds rather the	han to be maint	ained as part of the o	rganization's collection	ı? <u> </u>	Yes No
Part V Escrow and Custodia	al Arrangem amount on	<b>ents.</b> Complete it Form 990, Part X	the organization and the time that the the the the the the the the the th	answered 'Yes' to Fo	orm 990, Part IV,
1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodian,	or other intermediary	for contributions or ot		Yes No
<b>b</b> If 'Yes,' explain the arrangement					
an response		- complete the remain			Amount
c Beginning balance				1 c	
d Additions during the year				1d	· · · · · · · · · · · · · · · · · · ·
e Distributions during the year .				. 1e	<del></del>
				1f	·····
2a Did the organization include an a					Yes No
<b>b</b> If 'Yes,' explain the arrangement		•			
Part V. Endowment Funds. Co	mplete if the	e organization an	swered 'Yes' to For		
	(a) Current ye	ear (b) Prior ye	ar (c) Two years ba	ack (d) Three years back	(e) Four years back
1 a Beginning of year balance					
<b>b</b> Contributions					
c Net investment earnings, gains, and losses	İ				
d Grants or scholarships					
Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					
2 Provide the estimated percentag	e of the current	year end balance (lii	ne 1g, column (a)) held	as.	
a Board designated or quasi-endo	wment >	8			
b Permanent endowment ►	-8	···			
c Temporarily restricted endowmer	nt ►	%			
The percentages in lines 2a, 2b,		equal 100%.			
3 a Are there endowment funds not organization by			that are held and adm	ninistered for the	Yes No
(i) unrelated organizations					. (3a(i)
(i) related organizations					
<b>b</b> If 'Yes' to 3a(ii), are the related					3a(ii)
	•	•			. 3b
4 Describe in Part XIII the intende			ent tunus		
<b>Rartivic</b> Land, Buildings, and Complete if the organ			m 990, Part IV, line	e 11a. See Form 990	, Part X, line 10.
Description of property	Į.	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land			47,000	<b>这是建盟产生的</b>	47,000.
<b>b</b> Buildings		_	667,581		482,877.
c Leasehold improvements	[				
d Equipment			133,513	. 93,564.	39,949.
e Other	. †				
Total. Add lines 1a through 1e (Colum	nn (d) must eau	al Form 990, Part X,	column (B), line 10(c)	)	569,826.
ВАА					dule <b>D</b> (Form 990) 2013

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

⁽⁷⁾ (8) (9)(10)(11)Total. (Column (b) must equal Form 990, Part X, column (B) line 25)

	3-1488763	Page 4
PartXI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retu	rn.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1 1	,184,892.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII )		
e Add lines 2a through 2d	2 e	989.
3 Subtract line 2e from line 1		L <u>,183,903.</u>
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		
<b>b</b> Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		L,183,903.
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Re	turn.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	910,453.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII )	4.00	
e Add lines 2a through 2d	. 2e	
3 Subtract line 2e from line 1	. 3	910,453.
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		
b Other (Describe in Part XIII.)	4 c	
c Add lines 4a and 4b	. 5	910,453.
Part XIII Supplemental Information.	. 1	210,433.
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa 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	y additional infoi	rmation.
PART X - FIN 48 FOOTNOTE		
GENERALLY ACCEPTED ACCOUNTING PRINCIPLES REQUIRE ACCOUNTING AND REC	OGNITION_F	OR TAX
POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN THE BUREAU'S INCOME TAX	<u>RETURNS.</u>	THE
BUREAU'S INCOME TAX FILINGS ARE SUBJECT TO AUDIT BY VARIOUS TAXING	<u>AUTHORITI</u>	ES. THE
BUREAU'S OPEN AUDIT PERIODS ARE 2011-2013. IN EVALUATING THE BUREA	U'S_TAX	
PROVISIONS AND ACCRUALS, FUTURE TAXABLE INCOME, THE REVERSAL OF TEM	PORARY	
DIFFERENCES, THE ENTITY'S TAX EXEMPT STATUS AND TAX PLANNING STRATE	GIES ARE	
CONSIDERED. THE BUREAU BELIEVES THEIR ESTIMATES ARE APPROPRIATE BA		RRENT

Schedule D (Form 990) 2013 GETTYSBURG TRAVEL COUNCIL, INC.  Rart XIII Supplemental Information (continued)	23-1488763	Page 5
PART X - FIN 48 FOOTNOTE (CONTINUED)		
FACTS AND CIRCUMSTANCES.		
		<b>-</b>
	·	
		<del>-</del> -

# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

Attach to Form 990.

OMB No 1545-0047

٠١.

Employer identification number ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

X X 23-1488763 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? Rantim General Information on Grants and Assistance INC GETTYSBURG TRAVEL COUNCIL,

**≗** □

SEE PART IV

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Form 990, Part IV, line 21 for any recipient triat	tor any recipient		Tore man 40,000.	received more tital \$2,000. Fait it can be duplicated it additional space is needed.	מובח זו מחתוחסוים	ו אלמכם וא וופכתם	j
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) MAIN STREET GETTYSBURG, INCGETTYSBURG, PA 17325	23-2595192 501 (C) (3)	501 (C) (3)	10,000.	0.	9 9		DONATION
(6)							
(4)							
(5)							
(9)							
(O)							
(8)						1	
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Finer total number of other organizations listed in the line 1 table	3) and government orgons listed in the line	ganizations listed in table.	the line 1 table				1 0
	, see the Instructions	for Form 990.		TEEA3901L 07/12/13	07/12/13	Schedul	Schedule I (Form 990) (2013)

1

Page 2 Schedule I (Form 990) (2013) (f) Description of non-cash assistance Ration Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Schedule I (Form 990) (2013) GETTYSBURG TRAVEL COUNCIL, INC.

Rational Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. 23-1488763 (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S. _ THERE ARE NO RESTRICTIONS ON THE USE FOR THE DONATED MONIES. (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance 2 က ស ဖ

BAA

#### SCHEDULE L (Form 990 or 990-EZ)

## **Transactions With Interested Persons**

OMB No 1545-0047 2013

Department of the Treasury Internal Revenue Service

Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, 28c, or Form 990-EZ, Part V, line 38a or 40b.
 ► Attach to Form 990 or Form 990-EZ.
 ► See separate instructions.
 ► Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public elinspection

Name of the organization GETTYSBURG TRAVEL COUNCIL, INC. D/B/A DESTINATION GETTYSBURG

Employer identification number 23-1488763

Partil Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified	(c) Description of transaction	(d) Corr	rected?
		person and organization		Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2	Enter the amour	nt of tax	ıncurre	d by the	organizatio	on mana	agers o	or disqu	alified	person	is during the	year u	nder		
	section 4958			• • • • • •										<b>-</b> \$	
3	Enter the amous	nt of tax	if any	on line 2	ahove r	eimbiire	ed hv	the ora:	anızatı	on				▶ ც	

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Part訓練	Loans	to and/or	From	Interested	Persons.

Complete if the organization answered 'Yes' on Form 990-EZ, Page V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	l from	an to or n the ızatıon?	(e) Original principal amount	(f) Balance due	(g) In d	lefault?	(h) App by boo	proved ard or uttee?	(i) Wr agreer	itten nent?
	1		То	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)			1									
(7)			T									
(8)												
(9)					_							
(10)												
Total			· .		. ▶\$		<b>建</b>	<b>建设建</b>	4	逐業	1	13.0

#### Partill Grants or Assistance Benefiting Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of Assistance	(e) Purpose of assistance
(1)					
(2)					
(4)					
(5)					<u></u>
(6)					
(7) (8)					
(8)					
(9)					
(10)					

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

Schedule L (Form 990 or 990-EZ) 2013

Schedule L (Form 990 or 990-EZ) 2013 GET	TYSBURG TRAVEL COUL	NCIL, INC.	23-1488763	Page
Rart IV Business Transactions Inv	volving Interested Perso	ONS.		
Complete if the organization answered			(d) Description of transaction	(a) Sharing of
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(a) Description of transaction	(e) Sharing of organization's revenues?
	organization .			Yes No
(1) MAIN STREET GETTYSBURG	SHARED DIR.	10,000.	DONATION	X
(2)	JIII DI			<del>-  </del>
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Part V Supplemental Information				
Provide additional information for re	esponses to questions on Sch	edule L (see instruction	s)	
SUPPLEMENTAL INFORMATION	N			
DEBRORAH ADAMIK IS A BOAR	D MEMBER OF THE ORG	SANIZATION AND	IS ALSO THE EXECUTIV	<u>'E</u>
DIRECTOR OF MAIN STREET G	ETTYSBURG, INC. WHI	CH RECEIVED A	\$10,000 DONATION FRO	M_THE
ORGANIZATION. NORRIS FLOW	ERS, PRESIDENT, IS	ALSO ON THE BO	ARD OF MAIN STREET	
GETTYSBURG, INC.				
			<u> </u>	
<del></del>		<b></b>		

### **SCHEDULE O** (Form 990 or 990-EZ)

# 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.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number GETTYSBURG TRAVEL COUNCIL, INC. DESTINATION GETTYSBURG 23-1488763 FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC. THE CHAIRMAN, RICK BEAMER, IS EMPLOYED BY JACQUELINE WHITE, A BOARD MEMBER. THE PRESIDENT, NORRIS FLOWERS, IS A BOARD MEMBER OF AN ORGANIZATION OF WHICH DEBORAH ADAMIK, BOARD MEMBER, IS THE EXECUTIVE DIRECTOR. FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS THE ORGANIZATION CHANGED THE BY-LAWS TO REFLECT A CHANGE IN ACCOUNTING PERIODS FROM A JUNE 30 FISCAL YEAR END TO A DECEMBER 31 FISCAL YEAR END. FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDER ANY PERSON, FIRM, CORPORATION OR ASSOCIATION INTERESTED IN THE OBJECTIVES AND PURPOSES OF THE CORPORATION, SHALL BE ELIGIBLE FOR MEMBERSHIP UPON APPLICATION AND PAYMENT OF AN ANNUAL FINANCIAL OBLIGATION. THE ANNUAL FINANCIAL OBLIGATION OF EACH MEMBER SHALL BE AN INVESTMENT IN THE GETTYSBURG TRAVEL COUNCIL, INC. IN AN AMOUNT RECOMMENDED BY THE BUDGET & DUES COMMITTEE, APPROVED BY THE BOARD OF DIRECTORS AND A MAJORITY AT A GENERAL MEMBERSHIP MEETING. REPRESENTATION AND PARTICIPATION BY ANY FIRM, CORPORATION OR ASSOCIATION MAY BE BY ANY PERSON EMPLOYED OR SO DESIGNATED BY THAT FIRM, CORPORATION OR ASSOCIATION. THE GETTYSBURG TRAVEL COUNCIL INC. SHALL FORWARD WRITTEN NOTIFICATION OF ACCEPTANCE TO THE NEW MEMBERS NO MEMBER SHALL CAST MORE THAN ONE VOTE REGARDLESS OF THE AMOUNT OF THE INVESTMENT MADE. TO BE ELIGIBLE TO VOTE OR TO BE NOMINATED FOR ANY OFFICE, MEMBERS MUST BE CURRENT ON ALL CHARGES, FEES, BILLINGS, AND OTHER FINANCIAL OBLIGATION TO THE GETTYSBURG TRAVEL COUNCIL INC.

Name of the organization GETTYSBURG TRAVEL COUNCIL, INC. D/B/A DESTINATION GETTYSBURG	Employer identification number 23-1488763
FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT	GOVERNING BODY
THERE SHALL BE AN ANNUAL MEETING, HELD IN JUNE OF EACH YEA	AR, WHERE AN ELECTION OF
DIRECTORS AND OFFICERS WILL BE VALIDATED.	
A TOTAL OF UP TO THIRTEEN VOTING BOARD POSITIONS PLUS TWO	NON-VOTING BOARD POSITIONS
SHALL CONSTITUTE THE BOARD OF DIRECTORS ELECTIONS SHALL BE HELD ONLY FOR THOSE	
DIRECTORSHIPS, WHICH HAVE BECOME OR ARE ABOUT TO BE VACANT	· ·
OFFICERS WILL SERVE FOR A PERIOD OF ONE YEAR AND MUST BE F	AN ELIGIBLE VOTING MEMBER.
OFFICERS ELECTED SHALL BE: CHAIRMAN, VICE CHAIRMAN, SECRET	TARY AND TREASURER, EACH OF
WHOM SHALL ALSO SERVE AS A DIRECTOR OF THE CORPORATION.	
TO BE ELIGIBLE TO SERVE ON THE BOARD OF DIRECTORS, EACH IN	NDIVIDUAL, FIRM,
CORPORATION, ASSOCIATION OR BUSINESS ENTITY MUST BE IN GOO	DD STANDING.
TO BE ELIGIBLE TO VOTE OR TO BE NOMINATED FOR ANY OFFICE,	MEMBERS MUST BE CURRENT ON
ALL CHARGES, FEES, BILLINGS, AND OTHER FINANCIAL OBLIGATION	ONS TO THE GETTYSBURG
TRAVEL COUNCIL INC.	
FORM 990, PART VI, LINE 7B - DECISIONS OF GOVERNING BODY APPROVA	AL BY MEMBERS OR SHAREHOLDERS
AMENDMENTS TO THE BY-LAWS MUST BE APPROVED BY TWO-THIRDS	VOTE OF THE MEMBERSHIP.
ALSO, MANAGEMENT IS VESTED IN A BOARD OF DIRECTORS WHICH IS ELECTED BY THE	
MEMBERSHIP. (SEE PAGE 6, PART VI, LINE 7A)	
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
THE FORM 990 IS REVIEWED IN DETAIL BY THE EXECUTIVE COMMI	TTEE AND PRESENTED TO THE
BOARD THE BOARD OF DIRECTORS PRIOR TO SUBMISSION.	
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFO	DRCEMENT OF CONFLICTS
CONFLICT OF INTEREST FORMS ARE REVIEWED BY THE PRESIDENT	AND ANY DISCLOSED CONFLICTS
ARE DISCUSSED WITH THE EXECUTIVE COMMITTEE OR APPROPRIATE	OFFICERS OF THE GOVERNING
BODY.	

Schedule <b>0</b> (Form 990 or 990-EZ) 2013	Page 2
Name of the organization GETTYSBURG TRAVEL COUNCIL, INC. D/B/A DESTINATION GETTYSBURG	Employer identification number 23-1488763
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL F	PROCESS - CEO, TOP MANAGEMENT
THE PRESIDENT'S SALARY IS REVIEWED BY THE BOARD OF DIRECT	CTORS BY COMPARING THE
PRESIDENT'S COMPENSATION TO OTHER PRESIDENT'S SALARY IN	OTHER CONVENTION AND
VISITORS BUREAUS IN OTHER LOCALITIES AROUND THE COUNTRY	IN ADDITION, SPECIFIC
GOALS AND OBJECTIVES, ESTABLISHED BY THE BOARD OF DIRECT	ORS, ARE EVALUATED AND
SCORED.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUB	LICLY AVAILABLE
AVAILABLE UPON REQUEST.	

# Form 4562

# **Depreciation and Amortization** (Including Information on Listed Property)

OMB No 1545-0172 2013

Department of the Treasury Internal Revenue Service

► Attach to your tax return.

Attachment Sequence No 179

► See separate instructions. Name(s) shown on return GETTYSBURG TRAVEL COUNCIL, INC.
D/B/A DESTINATION GETTYSBURG
Business or activity to which this form relates identifying number 23-1488763 FORM 990/990-PF Part Selection To Expense Certain Property Under Section 179
Note: If you have any listed property, complete Part V before you complete Part I Maximum amount (see instructions) 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) ........ Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-..... 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions (a) Description of property (b) Cost (business use only) 6 Listed property Enter the amount from line 29 . . 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.... 10 10 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 . . . . . . . 11 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs) 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12. Note: Do not use Part II or Part III below for listed property Instead, use Part V. Partil Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions ) Special depreciation allowance for qualified property (other than listed property) placed in service during the 14 tax year (see instructions) ..... 15 Property subject to section 168(f)(1) election 18,815 16 Other depreciation (including ACRS) . Partillia MACRS Depreciation (Do not include listed property ) (See instructions ) Section A MACRS deductions for assets placed in service in tax years beginning before 2013 . . . . 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 2013 Tax Year Using the General Depreciation System (a) Classification of property (c) Basis for depreciation (g) Depreciation (b) Month and (business/investment use only — see instructions) Recovery period Convention deduction 19 a 3-year property. **b** 5-year property. c 7-year property d 10-year property e 15-year property f 20-year property 25 yrs S/L g 25-year property 27.5 yrs S/L MM h Residential rental 27.5 yrs MM S/L property ... 39 yrs MM S/L i Nonresidential real MM S/L property. Section C - Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20 a Class life b 12-year 12 yrs S/L **c** 40-year. . S/L 40 vrs MM Part IV Summary (See instructions.)

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 . . . . .

For assets shown above and placed in service during the current year, enter

Listed property. Enter amount from line 28....

18,815