

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



SCANNED JAN 2 I 2015

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 1545-0047

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 and its instructions is at www.irs.gov/form990.

rtax year beginning JUL 1, 2013 and ending JUN 30, 2

Open to Public Inspection

A F	or the	2013 calendar year, or tax year beginning JUL 1, 2013 and ending	JUN 30, 2014						
B C	heck if pplicable	C Name of organization	D Employer identific	cation number					
	Addres: change	S GROUT MUSEUM, INC.		`					
	Name change		42-1	333059					
]initial return]Termin- ated	Number and street (or P 0 box if mail is not delivered to street address) 803 SOUTH STREET		234-6357					
	Amende	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	500 000					
	Applica	WATEREOO, IA 30701	H(a) Is this a group re	eturn					
	pending	F Name and address of principal officer: DILLIE BALLEI	for subordinates	? Yes X No					
		same as C above	H(b) Are all subordinates in	cluded? Yes No					
			if "No," attach a	list. (see instructions)					
_		e: ▶ www.groutmuseumdistrict.org	H(c) Group exemption						
			ear of formation 1932 N	State of legal domicile IA					
Pε		Summary	1 1						
Activities & Governance	1 8	Briefly describe the organization's mission or most significant activities: See Sche	dule 0						
ırıs	2 (Check this box If the organization discontinued its operations or disposed of m	ore than 25% of its net as	sets.					
ŏ	3 1	Number of voting members of the governing body (Part VI, line 1a)	3	21					
<u>ಅ</u>	4 1	Number of independent voting members of the governing body (Part VI, line 1b)	4	21					
es	5 7	Fotal number of individuals employed in calendar year 2013 (Part V, line 2a)		0					
Σį	6 7	Total number of volunteers (estimate if necessary)	. 6	0					
Act	7a 1	Total unrelated business revenue from Part VIII, column (C), line 12	. 7a	0.					
_	<u>b 1</u>	Net unrelated business taxable income from Form 990-T, line 34	7b	0.					
			Prior Year	Current Year					
ne	ı	Contributions and grants (Part VIII, line 1h)	484,452.	527,596.					
Revenue	•	Program service revenue (Part VIII, line 2g)	0.	0.					
Ř		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	486.					
_	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.					
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	484,452.	528,082.					
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	432,646.	524,135.					
		Benefits paid to or for members:(Part-IX-column (A), line 4)	0.	0.					
ses		Salaries, other compensation employee benefits (Part IX, column (A), lines 5-10)	0.	0.					
Expenses		Professional fundraising fees (Part IX, column (A), fine (1e) Total fundraising expenses (Part IX, column (D), line 25 ► 0	_U.	0.					
Ä			5,133.	56.					
		Other expenses (PartiX, column (A), lines 11a 11d 111-24e)	437,779.						
	18	Total expenses. Add lines 13-17 (must-equal Part-IX, column (A), line 25) Revenue less expenses. Subtract line 18, from line 12	46,673.	524,191. 3,891.					
드	19	Hevenue less expenses. Subtract line 18, from line 12							
ans	00 -	Total access (Deat V. less 40)	Beginning of Current Year 46,999.	End of Year 50,890.					
Asse	20 21	Total assets (Part X, line 16)	40,000.	0.					
Net Assets or Fund Balances	22	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20	46,999.	50,890.					
P	art fi	Signature Block							
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the best of m	v knowledge and belief it is					
		t, and complete. Declaration of preparer (other than officer) is based on all information of which prep		, momorgo and conor, it is					
		Dilling K. Dailus	1/6/	15					
Sig	n	Signature of officer	Date						
Her		BILLIE BAILEY, EXECUTIVE DIRECTOR							
	1	Type or print name and title							
		Print/Type preparer's name Preparer	Date Check	PTIN					
Paid	ı þ	DAVID A. RICHTER	if self-employ						
Prep	oarer [Firm's name BERGAN, PAULSEN & COMPANY, P.C.	Firm's EIN	42-1243538					
Use	Only	Firm's address P.O. BOX 2100							
		WATERLOO, IA 50704-2100	Phone no 31	9-234-6885					
May	the IF	RS discuss this return with the preparer shown above? (see instructions)		X Yes No					
3320	01 10-29	9-13 LHA For Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (2013)					

917-21

Form 990 (2013)

		2-1333059	_ Pa	age 3
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidate	ates 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	on in effect		
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessm	ents, 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 Schedul	ie 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," comp	lete		
	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 custodial	an for	1	
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation servi	ices?		
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, p	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, as applicable.	IX, or X		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Sche	edule D,		
	Part VI	. 11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its to	otal	ł i	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
c	Did the organization report an amount for investments · program related in Part X, line 13 that is 5% or more of its t	otal		}
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	<u>11c</u>		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 report	ed 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	ļ	Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that address		1	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part 2		X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	•	1	
	Schedule D, Parts XI and XII	12a		X
h	Was the propagation included in consolidated independent guidted financial statements for the tay year?	l	l	1

14a	a Did the organization maintain an office, employees, or agents outside of the United States?						
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	}	١				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		١				
	or more? If "Yes," complete Schedule F, Parts I and IV	14b					
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	1	ł				
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	L				
	The state of the s		П				

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

If "Yes," and If the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional

is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 1c and 8a? If "Yes," complete Schedule G, Part II

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Form 990 (2013)

16

17

18

19

20a 20b

13

		<u>-1333059</u>	P	<u>age 4</u>
Pai	rt 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			ĺ
	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 on Part	iX,		1
	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 curre	ent		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	-		
	Schedule J	23_		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as or	f the		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	ł		
	Schedule K If "No", go to line 25a	. 24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defeas	ie		
	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		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	1	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, an	nd		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	j	i	ĺ
	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 current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,	1	1 1	1
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	-		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	r l		
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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		28a	[Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an o			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	. 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	. 30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	. 31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	,	1	
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		1	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		1	
-	Part V, line 1	34	x	
35a		35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled enti		†	
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35ь		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization.		1	
	If "Yes," complete Schedule R, Part V, line 2	36	1	х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	. 30		
— ·	The trib distance in adiabat literature is a sine periode illability and account in its evaluate principal in	1	1	1

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Note. All Form 990 filers are required to complete Schedule O

Yes The Enter the number reported in Box 3 of Form 1096. Enter 0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter 0- if not applicable Did the organization comply with backup with blooking rules for reportable paryments to vendors and reportable garring (gambling) winnings to prize winners? 12. Enter the number of employees reported on Form W-3. Triansmittal of Wage and Tax Statements, [and the calendar year ending with or within the year covered by this return 15. Enter the number of employees reported on Form W-3. Triansmittal of Wage and Tax Statements, [and the calendar year ending with or within the year covered by this return 16. Enter the number of employees reported on Form W-3. Triansmittal of Wage and Tax Statements, [and the calendar year ending with or within the year covered by this return 16. Enter the number of employees reported on Form W-3. Triansmittal of Wage and Tax Statements, [and the wind of the wind o		Check if Schedule O contains a response or note to any line in this Part V	-		Tv.:	
b Enter the number of Forms W2G included in line 1a. Enter 0- if not applicable Old the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendary sear ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required dedreil employment tax returns? 2b If at least one is reported on line 2a, did the organization file all required dedreil employment tax returns? 2c In If Yes, I was in file a Form 990-Ff for this year? 3d Dot the organization have unrelated business gross income of \$1,000 or more during the year? 3d If Yes, I set if file a Form 990-Ff for this year? 4d If Yes, I set if file a Form 990-Ff for this year? 4d If Yes, I set if file a Form 990-Ff for this year? 5d Was the organization or both or promised the organization have an interest lin, or a signature or other authority over, a financial account in a foreign country; In Yes, or line 8, provide an explanation in Schedule O 3b If Yes, enter the name of the foreign country; In Yes, or line 8, provide an explanation in Schedule O 3c Was the organization or fore the organization that it was or is a party to a prohibited tax shelfer transaction? 5c Was the organization have annual gross recepts that are normally greater than \$100,000, and did the organization school any contributions that were not tax deductible? 5c Does the organization have annual gross recepts that are normally greater than \$100,000, and did the organization school any contributions of the decurrence of the organization school and party for goods and seniores provided to the payor? 5c Does the organization have annual gross recepts that are normally greater than \$100,000, and did the organization school and party for goods and seniores provided to the payor? 5c Does the organization school and the or	1a	Enter the number reported in Box 3 of Form 1096. Enter A if not applicable	1a	0	Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 5 If all beats one is reported on line 2a, did the organization file all required federal employment tax returns? 8 Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 8 Did the organization have unrelated business gross income of \$1,000 or more during the year? 9 If "Yes," has if filed a Form 990-T for this year? If "No." to line 3b, provide an explanation in Schedule O. 9 At any time during the calendary year, did the organization have were 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 accounts? 9 If "Yes," enter the name of the foreign country: "Both and the first organization in a party to a prohibited tax sheler transaction of the financial accounts. 9 Was the organization a party to a prohibited tax sheler transaction of the first organization and party to a prohibited tax sheler transaction? 9 Did any texable party notify the organization that It was or is a party to a prohibited tax sheler transaction? 9 If "Yes," to line 5a or 5b, did the organization that It was or is a party to a prohibited tax sheler transaction? 9 If "Yes," did the organization include with every solicitation an express statement that such contributions colder any contributions that ware not tax deductible as charitable contributions? 9 If "Yes," did the organization native with every solicitation and express statement that such contributions or grifts were not tax deductible? 10 Tyes, "did the organization native with every solicitation and party torgonization and services provided? 11 If yes, did the organization native with			1	Ö		
gambling) winnings to prize winners? 2 Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, lifed for the calendar year ending with or within the year covered by this return O		_				
2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 5 If 'Yes,' has if filed a Form 990-T for this year? If 'No,' to line 3b, provide an explanation in Schedule O 4 At any time during the calendar year, did the organization have an intrest 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)? 5 If 'Yes,' enter the name of the foreign country: ► 5 See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Did any taxable party notify the organization that this was or a party to a prohibited tax shelter transaction? 5 Did say taxable party notify the organization that this as or a party to a prohibited tax shelter transaction? 5 Did say taxable party notify the organization that this as or a party to a prohibited tax shelter transaction? 5 Did say taxable party notify the organization that this as or a party to a prohibited tax shelter transaction? 5 Did say taxable party say the organization that this as or as party to a prohibited tax shelter transaction? 5 Did say taxable distribution that was or set as party to a prohibited tax shelter transaction? 5 Did say taxable distributions that were not tax deductible or or the value of the good say that the distribution of the party or the party of the party of the organization self, exchange, or otherwise dispose of tangible personal property for which it was requ			,	10	Í	1
bif at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 a and 2a is greater than 250, you may be required to e-file (see instructions) 30. Did the organization have unrelated business gross income of \$1,000 or more during the year? 31. If Yes, it has a filed a Form 990-Tf or this year? If Y/N₀ it is 10 bis. provide an explanation in Schedule O 32. Bif Yes, the stiff of a Form 990 or the this year? 33. Bif Yes, the stiff of a Form 990 or the this year? 34. At any time during the calendar year, did the organization have an interest lin, or a signature or other authority over, a financial account in a foreign country (such as a benk account, securities account, or other financial account;)? 34. Bif Yes, the stiff of Form 990 or the form 10 F 90-22.1, Report of Foreign Bank and Financial Accounts. 35. Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 36. Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization and prossing the second of the year of the goods or services provided? 38. Bif Yes, 'did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 38. Bif Yes, 'did the organization notify the donor of the value of the goods or services provided? 39. If 'Yes, 'indicate the number of Forms 8282 filed during the year 39. Did the organization receive any funds, directly or indirectly, in pay premiums on a personal benefit contract? 39. If the organization received a contribution of cars, boats, anylanes, or other vehicles, did the organization. Provided and contributions of cars, boats, anylanes, or other vehicles, di	2a				1	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has if filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 3a At any time during the calendary 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)? b If "Yes," enter the name of the foreign country: Image and the organization are party to a prohibited tax shelter transaction at any time during the tax year? 5b Using the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c Using the organization and the organization file Form 8886-T? 6c Does the organization and 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? 6c Did the organization shall experiment the value of the goods or services provided? 7c Did the organization shall make the experiment of the value of the goods or services provided? 7d Did the organization shall receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d Did the organization received a contribution of qualified interctly, to pay premiums on a personal benefit contract? 7d If the organization received a contribution of qualified interctly, to pay premiums on a personal benefit contract? 7d If the organization received a contribution of qualified interctly, to pay premiums on a personal benefit contract? 7d If the organization received a contribution of qualified intercetly, to pay premiums on a personal benefit contract? 7d If the organization received a contribution			2a	0		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 If Yes, 'has it filed a Form 990-T for this year? If 'No, 'ro line 3b, provide an explanation in Schedule O 4 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 (seuth as a bank account, account, account in a foreign country (seuth as a bank account, account, account in a foreign country (seuth as a bank account, account, account in a foreign country (seuth as a bank account, account, account in a foreign country (seuth as a bank account, account, account in a foreign country (seuth as a bank account, account, account in a foreign country (seuth as a bank account, account, accounts account, accounts of the properties of the organization and party to a prohibited tax shelter transaction at any time during the tax year? 5 Was the organization have annual gross receipts that are normally greater than \$100,000, and clid the organization solicit any contributions that were not tax deductible as chartable contributions? 6 If Yes, 'did the organization miculed with every solicitation an express statement that such contributions or gifts were not tax deductible? 9 Organizations that may receive deductible contributions under section 170(c). 10 If Yes, 'did the organization notify the donor of the value of the goods or services provided? 11 If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 12 If Yes, '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? 12 If Yes, 'did the organization notify the donor of the value of the goods or services provided? 13 If Yes, 'did the organization receive a payment in excess of \$75 made partly as a contribution of payor and the payor		· · · · · · · · · · · · · · · · · · ·	rns?	2b		1
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a 3b 3b 3b 3b 3b 3b 3b						1
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)? See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts. See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts. Did any texable party notify the organization that it was or is a party to a prohibited tax sheller transaction? If Yes, to line 5a or 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? For organization are annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles as charitable contributions? If Yes, did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible. Be be organization and the every deductible contributions under section 170(c). Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? If Yes, did the organization notify the donor of the value of the goods or services provided? If Yes, indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-07 Sponsaring arganization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable dist	3a			3a		X
4a At any time during the calendar year, clid 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)? 5b 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. 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5d Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6f If Yes, to line 5a or 5b, did the organization file Form 88867 for organization secrepts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6g If Yes, 'did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions under section 170(c). 70 Organizations that may receive deductible contributions under section 170(c). 80 If Yes, 'did the organization notify the donor of the value of the goods or services provided? 81 If Yes, indicate the number of Forms 8282 filed during the year 92 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 93 If the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 94 If the organization in received a contribution of qualified intellectual property, did the organization file Form 8999 as required? 95 If the organization maintaining donor advised funds and section 599(a)(3) supporting organizations file Form 8999 as required? 96 If the organization meanization in a payment in exceeding the section 4966? 96 Did the organization make any taxable distributions under section 4966? 97 Organization file form 8909, Part VIII, line 12, for pub		· · · · · · · · · · · · · · · · · · ·	• O	3b	1	
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. See instructions for filing requirements for Form TD F 90-22.1. Report of Foreign Bank and Financial Accounts. See instructions for filing requirements for Form TD F 90-22.1. Report of Foreign Bank and Financial Accounts. See instructions for filing requirements for Form TD F 90-22.1. Report of Foreign Bank and Financial Accounts. See instructions for filing requirements for Form TD F 90-22.1. Report of Foreign Bank and Financial Accounts. See instructions for filing requirements for Form TD F 90-22.1. Report of Foreign Bank and Financial Accounts. See instructions for filing requirements for Form See instructions of the value of the payor for Foreign Bank and Financial Accounts. See instructions for Foreign Bank and Financial Accounts. See instructions for Foreign Bank and Financial Accounts. See instructions for Foreign Bank and Foreign Bank and Financial Accounts. See instructions for Foreign Bank and Foreign Bank and Financial Accounts. See instructions for Foreign Bank and Foreign Bank and Financial Accounts. See instructions for Foreign Bank and Filing Foreign Foreig		· · · · · · · · · · · · · · · · · · ·				
See instructions for filing requirements for Form TD F 80-22.1, Report of Foreign Bank and Financial Accounts. 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Did any texable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 Did any texable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 Did Ty'es, to line 5 a or 55, did the organization that it was or is a party to a prohibited tax shelter transaction? 5 Did 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 Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 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? 9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 10 If Yes, indicate the number of Forms 8282 filed during the year 11 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 12 If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-07 13 Sponsoring organizations maintaining denor advised funds and section 509(a)(3) supporting organizations. Did the organizations maintaining denor advised funds. 13 Did the organization make a distribution to a donor, donor advised funds. 14 Did the organization make any taxable distributions under section 4968? 15 Did the organization make a distribution included on Part VIII, line 12. 16 Gross income from members or shareholders 17 Did the organization fre		financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
See instructions for filing requirements for Form TD F 90:22.1, Report of Foreign Bank and Financial Accounts. 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Did any texable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 Did any texable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 Did Ty'es, to line 5 ar 55, did the organization the Form 8886-7? 5 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? 5 Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 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? 9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 10 If Yes, 'indicate the number of Forms 8282 filed during the year 11 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 12 If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-07 13 Sponsoring organizations maintaining denor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining denor advised funds. 13 Did the organization make any taxable distributions under section 4966? 14 Did the organization make any staxable distributions under section 4966? 15 Did the organization make and distribution of cars, boats, airplanes, or other vehicles, did the organizations. Protection of the form 1090 property of the organization in the supporting	b	If "Yes," enter the name of the foreign country: ▶	·			
58 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 59 bid any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 50 c if Yes, to line 5a of 5b, did the organization file Form 8886-f? 60 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? 61 if Yes, did the organization included with every solicitation an express statement that such contributions or gifts were not tax deductible? 70 Organizations that may receive deductible contributions under section 170(c). 81 if Yes, did the organization notify the donor of the value of the goods or services provided? 82 if Yes, did the organization notify the donor of the value of the goods or services provided? 83 if Yes, indicate the number of Forms 8282 filed during the year 84 if Yes, indicate the number of Forms 8282 filed during the year 95 if Yes, indicate the number of Forms 8282 filed during the year 96 if the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 76 if the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 87 Sponsoring organizations maintaining fonor advised funds and section 509(a)(3) supporting organizations file a Form 1098-C? 88 possoring organizations maintaining donor advised funds. 99 Donosoring organization make a distribution to a donor, donor advised funds. 90 Did the organization make any taxable distributions under section 4966? 91 bid the organization make any taxable distributions under section 4966? 92 bid the organization make any taxable distributions under section 4966? 93 bid the organization make any taxable distributions under section 4966? 94 bid the organization make any taxable distributions under section 4966? 95 Sponsoring organizations. En			Accounts.	-		
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? c Did the organization receive a poment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 c Did the organization receive a promose, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7 c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 th the organization received a contribution of qualified intellectual property, did the organization file Form 899 as required? 7 th If the organization received a contribution of cars, bosts, airplanes, or other vehicles, did the organization file a Form 1098-C7 8 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make any taxable distributions under section 4966? b Code the organization make any taxable distributions under section 4966? b Code the organization make any taxable distributions under section 4966? b Code the organization make any taxable distributions under section 4966? b Code the organization make any taxable distributions under section 4966? c Code the orga	5a			5a		X
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? b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 5 If "Yes," did the organization notify the donor of the value of the goods or services provided? 6 If "Yes," did the organization notify the donor of the value of the goods or services provided? 6 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 If If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 8 If "Yes," indicate the number of Forms 8282 filed during the year 9 Did the organization receive a contribution of qualified intellectual property, did the organization file Form 8899 as required? 10 If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 11 If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 12 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 13 Sponsoring organizations maintaining donor advised funds. 14 If the organization make and tax and animated by a sponsoring organization, or a donor advised funds. 15 Did the organization make any taxable distributions under section 4966? 16 Did the organization make any taxable distributions under section 4966? 17 Section 501(c)(7) organizations. Enter: 18 Initiation fees and capital contributions included on Part Vill, line 12. 19 Section 5	b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-	action?	5b		X
any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes," did the organization netify the donor of the value of the goods or services provided? c Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 If If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 5 Spensoring organization maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organization make any taxable distributions under section 4966? b Did the organization make any taxable distributions on advised funds. a Did the organization make any taxable distributions on advised funds. b Cross receips, included on Form 990, Part VIII, line 12. b Gross receips, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 10c 10c 11c 10c 11d 12c 10c 11d 11d 12c 10c 11d 11d 12c 10c 11d 11d 12c 11d 12c 11d 12c 12c	С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-07 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, and the unique that the payor organization make any taxable distributions under section 4966? 9 Did the organization make and stribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a forces income from them 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? 12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b If Yes, 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 in more than one state? Note. See the instructions for ad	6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t	he organization solicit	[
were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 8 If the organization received a contribution of cars, boats, amplanes, or other vehicles, did the organization file a Form 1098-C7 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Did the organization make a distribution included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Did 11 Section 501(c)(12) organizations. Enter: a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 2 Section 501(c)(29) qualified morprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional info		any contributions that were not tax deductible as charitable contributions?		6a		X
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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C7 f Spansoring 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? g Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? b Did the organization make any taxable distributions under section 4966? g a b Did the organization make any taxable distributions under section 4966? g a b Gross income from themson section of the section 4966? g a b Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 501(c)(12) organizations. Enter: a Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12c Section 501(c)(29) qualified no	b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions or gifts	1		1
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? b if "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year E Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? To Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? To Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations file Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, are donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12. Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Tob Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Tob Tob Section 501(c)(12) qualified interest received or accrued during the year 11a Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instruct		were not tax deductible?	-	6ь	<u> </u>	<u> </u>
b if "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required? f 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 organizations. Did the supporting organization, or a donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities consumer 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.) 22a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13a Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reser	7	Organizations that may receive deductible contributions under section 170(c).				
c Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required? Find the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required? 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 organizations. Did the supporting organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 90, Part VIII, line 12 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.) 11a 12a Section 501(c)(2) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to	а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	ervices provided to the payo)r? <u>7a</u>	 	X
to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f) If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 8 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 110 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the	b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		<u> </u>
d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? f If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds. 9 Sponsoring organization make any taxable distributions under section 4966? 9 Did the organization make a distribution to a donor, donor advisor, or related person? 9 Did the organization make a distribution to a donor, donor advisor, or related person? 9 Did the organization make a distribution to a donor, donor advisor, or related person? 9 Did the organization make a distribution included on Part VIII, line 12 a Initiation fees and capital contributions included on Part VIII, line 12 B Gross receipts, included on Form 990, Part VIII, line 12. 10b	C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	vas required	- 1		1
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b 12a Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in		to file Form 8282?	, ; ·	7c	ļ	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 110 110 110 111 122 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 123 124 125 126 127 75 76 77 78 78 79 7h 79 7h 79 7h 70 7h 70 7h 70 7h 70 7h 70 7h 7b 7c 7h 7c 7h 7c 7h 7c 7h 7h 7c 7c	d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			1
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7 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? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? Ita Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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	ę					X
h 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 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? Sponsoring organizations maintaining donor advised funds. Did the organization make any stable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12. Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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	f				—	X
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	8					
organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9				⁷⁷ 7h	. 	ļ
9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Intitation 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 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	8					
a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	_		t any time during the year?	8	- 	
b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b		•		0-	1	1
10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12. b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 10 10 10 10 10 10 10 10 10 10 10 10 1			• •			+
a Initiation fees and capital contributions included on Part VIII, line 12. b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			•	90	+	+
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			100	- [
11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	_	·		\dashv		
a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		•	100	\dashv		1
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			112			
amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b	_			_		1
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b			116			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b	12a	• • • • • • • • • • • • • • • • • • • •		122	.	
13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b			1 1	1	1	1-
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13a 13a				_		
Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b				13e	,	_
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	_	· · · · · · · · · · · · · · · · · · ·	•		1	1
organization is licensed to issue qualified health plans	ь	•				
· · · · · · · · · · · · · · · · · · ·	-	· · · · · · · · · · · · · · · · · · ·	136			
	С			<u> </u>		1,
14a Did the organization receive any payments for indoor tanning services during the tax year?		·		148		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			ıle O	14t		

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

	to the ear, to, or the end of the included of			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
		,	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 21			
	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 0			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 21			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3_		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	_5		X
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	X	
ь	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
<u>Sec</u>	tion B. Policies (This Section B requests Information about policies not required by the Internal Revenue Code.)		_	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	<u> </u>	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	V	 -
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		v	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
ь	•	12b		
С		10.	Х	l
10	In Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14		
15	Did the process for determining compensation of the following persons include a review and approval by independent		[
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a	ĺ	Х
a	The organization's CEO, Executive Director, or top management official	15b		X
U	Other officers or key employees of the organization			
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	1		
.04	taxable entity during the year?	16a	ĺ	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
J	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		1
Sec	tion C. Disclosure		·	
17	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availah	ie le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
. •	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion:	•	
	BILLIE BAILEY - 319-234-6357			
	503 SOUTH STREET, WATERLOO, IA 50701			

Form 990 (2013)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest 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.

Check this box if neither the organization (A)	(B)	Jiga	(C)				isati	(D)	(E)	(F)
Name and Title	Average			Position				Reportable	Reportable	Estimated
Name and This	hours per		(do not check more than one box, unless person is both an					compensation	compensation	amount of
	week		cer an	dad	recto	r/trus	tee)	from	from related	other
	(list any	director]		the	organizations	compensation
	hours for	b	88	Officer Key employee Highest compensated employee Former			organization	(W-2/1099-MISC)	from the	
	related organizations	Individual trustee	Institutional trustee		8	TDE!		(W-2/1099-MISC)		organization and related
	below	that	dona.	_	g (S at Co	_			organizations
	line)	ndivi	nstet	E E	Key employee	돌	Former			
(1) BARBARA CORSON	1.00	Γ-			-					
FORMER PRESIDENT		Х		Х				0.	0.	0.
(2) JUDY BURFEIND	1.00						-			
PRESIDENT		X	ļ	Х	ļ			0.	0.	0.
(3) JOHN BURNS	0.50					Г				
DIRECTOR		X						0.	0.	0.
(4) DAVID ALLBAUGH	1.00									
TREASURER		X	<u> </u>	X				0.	0.	0.
(5) EDWARD GALLAGHER JR.	0.50									
DIRECTOR		X			<u> </u>	_		0.	0.	0.
(6) IKE LEIGHTY	0.50]				1				
DIRECTOR		X						0.	0.	0.
(7) HOWARD CRAVEN	0.50				1					
DIRECTOR		X						0.	0.	0.
(8) DAVID GREENE	0.50	1		ŀ	1		1	-	Ì	
DIRECTOR		X		<u> </u>	<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
(9) JUDY GRIFFITH	0.50						1			
DIRECTOR		X				_		0.	0.	0.
(10) RYAN MALECEK	0.50			ĺ						
VICE-PRESIDENT		X	<u> </u>	X	_	ļ	↓_	0.	0.	0.
(11) SANDRA SCHIPPER	0.50	ļ		l	ł		1	_		
DIRECTOR		X	_	ļ	ļ	╄-	<u> </u>	0.	0.	0.
(12) MARY ELLEN WARREN	0.50	۱		İ	ĺ		ĺ			
DIRECTOR		X	-	<u> </u>	 	┼-	┼	0.	0.	0.
(13) DOUG CARTER	0.50	┨								
DIRECTOR		X		_	 	├-	1	0.	0.	0.
(14) BOBBIE KAZENELSON	0.50	١.,							1	
DIRECTOR		X	├-	ļ	-	╄-	 	0.	0.	0.
(15) JOHN WOOD	0.50	┨,,,								
DIRECTOR	7 50	X	-	-	-	┼-	\vdash	0.	0.	0.
(16) KATHY BRECKUNITCH	0.50	٠,			1				0.	_
DIRECTOR	7 50	X	+		-	+		0.	ļ	0.
(17) ROGER OLESON	0.50							0.	0.	0.
DIRECTOR		X	Ц	<u> </u>	<u> </u>		1	1	<u> </u>	5 000 0010

Page 7

Form 990 (2							-			42-13	33	059	Pa	ige 8
Part Att	Section A. Officers, Directors, Trus		ploy	ees			ghe	st C						
	(A) Name and title	(B) Average	(C) Position						(D) Reportable	(E) Reportable		Eo	(F) timate	
	Name and the	hours per		(do not check mo box, unless perso					compensation	compensation	1		ount	
		week	offi		dad				from	from related			other	
		(list any hours for	director	ĺ					the	organizations			oensa	
		related	5	₽3			sated		organization (W-2/1099-MISC)	(W-2/1099-MIS	(نـ		om the anızatı	
		organizations	anste 1	at tros		8€	Tipe I		(***22 1099-141130)		Ì	_	relate	
		below	Individual trustee	Institutional frustee	ᡖ	Key employee	oyes co	Ē					nizatio	
		line)	휼	ast	Officer	Xey.	Highest compensated employee	Form						
(18) JOE	PRYOR	0.50				1								
DIRECTOR			X	ļ		<u> </u>		L	0.		0.			0.
(19) AARO	N BUZZA	0.50												_
DIRECTOR		0 50	X	<u> </u>			_	ļ	0.		0.			0.
	MORRISSEY	0.50					İ							^
DIRECTOR		0.50	X	-			-	ļ	0.		0.			0.
(21) RON	WELPER	0.50	X					1	0.		0.			ο.
DIRECTOR			^	-	_	 	-	-	0.		- 			<u> </u>
			1					Ì			:			
			├	┢╌		\vdash	 	 		·	-			
		<u> </u>	ĺ	1		l	1	ł			Ì			
			1			-				·				
			1						}		l			
			Т											
]				ļ							
			<u> </u>			<u> </u>	<u> </u>							
1b Sub-t									0.		0.			0.
c Total	from continuation sheets to Part V	II, Section A		٠.					0.		0.			0.
	(add lines 1b and 1c)	 					<u> </u>	<u> </u>	0.	<u> </u>	0.			0.
	number of individuals (including but i	not limited to th	nose	liste	ed a	bov	e) w	no re	eceived more than \$100	0,000 of reportable	•			^
comp	ensation from the organization												Yes	0
											ı		res	No
	e organization list any former officer			e, ke	ey er	mplo	oyee	, or	highest compensated e	mployee on	l		i	х
	a? If "Yes," complete Schedule J for :							d _4	 har aamaanaatian fram			3		<u>.</u>
	ny individual listed on line 1a, is the s elated organizations greater than \$15	•							•	the organization		4	1	Х
	ny person listed on line 1a receive or									 Idual for services				
	red to the organization? If "Yes," con							0.0.				5	1	X
	Independent Contractors	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,												
1 Comp	plete this table for your five highest co	ompensated in	dep	ende	ent c	ont	ract	ors t	that received more than	\$100,000 of com	oens	ation f	rom	
	ganization. Report compensation for													
	(A)]	(B)	•	_	(0		
	Name and business	address	N	ON:	E			_	Description of s	services		ompe	nsatio	n
								ļ						
														
		····												
										j				
	 							\dashv						
										1				
		 						\neg						
								1						

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

0

\$100,000 of compensation from the organization

L		Check if Schedule O contains a response or note	to any line in this Part VI	II		
		,	(A) Total revenu	(B)	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ats I	1 a	a Federated campaigns 1a				
اة يَر		b Membership dues 1b	535.			
A'C	c	c Fundraising events				
불리	d	d Related organizations 1d				
S, E		e Government grants (contributions) 1e 129	450.			
risi		f All other contributions, gifts, grants, and				
돌			611.		:	
들임	g	g Noncash contributions included in lines 1a-1f \$				
Contributions, Gifts, Grants and Other Similar Amounts	_	h Total. Add lines 1a-1f	▶ 527,59	6.		
			ss Code			
9	2 a	a				
اه ڲٙ	b	b				
S		С				
e d	c	d				
Program Service Revenue	e	e				
ھ ا	f	f All other program service revenue			ļ	
		g Total. Add lines 2a-2f	<u> </u>			
	3	Investment income (including dividends, interest, and	. 1	26	1	106
		other similar amounts)	· · · · · · · · · · · · · · · · · · ·	36.	ļ	486.
	4	Income from investment of tax-exempt bond proceed	ls 🕨		ļ	
	5	Royalties .	<u> </u>			
		(i) Real (ii) P	ersonal			
	6 a	a Gross rents			-	
	į t	b Less: rental expenses				
		c Rental income or (loss)				
		d Net rental income or (loss)	<u> </u>			
	7 8		Other			
	ł	assets other than inventory				
	י ו	b Less: cost or other basis		,		
		and sales expenses	 [
	•	c Gain or (loss)		`\	•	
	1	d Net gain or (loss)	•			
ne	8 6	a Gross income from fundraising events (not				
Ven		including \$ of		,		
Other Revenu		contributions reported on line 1c). See				
Ē		Part IV, line 18				
ਰ	•	b Less: direct expenses b	—			1
	1	c Net income or (loss) from fundraising events			 	
	9 :	a Gross income from gaming activities. See				
	١.	Part IV, line 19 a				
	ı	b Less: direct expenses . b	—			
		c Net income or (loss) from gaming activities				
	10 1	a Gross sales of inventory, less returns				
	} .	and allowances a				
	1	b Less: cost of goods sold b				
	 '	c Net income or (loss) from sales of inventory	ess Code			
	11 :		<u>eaa 0006</u>			
	1				 	1
	1	b			 	
	'	d All other revenue				1
	1 '	e Total. Add lines 11a-11d	D	/// · · · · · · · · · · · · · · · · · ·		1
	12		▶ 528,0	82. 0	. 0	486.

Form 990 (2013) GROUT MUSEUM,
Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must comp			mplete column (A)	
	Check if Schedule O contains a respons	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21	524,135.	524,135.		
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			· 	***************************************
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(8)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)		· · · · · · · · · · · · · · · · · · ·		
9	Other employee benefits				
10	Payroll taxes			· 	
11	Fees for services (non-employees):				
a	Management				
b	Legal				
C	Accounting				
d	Lobbying				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O)		:	I	
12	Advertising and promotion				
13	Office expenses	56.		56.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
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			<u> </u>	<u></u>
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					
c					
ď					
	All other expenses	E 2 4 1 0 1	E24 12E	56.	0.
25	Total functional expenses. Add lines 1 through 24e	524,191.	524,135.	36.	· · · · · · · · · · · · · · · · · · ·
26	Joint costs. Complete this line only if the organization			}	
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation			1	}
	Check here If following SOP 98-2 (ASC 958-720)			<u> </u>	<u> </u>

· Form	990 (2013) GROUT MUSEUM, INC.	42-133	3059	Pa	ge 12
Pai	t 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	528	3,0	82.
2	Total expenses (must equal Part IX, column (A), line 25)	2	52	4,1	91.
3	Revenue less expenses. Subtract line 2 from line 1	3		3,8	91.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4	5,9	99.
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	5	0,8	90.
Pa	rt XII Financial Statements and Reporting				,
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>			Щ.
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			:	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	: O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d 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?		2b	X	,
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	te basis,			
	consolidated basis, or both:				
	Separate basis X 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	ie audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	<u> X</u>	ļ
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?	-	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2013)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

GROUT MUSEUM, INC.

Employer identification number 42-1333059

Part I	Reason f	or Public Char	ity Status (All organiza	ations mus	t complete	this part	.) See insti	ructions.				
he orga	nization is not a	private foundation	because it is: (For lines 1	through 1	1, check o	nly one b	ox.)					
1	A church, cor	vention of churche	s, or association of churc	hes descr	ibed in se d	ction 170	(b)(1)(A)(i).	•				
2	A school desc	cribed in section 17	<mark>'0(b)(1)(A)(ii).</mark> (Attach Sch	nedule E)								
3 🗔	A hospital or	a cooperative hospi	tal service organization d	lescribed i	n section	170(b)(1)(A)(iii).					
4	A medical res	earch organization	operated in conjunction v	with a hosp	oital descri	bed in se	ction 170((b)(1)(A)(iii). Enter t	the hospital	's nam	e,
	city, and state	e:										
5 🗀	An organizati	on operated for the	benefit of a college or un	iversity ow	vned or op	erated by	a governn	nental unit	describ	ed in		
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6	A federal, sta	te, or local governm	ent or governmental unit	described	l ın sectio	n 170(b)(1)(A)(v).					
7 X			eives a substantial part o					r from the	general	public desc	ribed i	n
	section 170(b)(1)(A)(vi). (Complete Part II.)											
8	1		section 170(b)(1)(A)(vi). (Complete	Part II)							
9			eives: (1) more than 33 1			om contri	butions, m	embershij	o fees, a	nd gross re	ceipts	from
			nctions - subject to certa									
			axable income (less sect									
		509(a)(2). (Complete			,		•					
10 🗀			perated exclusively to tes	st for publi	c safety. S	ee sectio	n 509(a)(4) .				
11			perated exclusively for th						out the	purposes	of one	or
	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.											
	a Type I				nctionally i		d	I 🔙 Тур	e III - No	n-functional	ly integ	grated
e 🗀			at the organization is not					more disc	qualified	persons otl	her tha	n
			than one or more publicly									
f			tten determination from t									
•		rganization, check t										
9			organization accepted ar	v aift or co	ontribution	from any	of the follo	owing pers	sons?			
9			directly controls, either al								Yes	No
			upported organization?	-		•				11g(i)		
	_	• •	n described in (i) above?				-			11g(ii)		
			a person described in (i) o		e?	•		-		11g(iii)		
h			about the supported or								············	
••	1 TOTICE LITE I	Chowing andmand	about the copportor of	g	(-).							
4D M		(ii) 51N	(III) Tunn of a constration	(iv) Is the o	rganization	(v) Did vo	u notify the	(vi) Is	the	(vii) Amoun	t of mo	netanı
	ne of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1-9		sted in your		ion in col.	organizáti (i) organiz	on in col	1 ' '	port	ilotary
U	gamzanom		above or IRC section		document?		r support?	US	?	""	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			(see instructions))	Yes	No	Yes	No	Yes	No			
				<u> </u>					-			
					1							
				1								
				1	1				-			
	· · · - · · ·			-		· · · · · · · · · · · · · · · · · · ·		1			•	
												·
		1	3	3	§	}	t	i	E	I		

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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not					ŀ	
	include any "unusual grants")	637,941.	635,521.	310,473.	484,452.	527,596.	2595983.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf	ĺ	<u>'</u>				
3	The value of services or facilities						
	furnished by a governmental unit to					l	
	the organization without charge	!					
4	Total. Add lines 1 through 3	637,941.	635,521.	310,473.	484,452.	527,596.	2595983.
	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)						744,086.
6	Public support. Subtract line 5 from line 4	1 · · · · · · · · · · · · · · · · · · ·	******************************	*******************		***************************************	1851897.
	ction B. Total Support	<u> </u>		<u> </u>	<u> </u>		 <u></u>
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 4	637,941.	635,521.	310,473.	484,452.	527,596.	2595983.
8	Gross income from interest.				•		
	dividends, payments received on				,		
	securities loans, rents, royalties						
	and income from similar sources	129.	1.			486.	616.
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			,			2596599.
	Gross receipts from related activities	etc. (see instructi	ons)			12	
	First five years. If the Form 990 is fo	•		d, fourth, or fifth to	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stop	p here					▶□_
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2013 (line 6, column (f) d	ivided by line 11, o	column (f))	•	14	71.32 %
15	Public support percentage from 2012	2 Schedule A, Part	II, line 14			15	62.07 %
16a	33 1/3% support test - 2013. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization	1			$\triangleright X$
t	33 1/3% support test - 2012. If the	organization did no	ot check a box on i	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	ns box
	and stop here. The organization qua	lifies as a publicly :	supported organiz	ation			▶□
17a	10% -facts-and-circumstances tes	t - 2013. If the org	anızation did not d	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstan	ces" test, check t	nis box and stop h	nere. Explain in Pa	rt IV how the organ	ization
	meets the "facts-and-circumstances"	test. The organiza	ition qualifies as a	publicly supported	d organization		▶ □
t	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets t	he "facts-and-circu	ımstances" test, c	heck this box and	stop here. Explair	in Part IV how the	
	organization meets the "facts-and-cir-	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	anization	▶□
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a	ind see instruction	s ▶ □
					0.1.	A (Cares 000	000 FT 0040

Schedule A (Form 990 or 990-EZ) 2013 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.)	

<u>Se</u>	ction A. Public Support					,	
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						
3	Gross receipts from activities that			1			
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-		1				
	ization's benefit and either paid to						
_	or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge	i				;	
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and	 		· · · · · · · · · · · · · · · · · · ·			
• •	3 received from disqualified persons						
ı	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						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6						
10	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
1	b Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						ļ
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.)						
	Total support. (Add lines 9, 10c, 11, and 12)				<u> </u>	1	
14	First five years. If the Form 990 is fo	r the organization	's first, second, th	rd, fourth, or fifth	tax year as a sect	on 501(c)(3) organı	zation,
	check this box and stop here .			·····	<u> </u>	<u></u>	<u> </u>
Se	ction C. Computation of Pub	ic Support Pe	ercentage				
15	Public support percentage for 2013 (line 8, column (f) o	divided by line 13,	column (f)) .		15	<u> </u>
16	Public support percentage from 2012	Schedule A, Par	t III, line 15			16	%
Se	ction D. Computation of Inve	stment Incom	ne Percentage)			
17	Investment income percentage for 20)13 (line 10c, colu	ımn (f) dıvıded by l	ine 13, column (f))		17	%
18	Investment income percentage from	2012 Schedule A	, Part III, line 17			18	%
19	a 33 1/3% support tests - 2013. If the			on line 14, and lir	ne 15 is more than	331/3%, and line	17 is not
	more than 33 1/3%, check this box a						
	b 33 1/3% support tests - 2012. If the	e organization did	not check a box o	n line 14 or line 19	a, and line 16 is n	nore than 33 1/3%,	
	line 18 is not more than 33 1/3%, ch						n ▶∐
20	Private foundation. If the organization	on did not check a	a box on line 14, 1	9a, or 19b, check	this box and see i	nstructions	<u>▶</u>

Schedule A	(Form 990 or 990-E	Z) 2013 GROUT	MUSEUM,	INC.		42-1333059 P	age 4
Part IV	Supplementa	I Information. P	rovide the expla	nations required b	y Part II, line 10; Part II, lir	ne 17a or 17b, and Part III, line 12	
	Also complete this	s part for any addition	onal information	(See instructions)).		
							
				· · · · · · · · · · · · · · · · · · ·			
							
					· · · · · · · · · · · · · · · · · · ·		
		···		 			
_							_
	· · · · · · · · · · · · · · · · · · ·				***************************************		
							
				·			
						-	
	···					······································	
	· · · · · · · · · · · · · · · · · · ·						
	· · · · · · · · · · · · · · · · · · ·						
						· · · · · · · · · · · · · · · · · · ·	
							
							_
			 				
		 				<u> </u>	
						· · · · · · · · · · · · · · · · · · ·	
						· · · · · · · · · · · · · · · · · · ·	
							

SCHEDULE D

(Form 990)

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

Department of the Treasury Internal Revenue Service Name of the organization

GROUT MUSEUM, INC.

Employer identification number 42-1333059

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or A	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fur	nds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a		only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose confe	erring
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an historica	ally important land area
	Protection of natural habitat	Preservation of a certified h	nistoric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a c	onservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic sti	• • • • • • • • • • • • • • • • • • • •	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the orga	inization during the tax
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		Yes No
•	violations, and enforcement of the conservation easements		. — —
6 7	Staff and volunteer hours devoted to monitoring, inspecting Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo		
Ü	and section 170(h)(4)(B)(ii)?	ve satisfy the requirements of section 170(ff)(4)(Yes No
9	In Part XIII, describe how the organization reports conservat		
•	include, if applicable, the text of the footnote to the organization		
	conservation easements	mono manda diatemento mai desensos mo	. 94. 11. 24. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10
Pai	t III Organizations Maintaining Collections of	of Art. Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A		and balance sheet works of art,
	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of public se	ervice, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		. • \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial gain	, provide
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1	•	> \$
b	Assets included in Form 990, Part X		▶ \$

Sched	dule D (Form 990) 2013 GROUT MU	USEUM, INC	•				. 4	12-13	33059	Page 2
Par	t III Organizations Maintaining C			orical Tre	easures, o	r Other	Simila	ar Asset	S(continu	ed)
3	Using the organization's acquisition, accession									
	(check all that apply):									
а	Public exhibition	d	ı 🗀 L	oan or excl	nange prograi	ms				
b	Scholarly research	е	. 🗆 o	ther						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how the	y further th	ne organizatio	n's exem	pt purpo	se in Part	XIII.	
5	During the year, did the organization solicit o							_		
	to be sold to raise funds rather than to be ma	aintained as part of t	the organ	ization's co	llection?				Yes	No_
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the o	organizatio	n answered "	Yes" to Fo	orm 990	, Part IV, I	ne 9, or	
	reported an amount on Form 990, Par	t X, line 21.								
1a	is the organization an agent, trustee, custodi	an or other intermed	diary for c	ontribution	s or other ass	sets not in	cluded		_	
	on Form 990, Part X?			•	-				Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing ta	ıble:						
									Amount	
c	Beginning balance	••					1c			
d	Additions during the year				•		1d			
е	Distributions during the year						1e			
f	Ending balance	,					1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?				•	L	Yes	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the e	xplanation	n has been	provided in F	art XIII				
Par	t V Endowment Funds. Complete	f the organization ar	swered "	Yes" to Fo	rm 990, Part I	IV, line 10	•			
		(a) Current year	(b) Pr	ior year	(c) Two years	s back (c	i) Three y	rears back	(e) Four y	ears back
1a	Beginning of year balance			,						
ь	Contributions									
C	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities		1							
	and programs									
f	Administrative expenses									
9	End of year balance				<u></u>					
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1ç	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		%							
ь	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%.								
3a	Are there endowment funds not in the posse	ession of the organiz	zation tha	t are held a	ınd admınıste	red for the	e organiz	zation		
	by:								\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Yes No
	(i) unrelated organizations .				•		•		3a(i)	
	(ii) related organizations .								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization	s listed as required	on Sched	ule R?					Зь	
4	Describe in Part XIII the intended uses of the		owment f	unds.				,		
Pa	t VI Land, Buildings, and Equipn									
	Complete if the organization answere	ed "Yes" to Form 99	0, Part IV,	line 11a. S	See Form 990					
	Description of property	(a) Cost or			t or other		cumulate	i	(d) Book	value
	,	basis (invest	ment)	basis	(other)	depi	reciation			
1a	Land .									
b	Buildings									
С	Leasehold improvements									
d	Equipment									
	Other .								_	
Tota	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Par	t X, colun	nn (B), line	10(c).)			D		0.

Complete if the organization answered "Yes"		(c) Method of valuation: Cost	or and of year market value
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Valuation: Cost	or end-or-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			700 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Total. (Col (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, III	ne 11c. See Form 990, Part X, line 13	·
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	<u> </u>		
Complete if the organization answered "Yes"	to Form 990, Part IV. I	ne 11d. See Form 990. Part X. line 15	i .
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)	15\		b
Total. (Column (b) must equal Form 990, Part X, col. (B) III	ne 15.) .	····	
Part X Other Liabilities.	I de Corres 000 Bort IV I	ing 11g or 11f Son Form 900 Part Y	line 25
Complete if the organization answered "Yes (a) Description of liability	to Form 990, Part IV, I	(b) Book value	ine 20.
		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) II	ne 25) >		
2. Liability for uncertain tax positions. In Part XIII, provid	de the text of the footno	ite to the organization's financial state	ements that reports the
organization's liability for uncertain tax positions und	er FIN 48 (ASC 740). CI	neck here if the text of the footnote ha	as been provided in Part XIII X

Sche	dule D (Form 990) 2013 GROUT MUSEUM, INC.		42-1	333059 Page 4
Pa	TXI Reconciliation of Revenue per Audited Financial Statement	ents With Revenue per	Return	•
	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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	1 1	
a	Net unrealized gains on investments	2a	4	
þ	Donated services and use of facilities	2b	_	
C	Recoveries of prior year grants	2c	4	
d	(======================================	2d	-	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	4	
	Other (Describe in Part XIII.)	4b	-	
С	Add lines 4a and 4b	-	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	· · · · ·	5	
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	ients With Expenses pe	er Ketui	n.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.			 -
1	Total expenses and losses per audited financial statements	•	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1	1 1	
а	Donated services and use of facilities	2a	-	
Ь	Prior year adjustments	2b	-	
C	Other losses	2c	-	
d	Other (Describe in Part XIII)	2d]	- 1	
e			2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 4-1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	-	
b		4b	⊢ ,	
_	Add lines 4a and 4b		4c	· · · · · · · · · · · · · · · · · · ·
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) rt XIII Supplemental Information.		1 5	·
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	IV lease the and Ohi Doet Villa	o 4: Dort	V June 2: Part VI
			e 4, rari	A, IIIIe 2, Part AI,
ines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	ndonai information.		
				
Pa [·]	rt X, Line 2:			
<u>. u.</u>	LC A, IIIIC 2.			
Exi	planation: INCOME TAX RETURNS ARE SUBJECT	TO UNCERTAIN TA	X POS	STTTONS
٠.٠	Tanacion: Income in Abiotato in Cope de l		11 1 0.	31110110
тн	AT MIGHT NOT BE SUSTAINED UPON EXAMINATION	BY TAXING AUTH	ORIT	IES.
MA	NAGEMENT ANNUALLY MAKES AN APPROPRIATE EVA	LUATION OF ANY	UNCE	RTAIN TAX
PO	SITIONS THAT MAY EXIST WITHIN THE ORGANIZA	TION'S TAX RETU	RNS.	AS OF JUNE
30	, 2014 MANAGEMENT BELIEVES THERE WERE NO M	ATERIAL UNCERTA	IN T	ΑX
	, 1011			
PO	SITIONS THAT ARE REQUIRED TO BE RECORDED C	R DISCLOSED. WI	TH F	ΞW
===				
EΧ	CEPTIONS, THE ORGANIZATION IS NO LONGER SU	BJECT TO TAX EX	AMIN	ATIONS FOR
=				
TH:	E FISCAL YEARS BEFORE 2011.			
		······································		
		<u> </u>		
				··

Schedule D (Form 990) 2013 Part XIII Supplemental In	GROUT MUSEUM, INC.	42-1333059 Page 5
Part XIII Supplemental In	formation (continued)	
····	<u> </u>	
		
		<u>.</u>

2 Employer identification number EXPANSION & OPERATIONS OF 42-1333059 Open to Public OMB No 1545-0047 2013 PROVIDE FUNDS FOR THE Inspection (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any THE MUSEUM. 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 (g) Description of non-cash assistance Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. (f) Method of valuation (book, FMV, appraisal, Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, other) Ö (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of 524,135, cash grant (c) IRC section if applicable 501(c)3 INC 23-7416881 Part # General Information on Grants and Assistance (e) GROUT MUSEUM, criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization WATERLOO, IA 50701 503 SOUTH STREET H.W. GROUT TRUST Department of the Treasury Internal Revenue Service **SCHEDULE 1** (Form 990) Part #

Schedule I (Form 990) (2013) Enter total number of section 501(c)(3) and government organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

332101

Schedule I (Form 990) (2013)

332102 10-29-13

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.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Inspection

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 Name of the organization Employer identification number 42-1333059 GROUT MUSEUM, INC. Form 990, Part I, Line 1, Description of Organization Mission: TO PROVIDE FUNDS TO THE H.W. GROUT TRUST FOR EXPANSION AND OPERATIONS OF THE MUSEUM IN CONNECTION WITH THE BENEFIT OF THE TRUSTEES. Form 990, Part VI, Section A, line 6: Explanation: THE TRUSTEES OF THE H.W. GROUT TRUST ARE THE SOLE MEMBERS OF THE GROUT MUSEUM, INC. THE MEMBERS APPROVE SIGNIFICANT DECISIONS OF THE GOVERNING BODY. Form 990, Part VI, Section A, line 7a: Explanation: THE GOVERNING BODY IS APPOINTED BY THE MEMBERS OF THE H.W. GROUT TRUST. Form 990, Part VI, Section A, line 7b: Explanation: THE MEMBERS OF HAW. GROUT TRUST HAVE THE RIGHT TO APPROVE OR RATIFY DECISIONS OF THE ORGANIZATION'S GOVERNING BODY. Form 990, Part VI, Section B, line 11: Explanation: A DRAFT COPY OF THE FORM 990 WAS SENT TO THE EXECUTIVE DIRECTOR AND FINANCE DIRECTOR OF THE H.W. GROUT TRUST FOR REVIEW. COPY OF THE FORM 990 WAS SENT TO ALL BOARD MEMBERS PRIOR TO FILING WITH THE IRS.

Form 990, Part VI, Section B, Line 12c:

Explanation: BOARD & COMMITTEE MEMBERS SIGN A CONFLICT OF INTEREST

STATEMENT ANNUALLY. BOARD MEMBERS REVIEW THE MONTHLY AGENDA AT THE

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization GROUT MUSEUM, INC.	Employer identification number 42-1333059
BEGINNING OF THE MEETING AND STATE WHETHER THEY HAVE ANY	CONFLICTS OF
INTEREST. IF CONFLICTS OF INTEREST ARISE, THE BOARD MEMBE	R REFRAINS FROM
DISCUSSION AND ABSTAINS FROM VOTING.	
Form 990, Part VI, Section C, Line 19:	
Explanation: THE ORGANIZATION'S GOVERNING DOCUMENTS, CONF	LICT OF INTEREST
POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUE	ST.
	74.77
	· · · · · · · · · · · · · · · · · · ·

Schedule O (Form 990 or 990-EZ) (2013)

332212 09-04-13

Employer identification number, 42-1333059 Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Related Organizations and Unrelated Partnerships ▶ See separate instructions. ► Attach to Form 990. INC. GROUT MUSEUM, Name of the organization Department of the Treasury Internal Revenue Service **SCHEDULE R** Form 990)

OMB No 1545-0047 2013

Open to Public Inspection

Direct controlling entity End-of-year assets <u>e</u> Total income ፱ Legal domicile (state or Identification of Disregarded Entities Complete If the organization answered "Yes" on Form 990, Part IV, line 33. foreign country) Primary activity <u>e</u>

Name, address, and EIN (if applicable) of disregarded entity

Part #

Identification of Related Tax-Exempt Organizations Complete If the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Part II

(a)	(Q)	(2)	(Q)	9		(6)	653
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	section 5.	section 512(b)(13) controlled
of related organization		foreign country)	section	status (if section	entity	entity	7
•				501(c)(3))		Yes	No
H.W. GROUT TRUST - 23-7416881							
503 SOUTH STREET	OPERATION OF A MUSEUM IN						
WATERLOO IA 50701	WATERLOO, IOWA.	Iowa	501(c)(3)	PF	N/A		×
	 						
	<u> </u>						
	1			_			

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

Schedule R (Form 990) 2013

42-1333059 Page 2

Schedule R (Form 990) 2013 GROUT MUSEUM, INC.

Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. Part III

					9	17)	1	3	9	3
(a)	(<u>a</u>)	<u></u>	<u>ē</u>	<u>e</u>	€	3	Ē	€	€	3
Name, address, and EIN of related organization	Primary activity	Legal domicate (state or foreign country)	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disproportionate allocations? Yes No	Code V-UBI amount in bo 20 of Schedul K-1 (Form 106	General or managing partner? Yes No	General or Percentage x managing ownership e pariner/ 5) Yes No
									-	
									_	
									<u>. </u>	
									_	
		_								

Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. Part IV

ı		ı			1		ı		1		ı		
	(C)	512(b)(13) controlled entity?	Yes No	 _	_	_			 -		-	 	
-	£	Percentage 512(b)(13) ownership controlled entity?	Ϋ́	-								 -	
	(B)	Share of end-of-year	desers										
	£	Share of total income		•				-				-	
	e	Type of entity (C corp, S corp,	or tinest)										
	ত্ত	Direct controlling Type of entity (C corp, S corp,											
	©	Legal domicile (state or foreign	country)										
	(9)	Primary activity											
	(a)	Name, address, and EIN of related organization											

Schedule R (Form 990) 2013

Page 3

Ş Yes

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

a Receipt of (i) interest (ii) annuties (iii) royalties or (iv) rent from a controlled entity	٠			1a	×	- 1
 Gift, grant, or capital contribution to related organization(s) 	•			1b X	\dashv	- 1
c Gift, grant, or capital contribution from related organization(s)				10	×	1
d Loans or loan guarantees to or for related organization(s)				14	×	-
e Loans or loan guarantees by related organization(s)				1e	×	ı
						t
f Dividends from related organization(s)				#	×	
a Sale of assets to related organization(s)				10	×	
			•	4	×	
		•		= :	¢ >	
i Exchange of assets with related organization(s)				;=	× ;	
j Lease of facilities, equipment, or other assets to related organization(s)				-	×	
					>	
k Lease of racinities, equipment, or other assets from related organization(s)	(2)			<u> </u>	×	
reflormance of services of membership of full draising solicitations for related organization(s)	allization(s)			= ,	; >	
 Performance of services or membership or fundraising solicitations by related organization(s) 	anization(s)			Ę	<;	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ion(s) (s)noi		:	Ę	×	
 Sharing of paid employees with related organization(s) 				10	×	,
p Reimbursement paid to related organization(s) for expenses	:	:		1 _p	×	
q Reimbursement paid by related organization(s) for expenses	:			19	×	
r Other transfer of cash or property to related organization(s)				+	×	
s Other transfer of cash or property from related organization(s)				15	×	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete th	is line, including covered rela	ationships and transaction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	olved		
(1) H.W. GROUT TRUST	В	524,135.C	CASH			
(2)						
(3)						
(4)						
(5)						
9						
332163 09-12-13			Schedule R (Form 990) 2013	3 (Form 99	0) 2013	

Page 4

Schedule R (Form 990) 2013 GROUT MUSEUM, INC.

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(b) (c) (d)	(q)	(c)	(5)	(9)	(1)	(b)	Ξ	6	5	3
Name, address, and EIN of entity	Primary activity	nicile oreign	t income related,	Are all partners sec 501(c)(3) orgs.	بي ئ	Share of end-of-year	Dispropor- tionate	Dispropor- Code V-UBI General or Percentage bonate amount in box 20 managing ownership allocations? of Scharling K-1 partner?	General o managing partner?	Percentage ownership
		country)	under section 512-514)	Yes No	Income	assets	Yes No	(Form 1065)	Yes No	
				-	-					
							-		-	
								i		
								İ	_	
									-	
							_			
								Schedule	R (For	Schedule R (Form 990) 2013

Schedule R	(Form 990) 2013	GROUT MUSEU	M, INC.	42-133	3059 Page 5
Part VII	(Form 990) 2013 Supplemental Info	ormation			
	Provide additional infor	mation for responses to a	uestions on Schedule R (see inst	ructions).	
					· · · · · · · · · · · · · · · · · · ·
_					
					
					
	··				
			•		
				`	
		· · · · · · · · · · · · · · · · · · ·			
					·
- 					
 	·				
				······································	
	·				
		·,, · · · · · · · · · · · · · · · · · ·			
_					,
					
					
					
					
~ 					
332165 09-12	-13			Schedule I	R (Form 990) 2013

Form **8868**. (Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No. 1545-1709

• If you a	are filing for an Automatic 3-Month Extension, complete	te only Pa	rt I and check this box			► X			
• If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form).					
Do not c	complete Part II unless you have already been granted a	an automa	tic 3-month extension on a previous	sly filed For	rm 8868.				
Electron	ic filing (e-file). You can electronically file Form 8868 if y	ou need a	3-month automatic extension of tir	ne to file (6	months for a	corporation			
required :	to file Form 990-T), or an additional (not automatic) 3-mor	nth extens	ion of time. You can electronically f	ile Form 88	368 to request	an extension			
of time to	file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for	Transfers A	Associated Wit	h Certain			
Personal	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details o	on the elec	tronic filing of	this form,			
visit www	urs.gov/efile and click on e-file for Charities & Nonprofits	·							
Part I	Automatic 3-Month Extension of Time	. Only s	ubmit original (no copies ne	eded)					
A corpora	ation required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete					
Part I onl	y					▶ □			
All other	corporations (including 1120-C filers), partnerships, REM	ICs, and ti	rusts must use Form 7004 to reques	st an exten	sion of time				
to file inc	ome tax returns.			Enter file	r's identifying	number			
Type or	Name of exempt organization or other filer, see instru-	ctions.		Employer	identification	number (EIN) or			
print						,			
•	GROUT MUSEUM, INC.				42-133	3059			
File by the due date for	Number, street, and room or suite no. If a P.O. box, si	ee instruc	tions.	Social se	curity number	(SSN)			
filing your	your 503 SOUTH STREET								
return See instructions	See See See								
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WATERLOO, IA 50701								
									
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 1			
	The second secon		,		•				
Applicat	on	Return	Application			Return			
ls For		Code	Is For			Code			
	or Form 990-EZ	01	Form 990-T (corporation)			07			
Form 990		02	Form 1041-A			08			
	20 (individual)	03	Form 4720 (other than individual)			09			
Form 990		04	Form 5227		100	10			
)-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11			
	0-T (trust other than above)	06	Form 8870			12			
10.111.00	BILLIE BAILEY								
• The b	ooks are in the care of ▶ 503 SOUTH STREI	ET - 1	WATERLOO, IA 50701						
	none No. ► 319-234-6357		Fax No. ▶						
•	organization does not have an office or place of business	s in the Ur							
	is for a Group Return, enter the organization's four digit			f this is fo	r the whole are	oup, check this			
box 🕨	. If it is for part of the group, check this box	,							
	equest an automatic 3-month (6 months for a corporation				''				
	February 17, 2015 , to file the exemp				The extension				
ıs f	or the organization's return for:		·						
>	calendar year or								
>	X tax year beginning JUL 1, 2013	, an	dending JUN 30, 2014						
2 f t	he tax year entered in line 1 is for less than 12 months, o	heck reas	on: Initial return	Final retur	n				
	Change in accounting period								
3a If t	his application is for Forms 990-BL, 990-PF, 990-T, 4720	or 6069.	enter the tentative tax, less any						
	nrefundable credits. See instructions.	,		3a	\$	0.			
_	his application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	v refundable credits and			···-			
	imated tax payments made. Include any prior year over			3ь	\$	0.			
	lance due. Subtract line 3b from line 3a. Include your pa								
	using EFTPS (Electronic Federal Tax Payment System).	-		3с	s	0.			
	If you are going to make an electronic funds withdrawal				<u></u>				
instruction		(21,001,00	, , , ,	ui					