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# PEACE 02/06/2014 9 15 AM

Department of the Treasury Internal Revenue Service

## Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

2013 Open to Public Inspection

Form **990** (2013)

OMB No 1545-0047

<u>A</u>	For the 2013 c	alendar year, or tax year beginning , and ending			
В	Check if applicable	C Name of organization		D Employer id	dentification number
	Address change	Peace Nick Corporation			
$\exists$	Name change	Doing Business As		36-46	548850
$\square$	Name change	Number and street (or P O boy if mail is not delivered to street address)	Room/suite	E Telephone n	
$\sqcup$	Initial return	P.O. Box 1882		313-5	215-5767
$\Box$	Terminated	City or town, state or province, country, and ZIP or foreign postal code	1	<del>  3±3 °</del>	113 3707
$\equiv$				1 .	202
	Amended return	Royal Oak MI 48068 F Name and address of principal officer	<del>-  </del>	G Gross receipts	293
	Application pending		H(a) Is this a d	group return for subord	inates? Yes X No
		Gregory S. Panzica	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,	= =
		325 Oakdale	H(b) Are all se	ubordinates included	? Yes No
		Royal Oak MI 48067	If "N	lo," attach a list (see	instructions)
1	Tax-exempt status	X 501(c)(3) 501(c) ( ) ◀ (insert no ) 4947(a)(1) or 527			
J	Website > W	ww.peacenick.org	H(c) Group e	xemption number	
к	Form of organization	X Corporation Trust Association Other ▶ L		0000	State of legal domicile MI
		ımmary			
	1	escribe the organization's mission or most significant activities			
	1 -	Schedule O			
9	See	schedule O			
an					
Ę					
Š	2 Check th	is box > if the organization discontinued its operations or disposed of more than	25% of its not a	esets	
& Governance	2 Number	<del></del>	20 /6 OF ItS HEL &	1 1 ~	1
	1	of voting members of the governing body (Part VI, line 1a)			
Ę	1	of independent voting members of the governing body (Part VI, line 1b)		4 0	
Activities	5 Total nur	mber of individuals employed in calendar year 2013 (Part V, line 2a)		5 0	
Act	6 Total nur	mber of volunteers (estimate if necessary)		6 0	)
	7a Total unr	related business revenue from Part VIII, column (C), line 12		7a	0
	<b>b</b> Net unre	lated business taxable income from Form 990-T, line 34		7b	0
			Prior Y		Current Year
ø	8 Contribut	tions and grants (Part VIII, line 1h)		26	293
Revenue	9 Program	service revenue (Part VIII, line 2g)			0
ě	10 Investme	ent income (Part VIII, column (A), lines 3, 4, and 7d)			
ř	11 Other rev	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10d, and 11e)			
	l .	renue – add lines 8 through 11 (musi edual Part VIII (column (A), line 12)		26	293
		nd similar amounts paid (Pair X, column (A), fines (3)			2 2 3
		1 0/1	-		
		paid to or for members (Part IX, column (A), line 10)			0
xpenses	15 Salaries,	other compensation employee நடிந்திறின் IX, column (A), lines 5–10)	-		0
Sue	16a Profession	onal fundraising fees art IX, column (A), line-11e)			
×	<b>b</b> Total fun	idraising expenses (Part IX, column (D) line (25)			
ш	17 Other ex	penses (Part IX, column (A) (I) les 11a-11d, 11f-24e)		2,496	1,009
	18 Total exp	penses Add lines 13–1 <del>7 (must</del> equal Part IX, column (A), line 25)		2,496	1,009
	19 Revenue	e less expenses Subtract line 18 from line 12		-2,470	-716
Net Assets or	ນ		Beginning of C	Surrent Year	End of Year
ets	20 Total ass	sets (Part X, line 16)		259	87
ASS	21 Total liat	pilities (Part X, line 26)		12,321	12,865
활	22 Net asse	ets or fund balances Subtract line 21 from line 20		12,062	-12,778
		gnature Block		,,,,,,	
	- ' '	perjury, I declare that I have examined time return, including accompanying schedules and state		hast of my leasue	adaa aad balaf itia
		complete. Declaration of preparer tother than officer) is based on all information of which prepare			eage and belier, it is
		1/1/	That any known		<del></del>
		// Mun / I		<u> </u>	<i>4114</i>
Si	gn 📗	Styriaudie of office		Date*	'
He	ere 📗 🖊	Gregory   S   Panzica	<u>ident</u>		
		Type or print name and title			
-	Print/Tyr	pe preparer's name Preparer's suprature	Date	Check	if PTIN
Pai	id g Te	d Boloven	<b>1</b> 02/1	06/14 self-emptoy	<b>-</b>
_	narer 5. 1e	Polomon Micro Charles A C	102/	<del></del>	38-3325260
	e Only	44315 Plymouth Oaks Boulevard		Firm's EIN	30-3323200
-	- T	Dl			224 452 000
_	Firm's ac			Phone no /	<u> 34-453-998!</u>
Ma	y the IRS discu	ss this return with the preparer shown above? (see instructions)			Yes No

	Peace Nick Corpo		4648850	Page 2
	Statement of Program Serv Check if Schedule O contains	rice Accomplishments s a response or note to any line in this	Part III	X
1 Briefly desc	nbe the organization's mission	sa response of field to any fine in this	, r arem	
See Sch	edule O			
2 Did the orga	anization undertake any significant	program services during the year which were	not listed on the	
prior Form 9	990 or 990-EZ?			Yes X No
	scribe these new services on Sche	dule O re significant changes in how it conducts, any	nrogram	
services?	ania ania ania ania ania ania ania ania	to organizative oranges arriver it contactes, any	program	Yes X No
	scribe these changes on Schedule	O ccomplishments for each of its three largest p	rearram converse on management by	
		panizations are required to report the amount of		
the total exp	penses, and revenue, if any, for ea	ch program service reported		
4a (Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4b (Code.	) (Expenses \$	including grants of \$	) (Revenue \$	
4c (Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	ram services (Describe in Schedu		<del></del> -	
(Expenses	\$ inc am service expenses ▶	luding grants of \$	) (Revenue \$	
DAA	ani service expenses			Form <b>990</b> (2013

		i	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	_	х	
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	-	$\neg \neg$	
	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,"		- 1	
	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		l	
	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	1	1	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI			v
h	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	11a		X
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	446		x
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	11b		
Ŭ	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	116		- 11
-	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
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 other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
4-	assistance to or for foreign individuals? 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			v
40	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	40		v
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
13	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	40		х
202	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	<u>19</u> 20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	-00		

# Form 990 (2013) Peace Nick Corporation 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 organization or			
	government 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 or other assistance to individuals in the United States		1	
	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
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			3.7
L	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
	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	24-		
А	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	24d		
LJa	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25-		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	25a		
J	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		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	230		
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, 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			ŀ
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		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
С	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			ì
	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,	i		
	Part I	31	ļ	Х
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	Ì		١
	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, Parts II, III,	١		٠,,
	or IV, and Part V, line 1	34		X
35a	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	0.51	İ	
26	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	<del>                                     </del>	<del> </del>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	20		v
27	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		1	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	27		v
20	Part VI	37	<del> </del>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38		x
	10. Mote. All I will say lifets are required to complete softedure of		m 99	

Pa	rt 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	4		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  1b	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
ο-	reportable gaming (gambling) winnings to prize winners?	1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
<b>L</b>	Statements, filed for the calendar year ending with or within the year covered by this return  [2a]	┥		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
3a	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  Did the organization have unrelated business gross income of \$1,000 or more during the year?	,_		v
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b		Х
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		х
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?	5a		х
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as chantable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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?	7a	ļ	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	ļ	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1		
	required to file Form 8282?	7c	ļ	ļ
ď	If "Yes," indicate the number of Forms 8282 filed during the year	┦_	1	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<u> </u>	
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	-	
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7h	-	
٠	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	1	
9	Sponsoring organizations maintaining donor advised funds.	"	<del> </del>	
а	Did the organization make any taxable distributions under section 4966?	9a		ļ
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	
10	Section 501(c)(7) organizations. Enter			
а	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	7		
а	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?	12a	<u> </u>	
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.			L
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	<b> </b>
	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	_		
С	Enter the amount of reserves on hand			_
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<b>_</b>	X.
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Royal Oak

20

financial statements available to the public during the tax year

organization > Gregory S. Panzica

State the name, physical address, and telephone number of the person who possesses the books and records of the

325 Oakdale Street

MI 48067

orm 990 (2013)	Peace	Nick	Corporation
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3	6	_	4	6	4	Ω	Ω	5	a	

Page 7

. 0111-000 (00.	<u> </u>						<u> </u>
Part VII	Compensation of Officers, Directors,	Trustees, Key	<b>Employees</b>	, Highest C	Compensated	Employees,	and
•	Independent Contractors						

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any See 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

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

(A) Name and Title	(B) Average hours per week (list any hours for	(C) Position (do not check more than one box, unless person is both an officer and a director/furstee)					n :)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the		
	related organizations below dotted line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2)1099-MISC)		organization and related organizations		
(1) Gregory S. Panz:												
Total District	0.00	<b>.</b>										
Executive Director (2) Xavier Moore	0.00	X	├─		_	╁		0	0	0		
(2) RAVIEL MOOLE	0.00					1 1						
Director	0.00	x						0	l	0		
(3) Marty Heghering		1	T		_	1-1						
,, _	0.00											
Director	0.00	X						0	0	0		
(4)												
(5)												
(6)												
(7)					-							
(8)												
(9)			-							<u> </u>		
(10)			-									
(11)			<u> </u>	-								
DAA		$\perp$								000		

Par	VII Section A. Officers	, Directors, Tru	stee	s, K	еу Е	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)				age <b>o</b>
•	(A) Name and title	(B) Average hours per week (list any	bo:	x, unle	Pos heck ess pe	more rson ı	than o	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	cor	(F) Estimat Imount other other	of ation	
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	or aı	from th ganiza nd rela ganiza	ition ited	
(12)														
(13)														
(14)	-													
(15)														
(16)														
(17)														
(18)														
(19)														
1b c d	Sub-total Total from continuation she Total (add lines 1b and 1c)							<b>&gt; &gt;</b>		T100 000 i				
3	Total number of individuals (in reportable compensation from Did the organization list any for	the organization	<u> ▶</u>	0					<u> </u>		F		Yes	No
4	employee on line 1a? If "Yes," For any individual listed on lin organization and related organization	' complete Sche e 1a, is the sum	dule of re	J for	suc able	h ind	dıvidi npen	ual satio	on and other compensation	from the		3		X
5	individual Did any person listed on line for services rendered to the or	rganization? If "Y								r ındıvıdual		5		x
<u>Sect</u>	ion B. Independent Contractor Complete this table for your fit compensation from the organ	ve highest comp	ensa omp	ated ensa	ınde ition	pend for t	dent	cont	dar year ending with or with	nin the organization's tax ye	ear	-		
	Name and	(A) business address							Descrip	(B) otion of services		Co	(C) mpensat	tion
											$\dashv$			
<b>2</b>	Total number of independent received more than \$100,000								ose listed above) who	0		For	m 990	<b>0</b> (2013)

Form 990 (2013) Peace Nick Corporation 36-4648850 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (A) (D) Revenue Total revenue exempt function business excluded from tax under sections revenue revenue 512-514 Program Service Revenue | Contributions, Gifts, Grants and Other Similar Amounts 1a Federated campaigns 1a 293 **b** Membership dues 1b 1c c Fundraising events 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f 293 h Total. Add lines 1a-1f **Busn Code** b d f All other program service revenue g Total. Add lines 2a-2f ▶ Investment income (including dividends, interest, and other similar amounts) income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6a Gross rents **b** Less rental exps c Rental inc or (loss) d Net rental income or (loss) ▶ Gross amount from (i) Secunties (II) Other sales of assets other than inventor **b** Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss)  $\triangleright$ 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 а **b** Less direct expenses c Net income or (loss) from fundraising events  $\triangleright$ 9a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities  $\blacktriangleright$ 10a Gross sales of inventory, less returns and allowances а b Less. cost of goods sold c Net income or (loss) from sales of inventory Þ Miscellaneous Revenue Busn Code 11a b d All other revenue Total. Add lines 11a-11d

0

0

0

293

Total revenue. See instructions

Sect	ion 501(c)(3) and 501(c)(4) organizations must c Check if Schedule O contains a resp			emplete column (A)	
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		· · · · · · · · · · · · · · · · · · ·		······································
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				······································
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
·	trustees, and key employees				
6	Compensation not included above, to disqualified				<u> </u>
·	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages		· · · · · · · · · · · · · · · · · · ·		
8	J		··		
٥	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)			-	
9	Other employee benefits				<del></del>
10	Payroll taxes				
11	Fees for services (non-employees)				
a	•				
b					
C	Accounting				
d	, 3				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	· · · · · · · · · · · · · · · · · · ·				
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	567	<b>-</b>		567
13	Office expenses	267		267	
14	Information technology	175		175	
15	Royalties				
16	Occupancy				<u> </u>
17	Travel				<u> </u>
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а					•
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,009	0	442	567
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)	_,			

art	X Balance Sheet				
	Check if Schedule O contains a response or no	te to any line in this Part X			
			(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing		259	1	87
2	Savings and temporary cash investments			2	
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net			4	
5	Loans and other receivables from current and former	officers, directors,			
	trustees, key employees, and highest compensated e	mployees.			
	Complete Part II of Schedule L			5	
6	Loans and other receivables from other disqualified pe				
	4958(f)(1)), persons described in section 4958(c)(3)(B	), and contributing employers and			
	sponsoring organizations of section 501(c)(9) voluntar				
	organizations (see instructions) Complete Part II of S	chedule L		6	
7	Notes and loans receivable, net			7	,
8	Inventories for sale or use			8	
9	Prepaid expenses and deferred charges			9	
10a	Land, buildings, and equipment cost or				
	other basis Complete Part VI of Schedule D	10a			
b	Less accumulated depreciation	10b		10c	
11	Investments—publicly traded securities		11		
12	Investments—other securities See Part IV, line 11			12	
13	Investments—program-related See Part IV, line 11			13	
14	Intangible assets			14	
15	Other assets. See Part IV, line 11			15	
16	Total assets. Add lines 1 through 15 (must equal line	34)	259	16	87
17	Accounts payable and accrued expenses			17	174
18	Grants payable			18	-
19	Deferred revenue			19	
20	Tax-exempt bond liabilities			20	
21	Escrow or custodial account liability Complete Part IV	/ of Schedule D		21	
22	Loans and other payables to current and former office	ers, directors,			
22	trustees, key employees, highest compensated employees	oyees, and			
	disqualified persons Complete Part II of Schedule L			22	
23	Secured mortgages and notes payable to unrelated the	nird parties		23	
24	Unsecured notes and loans payable to unrelated third	parties		24	
25	Other liabilities (including federal income tax, payable	s to related third			
	parties, and other liabilities not included on lines 17-2	4). Complete Part X			
	of Schedule D		12,321	25	12,691
26	Total liabilities. Add lines 17 through 25		12,321	26	12,865
	Organizations that follow SFAS 117 (ASC 958), ch	eck here ▶ X and			
	complete lines 27 through 29, and lines 33 and 34				
27	Unrestricted net assets		-12,062	27	-12,778
28	Temporarily restricted net assets			28	
29	Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117 (ASC 9	58), check here ▶ 🔃 and			
	complete lines 30 through 34.				
27 28 29 30 31 32	Capital stock or trust principal, or current funds			30	
31	Paid-in or capital surplus, or land, building, or equipm	ent fund		31	
32	Retained earnings, endowment, accumulated income	, or other funds		32	
33	Total net assets or fund balances		-12,062	33	-12,778
34	Total liabilities and net assets/fund balances		259	34	87

orn	1 990 (2013) Peace Nick Corporation 36-4648850			Par	ge <b>12</b>
Pa	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			293
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,	009
3	Revenue less expenses. Subtract line 2 from line 1	3			716
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	_	12,	062
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line		,		
	33, column (B))	10	_	12,	778
Pa	art XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	}	х
	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.				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2ь	ĺ	X
	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.				
	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 oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
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		
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		
	<del></del>		F	orm <b>99</b> (	0 (2013)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

**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.

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

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

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Part I

Peace Nick Corporation

Employer identification number 36-4648850

ıne	o <u>rga</u>	nization is not	a private foundation becaus	se it is (For lines 1 through 11, o	check only	one box.	.)						
1		A church, cor	nvention of churches, or ass	ociation of churches described	ın section	170(b)(1	)(A)(i).						
2		A school des	cribed in <b>section 170(b)(1)(</b>	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 res	search organization operate	d in conjunction with a hospital	described	ın sectio	n 170(b)	)(1)(A)(ii	i). Ente	r the ho	ospital's name,		
		city, and state:											
5		An organizati	on operated for the benefit	of a college or university owned	or operate	ed by a go	overnme	ntal unit	describ	oed 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	X												
	_		section 170(b)(1)(A)(vi). (C		u gove				900.0	. разпо			
8				170(b)(1)(A)(vi). (Complete Par	EII Y								
9	$\sqcap$			1) more than 33 1/3% of its sup		contributio	nns mei	mhershu	n fees :	and aro	ce		
	ш			npt functions—subject to certain									
		•		nd unrelated business taxable in			•						
			=	0, 1975. See section 509(a)(2)	•			,	usiness	.03			
10				exclusively to test for public saf			-						
11	H			exclusively for the benefit of, to					out the				
••	ш			ted organizations described in s							•		
				the type of supporting organizat						3000.011	•		
		a Type		c Type III-Function			<b>d</b> [	_		n-funct	ionally integrated		
е	П	_		··			[						
·	ш	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)											
			<del>-</del>	or than one or more publicly out	, por too or ;	,u.nu.o.				300(0)(	• •		
f		or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting											
•		-	check this box		a Type I,	Type II, I	or type	iii suppc	n unig				
_		•		ition accepted any gift or contrib	ution from	any of th							
g		following per		mon accepted any girt or continu	duon non	i arry or u	16						
				ontrols, either alone or together	with norse	ne docor	ibad in (	u) and			Ye	s No	
			w, the governing body of the	<del>-</del>	with perso	nis uesui	ibed iii (	ii) aiiu				* NO	
			member of a person descri	• •							11g(ı)	<del></del>	
				described in (i) or (ii) above?							11g(ii)		
h											[11g(iii)]		
<u>n</u>	i) Nom	ne of supported		the supported organization(s)	(ns) is the s	racouration	(d) Did :	rou notify	643.1	o the	(····) A (		
,		ganization	(ii) EIN	(III) Type of organization (described on lines 1–9	1	organization sted in your		nization in	organizat	s the ion in col	(vii) Amount of mo support	netary	
				above or IRC section	1 ''	document?		of your		zed in the			
				(see instructions))	Yes	No	Yes	No No	Yes	No No			
(A)					163	140	163		163	140		<del></del> -	
(~)									1		1		
(B)				-	<del>                                     </del>	ļ							
(6)							}						
(C)				<del> </del>	<del>                                     </del>								
(0)						<u> </u>							
(D)					1								
(E)													
			<u> </u>		<u> </u>	<u> </u>							
Tota	al												
			<u> </u>			T	<del> </del>	<del> </del>	•	T	L		

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.)

	tion A. Public Support								
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	370	296	525	26	293	1,510		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf								
3	The value of services or facilities furnished by a governmental unit to the organization without charge								
4	Total. Add lines 1 through 3	370	296	525	26	293	1,510		
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)								
6	Public support. Subtract line 5 from line 4						1,510		
	tion B. Total Support				<u>.</u>				
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
7	Amounts from line 4	370	296	525	26	293	1,510		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources								
9	Net income from unrelated business activities, whether or not the business is regularly carried on								
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)								
11	Total support. Add lines 7 through 10						1,510		
12	Gross receipts from related activities, etc					12			
13	First five years. If the Form 990 is for the	-	, second, third, for	urth, or fifth tax yea	er as a section 501	(c)(3)			
~	organization, check this box and stop her				<del>_</del>		<u> </u>		
	tion C. Computation of Public Su		<del>-</del>				<del>-</del>		
14	Public support percentage for 2013 (line 6	. ,,	•	n (f))		14	100.00%		
15	Public support percentage from 2012 Sch	*		40 11 44 6		15	100.00%		
16a	33 1/3% support test—2013. If the organ				33 1/3% or more, c	heck this	<b>⊾</b> ♥		
_	box and stop here. The organization qual	· · ·	• •		E - 00 4/00/		<b>▶</b> X		
b	33 1/3% support test—2012. If the organ			· ·	5 IS 33 1/3% OF MO	ore,			
172	check this box and stop here. The organi			=	a or 16h and line	14 10			
174		10%-facts-and-circumstances test—2013. 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								
b	organization  10%-facts-and-circumstances test—2012. 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	,			,	<del>,</del>	▶ □		
18	Private foundation. If the organization di	d not check a box of	on line 13, 16a, 16	b, 17a, or 17b. che	eck this box and se	e	- 1_		
	instructions			. ,			▶□		
	<u> </u>		<del> </del>				L-		

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.)

Sec	tion A. Public Support			olott, ploado d	ompioto i dit ii	/	
Caler	dar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(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				<u>;</u>		
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	· · · · · · · · · · · · · · · · · · ·					
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from				<b>‡</b>		
<u> </u>	line 6)			L	Ī		
	tion B. Total Support  ndar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(a) 2011	(4) 2012	(-) 2012	(f) Total
9	Amounts from line 6	(a) 2009	(6) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
10a	Gross income from interest, dividends,						
iva	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						
С	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 firs	t, second, third, fo	ourth, or fifth tax ye	ar as a section 50	1(c)(3)	
	organization, check this box and stop her						<b>•</b>
Sec	tion C. Computation of Public St						, · · · · · · · · · · · · · · · · · · ·
15	Public support percentage for 2013 (line 8	• •	•	nn (f))		15	%
16	Public support percentage from 2012 Sch						%
	tion D. Computation of Investme			2 polyma (f))		17	0/
17 18	Investment income percentage for 2013 (Investment income percentage from 2012)	· · · · · · · · · · · · · · · · · · ·	•	3, column (1))		18	<u>%</u> %
10 19a	33 1/3% support tests—2013. If the orga			e 14. and line 15 i	s more than 33 1/3		
	17 is not more than 33 1/3%, check this b						▶□
b	33 1/3% support tests—2012. If the orga		_				-
	line 18 is not more than 33 1/3%, check the						▶ □
20	Private foundation. If the organization di	d not check a box	on line 14, 19a, oi	19b, check this b	ox and see instruc	tions	▶ □

Schedule A (Form 990 or 990-EZ) 2013 Peace Nick Corporation

36-4648850

Page 4

Supplemental Information. 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).

## SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

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

OMB No 1545-0047

Open to Public Inspection

Name	of the organization		Employer id	dentification number
P	eace Nick Corporation		36-46	648850
	Organizations Maintaining Donor Advised F Complete if the organization answered "Yes" to		Accounts	s.
		(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 (dunng year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing the	hat the assets held in donor advised		
	funds are the organization's property, subject to the organization's ex	xclusive legal control?		Yes 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 do	onor advisor, or for any other purpose		
	conferring impermissible private benefit?			Yes No
Pa	Conservation Easements.	- Farm 000 Dart IV/ bins 7		
	Complete if the organization answered "Yes" to			
1	Purpose(s) of conservation easements held by the organization (che			
	Preservation of land for public use (e g , recreation or education)		•	
	Protection of natural habitat	Preservation of a certified historic	c structure	
_	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified con- easement on the last day of the tax year	servation contribution in the form of a conse		Hold at the End of the Tow Voc
•				Held at the End of the Tax Year
a			2a 2b	
b		naludad in (a)	26 2c	<del> </del>
c d		` '	<u> 2</u> C	· <del></del> -
u	historic structure listed in the National Register	17700, and not on a	2d	
3	Number of conservation easements modified, transferred, released,	extinguished or terminated by the organiza		the
•	tax year ▶	extinguished, or terminated by the organiza	don duning	, uie
4	Number of states where property subject to conservation easement	is located		
5	Does the organization have a written policy regarding the periodic m			
•	violations, and enforcement of the conservation easements it holds?			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enf		ear	
	<b>&gt;</b>	,		
7	Amount of expenses incurred in monitoring, inspecting, and enforcin	ng conservation easements during the year		
	<b>▶</b> \$			
8	Does each conservation easement reported on line 2(d) above satis	ify 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 ease	ements in its revenue and expense statemen	nt, and	
	balance sheet, and include, if applicable, the text of the footnote to t	the organization's financial statements that o	lescribes t	he
	organization's accounting for conservation easements			
P	organizations Maintaining Collections of A		Similar .	Assets.
_	Complete if the organization answered "Yes" to	<del></del>		
та	If the organization elected, as permitted under SFAS 116 (ASC 958)	··		
	works of art, historical treasures, or other similar assets held for pub			
L	public service, provide, in Part XIII, the text of the footnote to its fina			•
a	If the organization elected, as permitted under SFAS 116 (ASC 958)			
	works of art, historical treasures, or other similar assets held for pub		icianice of	
	public service, provide the following amounts relating to these items  (i) Poverior included in Form 990, Part VIII, line 1	•		¢
	(i) Revenues included in Form 990, Part VIII, line 1		_	\$ \$
•	(ii) Assets included in Form 990, Part X	or other similar assets for financial care as	ovida tha	Ψ
2	If the organization received or held works of art, historical treasures,	• •	OVIDE LITE	
-	following amounts required to be reported under SFAS 116 (ASC 95	oo) relating to these items		. <b>c</b>
a	Revenues included in Form 990, Part VIII, line 1  Assets included in Form 990, Part X			Ψ . <b>c</b>
ט	Maacia iliuluutu iii i Uliii 330. F dil A			w .

<u>Sche</u>	edule D (Form 990) 2013 Peace Nic	<u>ck Corporat</u>	ion	36-	4648850	Page <b>2</b>
Pa	urt III Organizations Maintaining	g Collections of	Art, Historical T	reasures, or Oth	ner Similar Assets	s (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other records	s, check any of the fo	llowing that are a sigi	nificant use of its	
а	Public exhibition	d 🗍 i	Loan or exchange pro	grams		
b	Scholarly research		Other	•		
С	Preservation for future generations					
4	Provide a description of the organization's co	ollections and explain	how they further the	organization's exemn	ot nurnose in Part	
	XIII.		The triangle for the	organization o oxomp	or purpose in r are	
5	During the year, did the organization solicit of	or receive donations o	of art, historical treasu	ires or other similar		
•	assets to be sold to raise funds rather than t					Yes No
Pa	art IV Escrow and Custodial Arr		art or the organization	1 S CONECTION P		Yes No
	Complete if the organization 990, Part X, line 21.	n answered "Yes"	to Form 990, Pa	rt IV, line 9, or re	ported an amount	on Form
1a	Is the organization an agent, trustee, custod	an or other intermed	ary 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 fol	llowing table			
	, ,		g			Amount
С	Beginning balance				1c	
	Additions during the year				1d	
٠	Distributions during the year					
					1e	
f 2-	Ending balance		040			
	Did the organization include an amount on F	,	= :			∐ Yes ∏ No
	If "Yes," explain the arrangement in Part XIII	Check here if the ex	cplanation has been p	rovided in Part XIII		
ra	ert V Endowment Funds.		. to Form 000 D-	-4 IV / June - 4.0		
	Complete if the organization	•	i'		<del></del>	
		(a) Current year	(b) Pnor year	(c) Two years back	(d) Three years back	(e) Four years back
	Beginning of year balance			ļ		
b	Contributions					
C	Net investment earnings, gains, and					
	losses					
d	Grants or scholarships					
e	Other expenditures for facilities and					
	programs					
f	Administrative expenses					
g	End of year balance					
2	Provide the estimated percentage of the cur	rent year end balance	e (line 1g. column (a))	held as	_ <del>'</del>	
а		%	o ( o . g, oo.a (a),	,		
	Permanent endowment ▶ %	~				
c	Temporanty restricted endowment ▶	%				
·	The percentages in lines 2a, 2b, and 2c sho					
32	Are there endowment funds not in the posse		ation that are held are	Ladministered for the		
Ja		ossion of the organiza	iuon mat are nem and	administered for (Ne	·	Vaa Na
	organization by					Yes No
	(i) unrelated organizations					3a(i)
	(ii) related organizations					3a(ii)
b	If "Yes" to 3a(II), are the related organization	•				3b
4	Describe in Part XIII the intended uses of the		wment funds			
Pa	art VI Land, Buildings, and Equ					
	Complete if the organization	<u>n answered "Yes'</u>	<u>' to Form 990, Pa</u>	<u>rt IV, line 11a. Se</u>	<u>ee Form 990, Part</u>	X, line 10.
	Description of property	(a) Cost or other b	''	,	c) Accumulated	(d) Book value
		(investment)	(oth	ner)	depreciation	
1a	Land					
b	Buildings			_		
c	Leasehold improvements					
	Equipment					
	Other					
	I. Add lines 1a through 1e (Column (d) must	equal Form 990, Par	t X, column (B), line 1	0(c).)	•	

Part VII	Investments—Other Securities.			1 age 0
•	Complete if the organization answered "Yes" to	Form 990, Part IV, line	11b. See Form 990, P.	art X, line 12
	(a) Description of security or category	(b) Book value	(c) Method of	valuation
	(including name of security)		Cost or end-of-year	ar market value
(1) Financial of	derivatives			
	ld equity interests			
(3) Other				
(A)				
(B)				
(C)			•	
(D)				
(E)				
(F)				
(G)			, <u>,</u>	
(H)				
Total. (Column	n (b) must equal Form 990, Part X, col (B) line 12 ) ▶			
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Yes" to	Form 990, Part IV, line	11c. See Form 990, Page 11c.	art X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of	
			Cost or end-of-yea	ar market value
<u>(1)</u>				
(2)			· · · · ·	
(3)			· <u>-</u>	
(4)		-		·
(5)				<del></del>
(6)		-		
(7)			<del></del>	
(8)				
(9)		-		
	n (b) must equal Form 990, Part X, col. (B) line 13)▶		- 15	
Part IX	Other Assets.			
	Complete if the organization answered "Yes" to	Form 990 Part IV line	11d See Form 990 P	art X line 15
	(a) Description	<u> </u>		(b) Book value
(1)		<u> </u>		(-,
(2)	·			
(3)	<del></del>			-
(4)				
(5)				
(6)				<u> </u>
(7)	<del></del>	<del></del>	<del> </del>	
(8)	· · · · · · · · · · · · · · · · · · ·			·
(9)	<del> </del>			
	n (b) must equal Form 990, Part X, col (B) line 15.)			
Part X	Other Liabilities.			
I WAY AY	Complete if the organization answered "Yes" to	Form 000 Part IV line	110 or 11f Soo Form	000 Port V
	line 25.	Tomin 990, Fait IV, iinic	THE OF THE SECTION	330, Fait A,
1.	(a) Description of liability	(b) Book value		······
		(b) Book value		
	ncome taxes Payable - Gregory Panzica	12 601		
	rayable - Glegoly Familica	12,691		
(3)				
(4)				
(5)				
(6)	<u> </u>	-		
_(7)				
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 25 ) ▶	12,691		
2. Liability for	uncertain tax positions. In Part XIII, provide the text of the foo	otnote to the organization's f	inancial statements that repo	orts the
organization's	liability for uncertain tax positions under FIN 48 (ASC 740) C	Check here if the text of the f	ootnote has been provided in	Part XIII

<u>4a</u> 4b

4c

5

Part XIII Supplemental Information

b Other (Describe in Part XIII )c Add lines 4a and 4b

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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Fart XIII Supplemental Information (continued)

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.

2013

Department of the Treasury Internal Revenue Service

► 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 Inspection

Name of the organization

Peace Nick Corporation

Employer identification number 36-4648850

Form 990 - Organization's Mission

Peace Nick is a nonprofit organization promoting world peace through education, poverty reduction, environmental protections and social justice. Our goal is to slow down and reverse the damaging effects of the previous decade of flawed and outdated domestic and foreign policies that the United States has employed. "Staying the course" is no longer an option as war and violence persist, the world economy crumbles, poverty increases, global warming and environmental degradation continues and social injustices rise. Peace Nick will focus on local, regional and worldwide issues that demand urgent action, solutions, and measurable results.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public