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Short Form Return of Organization Exempt From Income Tax

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

OMB No 1545-1150 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

										
Α				and ending						
B		applicable	C Name of organization					D Employer identification number		
Н	Address	•						45 0405004		
	Name ch	-	The Mid-Hudson Heritage C		ic.			45-2487236		
X	Initial ret		Number and street (or PO box, if mail is not delivered to street add. 317 Main Street	ress)		Room/su	ite	E Telephone n		
Ц	Terminat			85-8506						
	Amended		F Group Exe	mption						
		on pending		12601				Number		
G		nting Method.	Cash X Accrual Other (specify) ▶			1	H Check	k ▶ X If the	organization is not	
I		ite: ▶ <u>N/A</u>					requir	ed to attach So	chedule B	
			eck only one) — X 501(c)(3) 501(c)() ◀ (inser	t no) 4947(a)	(1) or	527	(Form	1 990, 990-EZ,	or 990-PF)	
		of organization	X Corporation Trust Associ		other					
			o, to line 9 to determine gross receipts. If gross receipts are		, or if total as	sets				
_			re \$500,000 or more, file Form 990 instead of Form 990-EZ					<u>▶ \$</u>	17,833	
P	art I		ue, Expenses, and Changes in Net Asse				instruct	tions for Part	l) 😴	
	<u> </u>		the organization used Schedule O to respond	to any question	n in this P	art I			X	
	1		jifts, grants, and similar amounts received					1		
	2	-	rice revenue including government fees and contract	s				2	17,833	
3	3		dues and assessments					3		
è	₹4	Investment i		1	ı			4		
e	5a		it from sale of assets other than inventory	L	5a			_		
P	D b									
-	C	, , , , , , , , , , , , , , , , , , , ,								
41 18	5 6	Gaming and fundraising events								
			e from gaming (attach Schedule G if greater than	1	4					
Revenue	i i	\$15,000)		Ĺ	6a			⊣ !		
e e	b		e from fundialsing events (not including \$		of contribut	ions				
8	F		ing events reported online 1) (attach Schedule G if t	he	1					
(5		foss income and contributions exceeds \$15,000)		6b			⊣		
(77 C		expenses from garning and fundraising events	L	6c			-		
	d	Net income line 6c)	r (loss) from gaming and fund alsing events (add line	es 6a and 6b and	subtract			6d		
	7a		of inventory less returns and allowances	1	7a			00		
	b	Less cost o		<u> </u>	7b			╡		
	c		or (loss) from sales of inventory (Subtract line 7b from	Lune 7a\	, , , , , , , , , , , , , , , , , , ,		·	7c		
	8		e (describe in Schedule O)					8		
	9		e. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8				•	9	17,833	
	10		milar amounts paid (list in Schedule O)					10		
	11		to or for members					11		
r.	12		er compensation, and employee benefits					12	30,582	
Expenses	13		fees and other payments to independent contractors					13	1,968	
per	14		ent, utilities, and maintenance					14		
Ä	15		ications, postage, and shipping					15	/	
	16		es (describe in Schedule O)					16	15,699	
	17		ses. Add lines 10 through 16				•	17	48,249	
	18		eficit) for the year (Subtract line 17 from line 9)					18	-30,416	
ets	19	•	fund balances at beginning of year (from line 27, co	lumn (A)) (must :	agree with					
SS			gure reported on pnor year's return)	(.// (19	3,043	
Net Assets	20	•	es in net assets or fund balances (explain in Schedule	e O)				20	2,219	
Z	21		fund balances at end of year Combine lines 18 thro	,			•	21	-27,373	
For			on Act Notice, see the separate instructions.						om 990-F7 (2013)	

The Mid-Hudson Heritage Center, Inc. 45-2487236

Pa	rt V Other Information (Note the Schedule A and personal benefit contract statement requirements in the			\Box
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a			
33	detailed description of each activity in Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O (see instructions)	34		<u> </u>
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			_
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		<u> </u>
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			•
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		<u> </u>
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets	36		х
27-	dunng the year? If "Yes," complete applicable parts of Schedule N Enter amount of political expenditures, direct or indirect, as described in the instructions	36		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions Did the organization file Form 1120-POL for this year?	37b		х
ь 38а	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	0.0		
30a	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
ь	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter	7		İ
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
	section 4911 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit	,		
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been			
	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on			
	organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958 Section 501(a)(4) and 501(a)(4) argonizations. Enter amount of tax on line 40s			
a	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
·	transaction? If "Yes," complete Form 8886-T	40e	1	X
41	List the states with which a copy of this return is filed None			
42a	The organization's books are in care of ▶ Telephone no ▶			
	Located at ► ZIP + 4 ►			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over	<u> </u>	Yes	No
	a financial account in a foreign country (such as a bank account, secunties account, or other financial account)?	42b	1	X
	If "Yes," enter the name of the foreign country ▶	•		
	and Financial Accounts.			
c	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c	1	х
·	If "Yes," enter the name of the foreign country			
43	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-EZ in lieu of Form 1041 — Check here	•		▶ [
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		1	
	completed instead of Form 990-EZ	44a	<u> </u>	X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			
	completed instead of Form 990-EZ	44b	 	X
C	Did the organization receive any payments for indoor tanning services during the year?	44c	-	X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	t	
	· · · · · · · · · · · · · · · · · · ·		1	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	+	 ^
45b	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," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ (see instructions)	45b	ŧ	x
DAA		Form 99	0-EZ	

Form	990-EZ	(²⁰¹³⁾ The	Mid-Hudso	n Herita	<u>age Cente:</u>	r,Inc.	45-24	87236				age 4
	,	•								f	Yes	No
46		•	ige, directly or indire	• •		s on behalf o	f or in oppo	sition				
			ffice? If "Yes," comp		C, Part I					46	L	X
Pa	rt VI		(c)(3) organization (c)(3) organization		wer allestions 17	_40h and 5	2 and cor	nnlete the	tables for li	nes		
		50 and 51.	T(C)(3) Organizatio	Jiis iliust alist	wei questions 47	435 and 5	z, and coi	iipicto tiio	tables for in	1103		
			organization used	Schedule O to	o respond to any	question in	this Part	VI				
					504(1)		J				Yes	No
47		•	ige in lobbying activi	ities or nave a s	section 501(n) elec	tion in effect	auring the t	ax		47		x
40	•	If "Yes," complete \$		ookon 170/h\/1	\(\A\\\\\2\\ if "\\\\\\ "\\\\\\\\\\\\\\\\\\\\\\\\\	amplete Sebe	dulo E			48		X
48 40-		-	ool as described in s				equie E			49a		X
49a b		•	e any transfers to ar organization a sectio			yanızadon				49b		<u></u>
50			e organization's five			(other than o	officers dure	ectors truste	es and kev		<u>. </u>	
J U			ceived more than \$1									
	- Citipi	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			(b) Average	(c) Rep			h benefits,	(a) Estimate	d ama	
		(a) Name and to	tle of each employee		hours per week	comper (Forms W-2/	sation	contributions	s to employee plans, and	(e) Estimate other con		
				-	devoted to position	(Forms VV-2/		deferred co	mpensation			
No	one											
								ļ				
	_	·										
			<u> </u>		-							
	Total	number of other em	ployees paid over \$	100.000		•				1		
51			e organization's five		ensated independe	nt contractors	who each	received mo	- ore than			
<u> </u>	\$100	,000 of compensation	n from the organiza	tion If there is	none, enter "None	n						
		(a) Name and bus	iness address of each	independent con	tractor		(b) Typ	e of service		(c) Compe	nsation	n
No	ne											
	Total	number of other ind	lependent contractor	re each receiver	20 OVER \$100 000							
52			plete Schedule A?			ations and 49	947(a)(1)					
32		-	sts must attach a co			auono ana 40) - 1 (u)(1)		•	X Ye	s 🗀	No
Unde			e that I have examined			chedules and	statements.	and to the be	st of my knowl			
true,	correct	, and complete Declar	ation of preparer (othe	r than officer) is t	pased on all informati	on of which pre	eparer has a	ny knowledge				
		n	1.8	2/1			5	114/1	J			
Sig	n	Signature of office					_	a/e				
Her	e	Roy T				Pr	eside	nt				
		Type or print name		T ₌	A			1 5-4	- 1		.1	
		Print/Type preparer's na	ime	Pro	sparer's signature	alla.		Date	Check		•	
Paid		Linda M. Hanni		Y	muda Y		you	√ 05/:	L3/14 self-e		0205	
	parer	Firm's name ▶	Sedore & (_()		Firm's EIN ▶	14-10	984	108
Use	Only	Firm's address ▶	2678 Sout	-			V		_		 -	
		<u> </u>	Poughkeep:		12601-52	254			Phone no 8	45-485		
May	the IF	RS discuss this return	n with the preparer s	shown above?	See instructions					<u>▶ X \</u>		No
										Form 9 9	10-EZ	_ (2013

SCHEDULE A (Form 990 or 990-EZ) **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ 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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 45-2487236

			THE MI	.u-nuus	on nerita	ge cen	CET , I	110.			45	270	1230		
Par	t I	Reas	on for Publi	c Charity	Status (All orga	nizations	must co	mplete	this pa	art.) Se	e inst	ruction	ns.		
The or	ganizatıo	n is not	a private found	ation becaus	se it is: (For lines 1 t	hrough 11, o	check only	one box	.)						
1] A chu	ırch, cor	nvention of chur	ches, or ass	ociation of churches	s described	ın sectior	170(b)(1	1)(A)(i).						
2	A sch	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)													
3	A hos	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).													
4 [A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,														
	city, and state:														
5 [An organization operated for the benefit of a college or university owned or operated by a governmental unit described in														
	secti	on 170(b)(1)(A)(iv). (Co	omplete Part	t II.)										
6 [A fed	eral, sta	ite, or local gove	ernment or g	jovernmental unit de	escribed in s	ection 17	0(b)(1)(A	.)(v).						
7 [An or	ganızatı	on that normally	y receives a	substantial part of it	s support fro	om a gove	ernmental	l unit or f	rom the	genera	l public			
	desci	bed in	section 170(b)((1)(A)(vi). (C	omplete Part II.)										
8	A cor	nmunity	trust described	In section	170(b)(1)(A)(vi). (Co	omplete Part	: II)								
9 2	K An or	ganızatı	on that normally	y receives (1) more than 33 1/3	% of its supp	port from	contributi	ons, me	mbershi	p fees,	and gro	ss		
	recei	ots from	activities relate	ed to its exen	npt functions—subje	ect to certain	exception	ns, and (2	2) no mo	re than	33 1/3%	6 of its			
	supp	ort from	gross investme	nt income ai	nd unrelated busine	ss taxable ır	come (les	ss section	1 511 tax) from b	usiness	ses			
_	acqui	red by t	he organization	after June 3	30, 1975 See sectio	on 509(a)(2)	. (Comple	te Part III)						
10	≕	~	•	•	exclusively to test for	•	•								
11	An or	ganızatı	on organized ar	nd operated	exclusively for the b	enefit of, to	perform th	ne functio	ns of, or	to carry	out the	•			
	purpo	ses of c	one or more pub	olicly support	ted organizations de	scribed in s	ection 509	9(a)(1) or	section	509(a)(2) See	section	1		
	509 <u>(</u> a)(3). Ch	eck the box tha	t describes t	the type of supporting	ng organizati	on and co	mplete li	nes 11e _,	through	11h				
_	_ a	_ Туре	L	Type II		III-Function	, ,		d				ionally integra	ated	
e		•			ganization is not con		-								
				ers and other	er than one or more	publicly sup	ported org	ganızatıor	ns descr	ibed in s	ection	509(a)(<i>1</i>	1)		
		ction 50													
f		-		written dete	ermination from the	IRS that it is	a Type I,	Type II,	or Type	III suppo	orting				
	•		check this box												
g		_		the organiza	ition accepted any g	ift or contrib	ution from	any of the	ne						
		wing per												_	1
	• •	•	-	•	ontrols, either alone	-	with perso	ons descr	ibed in (ıı) and				Yes	No
		•			supported organiza	ation?							11g(ı)		1
					bed in (i) above?								11g(ii)		Ì
			-	•	described in (i) or (ii	•							[11g(ıi))	l
<u> </u>			-		the supported organ		1,-31-4		(4) (5,4)		6.03	- 45-	6.34		
(I) N	lame of sup organizatio		(ii) Ei	IN	(iii) Type of orga (described on lii		1	organization sted in your	1 ' '	ou notify	organizat	s the ion in col	(vii) Amount sup		ary
	5				above or IRC s			document?		of your		zed in the S ?			
					(see instructi	ons))	Yes	No	Yes	nort?	Yes	No			
(A)							162	140	165	140	103	140			
(A)								ŀ				1			
(B)		····													
(5)										1					
(C)		<u> </u>					1				 				
(0)															
(D)							1		 	ļ					
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(E)					<u> </u>					<u> </u>	 				
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T-4-1			Į.				1	ŧ	1	ŧ	1	1	1		

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

Schedule A (Form 990 or 990-EZ) 2013

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.)

Calendar year (or fiscal year beginning in) ► (a) 2009 (b) 2010 (c) 2011 (d) 2012 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 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	(e) 201	3 (1	f) Total
membership fees received. (Do not include any "unusual grants.") 2			
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			
furnished by a governmental unit to the			
organization without charge			
4 Total. Add lines 1 through 3			
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			
Section B. Total Support		•	
Calendar year (or fiscal year beginning in) ▶ (a) 2009 (b) 2010 (c) 2011 (d) 2012	(e) 201	3 (1	f) Total
7 Amounts from line 4			
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 carned on			
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	<u></u> l	······	
12 Gross receipts from related activities, etc. (see instructions)		12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section	n 501(c)(3)		
organization, check this box and stop here	-		
Section C. Computation of Public Support Percentage			
Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))		14	<u>%</u>
Public support percentage from 2012 Schedule A, Part II, line 14	ll- Al	15	<u>%</u>
16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or mo	ore, check this		▶ □
box and stop here. The organization qualifies as a publicly supported organization	ar mara		
b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3%	of filore,		▶ □
check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, an	d line 14 ie		
10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.			
Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly			▶ □
organization			
b 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17			
15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop			
Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as	s a publicly		▶ □
supported organization	and soc		▶ ∐
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box a instructions	iiiu see		▶ 🗌

Part # 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.)

	If the organization fails to	quality under t	ne tests listed t	pelow, please o	omplete Part I	l.)	
	tion A. Public Support		T		r		
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2009	(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					17,833	17,833
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5			İ		17,833	17,833
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 line 6)						17,833
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6					17,833	17,833
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
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.)					17,833	17,833
14	First five years. If the Form 990 is for the	organization's firs	st, second, third, fo	ourth, or fifth tax ye	ar as a section 50	1(c)(3)	
	organization, check this box and stop her						▶ [_
Sec	tion C. Computation of Public Su					 	
15	Public support percentage for 2013 (line 8	• •	•	nn (f))		15	100.00%
16	Public support percentage from 2012 Sch	edule A, Part III, II	ne 15			16	
	tion D. Computation of Investme					11	
17	Investment income percentage for 2013 (I	•	•	3, column (f))		17	<u>%</u>
18	Investment income percentage from 2012				,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	18	<u>%</u>
19a	33 1/3% support tests—2013. If the orga						⊾ ਓ
b	17 is not more than 33 1/3%, check this b 33 1/3% support tests—2012. If the orga						► X
	line 18 is not more than 33 1/3%, check the						▶ [
20	Private foundation. If the organization die	d not check a box	on line 14, 19a, or	19b, check this bo	x and see instruc	tions	>

Schedule A (Form 990 or 990-EZ) 2013 The Mid-Hudson Heritage Center, Inc. 45-2487236 P. Part IV 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 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

Open to Public Inspection

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.

Name of the organization

The Mid-Hudson Heritage Center, Inc.

Employer identification number 45–2487236

Form	990-EZ,	Part	I,	Line	16	-	Other	Expenses
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Description	Amount			
Expenses				
Advertising	\$	689		
Office Expense	\$	810		
Insurance Expense	\$	4,682		
Business Expenses	\$	490		
Outside Services	\$	2,925		
Repairs and Maintenance	\$	1,348		
Supplies	\$	1,450		
Telephone	\$	258		
Payroll Processing Fees	\$	1,709		
Reception	\$	332		
Non-investment Depreciation	\$	1,006		
Total	\$	15,699		

Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beg. of	f Year End of	Year
Furniture & Equipment	\$	0 \$	5,031
Less Accumulated Depreciation	\$	0 \$	1,006
Due From 485 Main, LLC	\$	0 \$	156
	Total \$	0 \$	4,181

Form 990-EZ, Part II, Line 26 - Other Liabilities

Description

Beg. of Year End of Year

Schedule O (Form 990 or 990-EZ) (2013)	_		Page 2
Name of the organization		Employer identification i	number
The Mid-Hudson Heritage Cente	r,Inc.	45-248723	6
Loan From RTB Associates	\$	0 \$	39,077

Form 990-EZ, Part III - Primary Exempt Purpose

The mission of the Mid-Hudson Heritage Center is to stimulate awareness and appreciation of the artistic and cultural diversity of the Hudson Valley and to promote, encourage and celebrate the creativity of local residents. To support its mission, the Mid-Hudson Heritage Center operates two venues:

1) an exhibition and community space (the "Heritage Center") and an art center with artists studios, classroom, galleries, and a ceramics facility ("Art Centro").

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

OMB No 1545-0172

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Department of the Treasury Internal Revenue Service Name(s) shown on return

(99)

The Mid-Hudson Heritage Center, Inc.

▶ See separate instructions.

Identifying number 45-2487236

Business or activity to which this form relates Miscellaneous **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 500,000 Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2 2,000,000 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation. Subtract line 3 from line 2 If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions 5 (c) Elected cost (b) Cost (business use only) (a) Description of property 6 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 9 Tentative deduction Enter the smaller of line 5 or line 8 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 10 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 12 13 Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V 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 14 during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 16 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Part III Section A 17 17 MACRS deductions for assets placed in service in tax years beginning before 2013 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (e) Convention (f) Method (g) Depreciation deduction (a) Classification of property placed in (business/investment use репод only-see instructions) 19a 3-year property 5,031 5.0 HY 200DB 1,006 b 5-year property 7-year property 10-year property 15-year property 20-year property S/L 25 yrs 25-year property S/L MM 27 5 yrs Residential rental property MM 27 5 yrs S/L MM S/L Nonresidential real 39 yrs property Section C—Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System S/I 20a Class life S/L b 12-year 12 yrs. S/L 40 vrs MM 40-year Summary (See instructions.) Part IV 21 Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 22 1,006 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 the 23 portion of the basis attributable to section 263A costs

45-2487236

Year Ended: December 31, 2013

The Mid-Hudson Heritage Center,Inc. 317 Main Street Poughkeepsie, NY 12601

Electing out of Bonus Depreciation Allowance for 5-Year Property

The taxpayer elects out of first-year bonus depreciation allowance under IRC Section 168(k) for 5-year depreciable property acquired after December 31, 2007. This election applies to all such qualified bonus depreciation property placed in service during the tax year.