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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

2013 Open to Public Inspection

OMB No 1545-0047

<u>A</u>	For th	e 2013 c	alendar year	r, or tax year i	<u>beginning 0</u>	9/01/13	, and ending	08/3	1/14			
В		pplicable	C Name of orga	anization						D	Emplo	yer Identification number
X	Address o	hange			GARAND COI	LLECTORS	ASSOCIATI	ON, INC	<u> </u>			
	Name cha	ange	Doing Busine						·, ·			<u>-2151649</u>
Γ	Initial retu	m	l	,	if mail is not delivered	d to street address)			Room	suite E		one number
F	- -			BOX 7498							816	<u>6-471-2005</u>
	J Terminate	ea .	City or town,	state or province, o	country, and ZIP or fo							
Ļ	Amended	return		KANSAS C		MO 641	16			G	Gross rec	eipts \$ 533,412
	Applicatio	n pending		idress of principal o					Hía) Is this a group r	atium for si	ubordinates? Yes X No
				EN T. RU						,		<u> </u>
			SAME	AS (C)	ABOVE				Н(Б	Are all subordir		
_				- To			-			ir "No," atta	ich a list ((see instructions)
1	Tax-exen		501(0			(insert no)	4947(a)(1) or	527	 [
<u>J</u>	Website			GCA.ORG				 		Group exempts		
K		organization	X Corpora	tion Trust	Association	Other -			L Year of fo	mation 200)]	M State of legal domicile IN
_	Part I		ımmary									
2013	1 7 1	•	_	-	ission or most si	ignificant activiti	es					
N S	3	SEE	SCHEDULE	5 O								
E	<u> </u>											
₩ 5	5			_								
SCANNED MAR 1 7	5 2 (ation discontinue		or disposed o	f more than	25% of its	net assets		
<u>≥</u>	8 3 1			=	overning body (P						3	10
	<u> </u>			· ·	pers of the gove		•				4	10
띃	5 5				d in calendar yea	ar 2013 (Part V	, line 2a)				5	0
%	• !			eers (estimate							6	12
	7a 7	Fotal unre	elated busines	ss revenue fro	m Part VIII, colu	ımn (C), line 12					7a	0
	1 d	Net unrel	ated business	s taxable incor	ne from Form 99	90-T, line 34					7b	0
90										Prior Year	1	Current Year
9	ש א		-	nts (Part VIII, III	•					F 2.4	31	179
	9 1	_		nue (Part VIII, I						534,		530,906
á	[10 I		•		n (A), lines 3, 4,	·				1,	295	2,287
	11 (•		, lines 5, 6d, 8c,		•		-	F 2 C	0.60	40
					11 (must equal F		n (A), line 12)			<u>536,</u>		533,412
					irt IX, column (A			1		3,	060	0
					t IX, column (A)		VEUO					0
ģ	g 15 S	Salaries,	other comper	yee benefits (P					0			
900	2 16a⊦	rotessio	nal fundraisin	g tees (Part IX	(, column (A)3lir	ie Me)K I ∩	2015		-			0
Š	e I	otal tunc	araising exper	nses (Part IX,	column (D), fine	25)	اهما	0		Γ 1 1	000	402 512
_	'' \				, lines 11a-11d,				-	<u>544,</u>		483,513
	I .				ust equal Part.IX		ne 25))		<u>548,</u>		483,513
_		Revenue	less expense	s Subtract line	e 18 from line 12	<u> </u>			Regun	-11, ning of Current		49,899 End of Year
ets	20 1 21 1	Total assi	ets (Part X, lır	ne 16)					Degin	669,		719,208
Ass	21		ilities (Part X,							0007	<u> </u>	717,200
Š	22 1				t line 21 from lin	ne 20				669,	309	719,208
_	Part II		gnature Bi		A INIC ET HOM III	10 20				005,	<u> </u>	110,200
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S	ign		ignature of officer	7	1)-1		· · · · · · · · · · · · · · · · · · ·				Date	
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-		Pnnt/Type	preparer's name	·		Preparer's signatu	ire.	_		Date		r PTIN
Pa	aid					Dinne	11. C.			3/2/15	Check	LJ"
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	se Only	Firm's nar	ne P	6920 PC				20		Firm's	EIN ▶	35-1939627
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<u></u>	ay the IDS	Firm's add			er shown above					Phone	no	260-422-2551 X Ves No

orm 990 (2013) GARAND COLLECTORS ASSOCIATION, INC. 35-2151649	Page 2
Part III Statement of Program Service Accomplishments	X
 Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission 	<u>_</u>
SEE SCHEDULE O	
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes X No
If "Yes," describe these new services on Schedule O	
3 Did the organization cease conducting, or make significant changes in how it conducts, any program	
services?	Yes X No
If "Yes," describe these changes on Schedule O 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
the total expenses, and revenue, if any, for each program service reported	
4a (Code) (Expenses \$ 56,558 including grants of \$) (Revenue \$	48,956)
DISTRIBUTION OF DOCUMENTARY IN DVD FORM, WITH ADDITIONAL EXPENSE FOR PRODUCTION AND DUPLICATION. DVD IS ADVERTISED IN THREE NATION	
PUBLICATIONS TO RAISE AWARENESS OF THE ENTITY, AS WELL AS GENERAL	
-	
4b (Code) (Expenses \$ 100,399 including grants of \$) (Revenue \$	2,720)
PUBLISH QUARTERLY JOURNAL- SPONSORING EVENTS TO PROMOTE THE HISTO	
EXCHANGE OF INFORMATION BETWEEN COLLECTORS OF THE U.S. RIFLE. SEF	₹VES
APPROXIMATELY 19,185 MEMBERS.	
4c (Code) (Expenses \$ 47,298 including grants of \$) (Revenue \$	27,200)
BOOK-BEST OF GCA JOURNAL.	
At Other Charles Other In Other	
4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$,
4e Total program service expenses ► 204, 255	
AA	Form 990 (2013)

-orm 990 (2013	GARAND	COLLECIONS	ASSOCIATION,	TIAC.	33-213
Part IV	Checklist of	Required Sched	lules		

	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Χ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C,			
	Part III	5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		_X_
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 169 if "Yes," complete Schedule D, Part VIII	11c		_X_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			•
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_X_
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u>X</u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		<u>X</u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		_X_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	ļ		
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Χ
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	į		
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		_X_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Checklist of Required Schedules (continued)

	•		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Χ
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
	on Part IX, column (A), line 2º If "Yes," complete Schedule I, Parts I and III	22		Χ
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		İ	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b		1	
	through 24d and complete Schedule K If "No," go to line 25a	24a		<u>X</u>
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 defease any tax-exempt bonds?	_24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	ļ		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	!		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		-
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any		1	
	current or former officers, directors, trustees, key employees, highest compensated employees, or		i	37
	disqualified persons? If so, complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	27		Х
20	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<u></u>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		ŧ	
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	200	ŧ	_X
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		
b	Schedule L, Part IV	28b		Χ
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	_X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Χ
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Χ
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32	1	Χ
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	Ī		
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Χ
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	1	ŀ	
	or IV, and Part V, line 1	34		Χ
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			_
	Part VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

Form	990 (2013) GARAND COLLECTORS ASSOCIATION, INC. 35-2151649		Р	age 5
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			Ш.
	1 1 -		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 2	_		É
þ	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	_		į
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			ĺ
	reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			Ė
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	-		Ė
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			.,
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	40		Х
b	If "Yes," enter the name of the foreign country	4a		$\overline{}$
D	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as chantable contributions?	6a		Х
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		ļ
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		İ
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		<u>:</u>
9	Sponsoring organizations maintaining donor advised funds.	-		
a	Did the organization make any taxable distributions under section 4966?	9a	1	:
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		1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
11	Section 501(c)(12) organizations. Enter]	1	
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O		1	
þ	Enter the amount of reserves the organization is required to maintain by the states in which		I	
	the organization is licensed to issue qualified health plans	-	1	
C	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
DAA	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990	(2013)

Form	1990 (2013) GARAND COLLECTORS ASSOCIATION, INC. 35-2151649		F	Page 6
	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and	d for a "N		uge e
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Se			_
	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 10			
	If there are material differences in voting rights among members of the governing body, or			Ī
	if the governing body delegated broad authority to an executive committee or similar			Ī
	committee, explain in Schedule O			ŧ
b	Enter the number of voting members included in line 1a, above, who are independent 1b 10			•
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			1
	any other officer, director, trustee, or key employee?	2		Ιx
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	Χ	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
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	Х	1
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Χ	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	ode)		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		<u> </u>
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	<u> </u>
. b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	<u>X</u>	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	1	37	
4.0	describe in Schedule O how this was done	12c	X	,,
13	Did the organization have a written whistleblower policy?	13		X
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by	14	X	
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	150		v
b	Other officers or key employees of the organization	15a 15b		X
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	130		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a	i	Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	130		
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b	•	
Sec	tion C. Disclosure	1 100		
17	List the states with which a copy of this Form 990 is required to be filed ► IN			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website 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, and			
	financial statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ JAMES SPAWN 1912 CLAY ST			
NC	ORTH KANSAS CITY MO 64116 83	16-47	1-2	005

• Form 990 /2013) GARAND COLLECTOF	S ASSOCIATION.	TNC.	35-2151649	Page 7
	Compensation of Officers				
•	Independent Contractors				
	Check if Schedule O contain	ns a response or note to	any line	in this Part VII	

Section A.	Officers Directors	Tructore Key Employees	and Highest Compensated	Employees
Section A.	Officers, Directors,	Trustees. Nev Employees.	. and midnest Compensated	i cimpiovee:

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.

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

(A) Name and Title	(B) Average hours per week (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations	
(1) JAMES ADELL											
i	10.00										
DIRECTOR	0.00	X	-					0	0	0	
(2) MICHAEL BERNAZZA											
D.T.D.E.C.M.O.D.	10.00	X						0	0	0	
DIRECTOR (3) ANDREW HALL	0.00	├^			-				0	0	
(3) ANDREW HALL	5.00										
DIRECTOR	0.00	X						0	0	0	
(4) ANTHONY PUCCI, J		1	Ì			-		<u></u>			
(4)711(11101(1 2 0 0 0 1)	10.00				ļ						
CHAIRMAN	0.00	X	ĺ	Х				0	0	0	
(5) DON KEMPS										_	
	5.00										
DIRECTOR	0.00	X		<u> </u>				0	. 0	0	
(6) DAVID H. MCCLAIN	 				1						
	10.00										
DIRECTOR	0.00	X	ļ	ļ				0	0	0	
(7) STEVEN T. RUTLED											
DODGE DEVE	10.00	7		\ _V				_	0	0	
PRESIDENT (8) THOMAS S. RUTLED	0.00	Х	├	X	-		_	0			
(8) INOMAS S. RUILEL	5.00				l						
DIRECTOR	0.00	X				1		0	0	0	
(9) ROBERT SEIJAS	""	1	t		\vdash		_				
(-,1.022111 2220110	10.00			l			•				
JOURNAL EDITOR	0.00	X						0	0	0	
(10) FRANK TODARO											
	5.00										
DIRECTOR	0.00	X	<u> </u>	oxdot		$ldsymbol{ldsymbol{ldsymbol{eta}}}$	L_	0	0	0	
(11) JAMES SPAWN						ĺ					
	40.00						ļ		_		
SECRETARY/TREAS	0.00		<u> </u>	X	l		l	0	0	Form 990 (2013)	

10925001 Page **8**

(A) Name and title		(B) (C) Average hours per (do not check more than one box, unless person is both ar officer and a director/frustee) hours for (D)						ne an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the		
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)		organiza and rela organizat	tion ted
(12)													
(13)													
(14)													
(15)			1										
(16)													
(17)													
(18)													· · · · · · · · · · · · · · · · · · ·
(19)													
1b c d	Sub-total Total from continuation sheet Total (add lines 1b and 1c)	ets to Part VII, S	ectio	on A				> > >					
2	Total number of individuals (increportable compensation from	•		to th	ose	liste	d abo	ve)	who received more than \$1	00,000 in			Voo l No
3	Did the organization list any fo employee on line 1a? If "Yes," For any individual listed on line organization and related organ	complete Schedu 1a, is the sum o	ile J f repo	for s ortat	uch i	ndıv mpe	idual ensat	ıon	and other compensation from			3	Yes No
5	individual Did any person listed on line 1 for services rendered to the or	a receive or accru	ie co	mpe	nsat	ion f	rom a	any	unrelated organization or inc	dividual		5	X X
Sect 1	tion B. Independent Contractor Complete this table for your five	e highest compei	nsate	ed inc	depe	nder	nt cor	ntra	ctors that received more tha	n \$100,000 of			
	compensation from the organiz	zation Report cor (A) I business address	nper	satio	on to	r the	cale	nda		the organization's tax year (B) tion of services		Cor	(C)
	TTACHE INTERNATIONA ORTH KANSAS CIT) 6	41			.2 (AY ST ADMINISTRATION	<u> </u>			108,000
-													
									· · · · · ·				
2	Total number of independent of								e listed above) who				
DAA	received more than \$100,000									1		For	n 990 (2013)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue (C) Total revenue Unrelated exempt function excluded from tax under sections business revenue 512-514 revenue 1a Program Service Revenue Contributions, Gifts, Grants Program Service Revenue 1a Federated campaigns **b** Membership dues 1b 1c c Fundraising events 1d d Related organizations 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 179 1f g Noncash contributions included in lines 1a-1f 179 h Total. Add lines 1a-1f Busn Code 900099 451,773 451,773 2a MEMBERSHIP DUES 50,771 900099 50,771 b PROMOTIONAL ITEMS 511120 22,754 22,754 BOOK INCOME 900099 2,888 2,888 CONVENTION INCOME 511120 2,720 2,720 GCA JOURNAL f All other program service revenue 530,906 Total. Add lines 2a-2f Investment income (including dividends, interest, 2,287 2,287 and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 5 (i) Real (II) Personal 6a Gross rents b Less rental exps Rental inc or (loss) Net rental income or (loss) Gross amount from (i) Secunties (ii) Other sales of assets other than inventor **b** Less cost or other basis & sales exps Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 Less: direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less. direct expenses c Net income or (loss) from gaming activities \blacktriangleright 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code 40 40 11a MISCELLANEOUS b C All other revenue Total. Add lines 11a-11d ▶ 40 533,412 530,946 2,287 Total revenue. See instructions

Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must co Check if Schedule O contains a respo	•		lete column (A)	<u> </u>
	ot include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
•	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				,
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
c	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)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
o	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
'' a	Management	128,000			
b	Legal	15,450			
c	Accounting	3,375		· · · · · · · · · · · · · · · · · · ·	
d	Lobbying	70.0			
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
J	(A) amount, list line 11g expenses on Schedule O)	2,000			
12	Advertising and promotion	17,050	*		
13	Office expenses	30,770			
14	Information technology	5,468			
15	Royalties		-		
16	Occupancy				
17	Travel	12,863			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	16,088			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	2,126			
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	GCA JOURNAL	100,399			
b	BOOK - BEST OF GCA JOURNA	47,298			
C	POSTAGE	31,342			
đ	VIDEO PROJECT	30,228			
е	•	41,056		_	
25	Total functional expenses. Add lines 1 through 24e	483,513	0	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation Check here ► if				

Form 990 (2013) GARAND COLLECTORS ASSOCIATION, INC. 35-2151649

Page **11**

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 98,873 96,256 1 Cash-non-interest bearing 573,053 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 10a other basis Complete Part VI of Schedule D b Less accumulated depreciation 10b 10c 11 11 Investments—publicly traded securities 12 Investments-other securities. See Part IV, line 11 12 13 13 Investments-program-related See Part IV, line 11 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 669,309 719,208 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 17 Accounts payable and accrued expenses 18 Grants payable 18 Deferred revenue 19 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 of Schedule D 0 0 26 Total liabilities. Add lines 17 through 25 X and Organizations that follow SFAS 117 (ASC 958), check here or Fund Balances complete lines 27 through 29, and lines 33 and 34. <u>669,30</u>9 719,208 27 Unrestricted net assets 27 Temporarily restricted net assets 28 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund det 32 Retained earnings, endowment, accumulated income, or other funds 32 719,208 669,309 Total net assets or fund balances 33 719,208 669,309 Total liabilities and net assets/fund balances

Form 990 (2013)

Form	990 (2013) GARAND COLLECTORS ASSOCIATION, INC. 35-2151649			Pa	ge 12		
Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI				1 412		
1	1 Total revenue (must equal Part VIII, column (A), line 12)						
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u>513</u>		
3	Revenue less expenses Subtract line 2 from line 1	3			<u>899</u>		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6	69,	<u> 309</u>		
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Pnor period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9					
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line						
	33, column (B))	10	7	19,	208		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				Ш.		
				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 on a separate basis, consolidated basis, or both.						
	X 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				ĺ		
	separate basis, consolidated basis, or both.						
	Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				ŀ		
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?						
	If the organization changed either its oversight process or selection process during the tax year, explain in						
	Schedule O						
3a	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in						
	the Single Audit Act and OMB Circular A-133?						
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				_		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3ь		<u> </u>		
			For	m 990	0 (2013)		

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

ivaine	or the organi	ZALIUIT	ļ	Employer	identification number
G	חואמםא	COLLECTORS ASSOCIATION, INC.		35-2	151649
	irt I	Organizations Maintaining Donor Advised Fur	nds or Other Similar Funds or Ad		
		Complete if the organization answered "Yes" to F			
			(a) Donor advised funds	(b) Funds and other accounts
1	Total nun	nber at end of year			
2	Aggregat	e contributions to (during year)			
3	•••	e grants from (dunng year)			
4		e value at end of year			
5		rganization inform all donors and donor advisors in writing that t	he assets held in donor advised		-
		the organization's property, subject to the organization's exclus			Yes No
6		rganization inform all grantees, donors, and donor advisors in w	-		
_		hantable purposes and not for the benefit of the donor or donor			
	-	g impermissible private benefit?			Yes No
Pa	rt II	Conservation Easements.	· · · · · · · · · · · · · · · · · · ·		
		Complete if the organization answered "Yes" to F	orm 990, Part IV, line 7		
1	Purpose(s) of conservation easements held by the organization (check a	li that apply).		
	`	ervation of land for public use (e.g., recreation or education)	Preservation of an historically impo	ortant land	d area
	-	ection of natural habitat	Preservation of a certified historic		
		ervation of open space			
2		lines 2a through 2d if the organization held a qualified conserve	ation contribution in the form of a conservati	on	
	•	t on the last day of the tax year			Held at the End of the Tax Year
а	Total nun	nber of conservation easements		2a	
b		eage restricted by conservation easements		2b	1
C		of conservation easements on a certified historic structure include	ded in (a)	2c	
d		of conservation easements included in (c) acquired after 8/17/06	• •		
_		tructure listed in the National Register	,, = ,, = ,, = ,	2d	
3		of conservation easements modified, transferred, released, extir	nguished, or terminated by the organization	during the	
•	tax year I		·g		
4	-	of states where property subject to conservation easement is loc	cated >		
5		organization have a written policy regarding the periodic monitor			
		, and enforcement of the conservation easements it holds?	, map a man man man man man man man man man m		Yes No
6		volunteer hours devoted to monitoring, inspecting, and enforcing	o conservation easements during the year		
•	•	tolarios, riodro actorios to morniornig, moposinig, and crimoren	g conservation casemente daring the year		
7	Amount o	of expenses incurred in monitoring, inspecting, and enforcing co	nservation easements during the year		
•	▶ \$	respended medica in mornioring, inspecting, and americing ec	inservation observer adming the year		
8	•	th conservation easement reported on line 2(d) above satisfy the	e requirements of section 170(h)(4)(B)		
•		ction 170(h)(4)(B)(ii)?	2 (aquilemente et 2001.011 77 e(17)(17)(2)		Yes No
9	• • •	II, describe how the organization reports conservation easemer	nts in its revenue and expense statement, ar	nd	
•		sheet, and include, if applicable, the text of the footnote to the or	· · · · · · · · · · · · · · · · · · ·		
		ion's accounting for conservation easements	3		
Pa	ırt III	Organizations Maintaining Collections of Art,	Historical Treasures. or Other S	imilar A	Assets.
	-	Complete if the organization answered "Yes" to F			
1a	If the ora	anization elected, as permitted under SFAS 116 (ASC 958), not	to report in its revenue statement and balar	nce sheet	
	works of	art, historical treasures, or other similar assets held for public ex	khibition, education, or research in furtheran	ce of	
	public se	rvice, provide, in Part XIII, the text of the footnote to its financial	statements that describes these items		
ь	•	anization elected, as permitted under SFAS 116 (ASC 958), to r		sheet	
	•	art, historical treasures, or other similar assets held for public ex	•		
		rvice, provide the following amounts relating to these items	, ,		
	•	nues included in Form 990, Part VIII, line 1		•	\$
		ts included in Form 990, Part X		•	\$
2	• •	anization received or held works of art, historical treasures, or o	ther similar assets for financial dain provide	the	-
-	_	amounts required to be reported under SFAS 116 (ASC 958) re	· · · · · · · · · · · · · · · · · · ·		
•	•	s included in Form 990, Part VIII, line 1	namy to these items		\$
a b		cluded in Form 990, Part X			Ψ • \$
		Reduction Act Notice, see the Instructions for Form 990.			φ Schedule D (Form 990) 2013
					** ***

Sche	dule D (Form 990) 2013 GARAND C	OLLECTORS A	ASSOCIATION,	INC.	35-2	151649	Page 2
Pa	rt III Organizations Maintainir	g Collections of	Art, Historical Tre	easures,	or Other	Similar Assets	(continued)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other records,	check any of the follow	ing that are	a significar	nt use of its	
а	Public exhibition	d 🗍	Loan or exchange prog	ırams			
b	一	e 🗌	Other	,			
c	Preservation for future generations						
4	Provide a description of the organization's co	ollections and explain t	now they further the org	anızatıon's e	xempt pur	pose in Part	
	XIII.	·	, ,				
5	During the year, did the organization solicit of	or receive donations of	art, historical treasures	, or other sin	nılar		
	assets to be sold to raise funds rather than t	o be maintained as pa	rt of the organization's o	collection?			Yes No
Pa	ert IV Escrow and Custodial Ar	rangements.					
	Complete if the organization	n answered "Yes	" to Form 990, Parl	t IV, line 9	, or repo	rted an amount o	n Form
	990, Part X, line 21.					· · · · · · · · · · · · · · · · · · ·	
1a	Is the organization an agent, trustee, custod	ian or other intermedia	ry for contributions or o	ther assets r	not		
	included on Form 990, Part X?						Yes No
b	If "Yes," explain the arrangement in Part XIII	and complete the folio	owing table				
							Amount
С	Beginning balance					1c	
đ	Additions during the year					1d	·
е	Distributions during the year					1e	
f	Ending balance					1f	
	Did the organization include an amount on F	·					∐ Yes ☐ No
	If "Yes," explain the arrangement in Part XIII	Check here if the exp	lanation has been provi	ided in Part)	KIII		
Pa	ert V Endowment Funds.		" to Form 000 Dod	. IV. I.m. a. 4.	^		
	Complete if the organization						1
	B ()	(a) Current year	(b) Pnor year	(c) Two ye	ars back	(d) Three years back	(e) Four years back
	Beginning of year balance						
	Contributions						
С	Net investment earnings, gains, and						
	losses						
	Grants or scholarships						+
e	Other expenditures for facilities and						
•	programs Administrative expenses						
,	End of year balance						
2	Provide the estimated percentage of the cur	rent year end halance	(line 1g. column (a)) he	ld as			<u> </u>
- а	Board designated or quasi-endowment ▶	%	(inte 1g, solution (a)) the				
	Permanent endowment ▶ %						
C	Temporanly restricted endowment ▶	%					
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%.					
3a	Are there endowment funds not in the posse		on that are held and adi	ministered fo	r the		
	organization 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	Schedule R?				3b
_4	Describe in Part XIII the intended uses of the	e organization's endow	ment funds				
Pa	art VI — Land, Buildings, and Equ	=					
	Complete if the organization	n answered "Yes'	<u>' to Form 990, Part</u>	: IV, line 1	<u> 1a. See</u>	Form 990, Part X	, line 10
	Description of property	(a) Cost or other I	basis (b) Cost or o	ther basis	(c) /	Accumulated	(d) Book value
		(investment)	(othe	er)	de	epreciation	<u> </u>
1a	Land						
b	Buildings				ļ		
С	Leasehold improvements			:			······································
d	Equipment				<u> </u>		
	Other	_ <u>L</u>			<u> </u>		
Tota	 Add lines 1a through 1e (Column (d) must of 	equal Form 990, Part 🕽	(, column (B), line 10(c))		▶	

Schedule D (Form 990) 2013

Schedule D (F	orm 990) 2013 GARAND COLLECTORS ASS	OCIATION, INC.	35-2151649	Page 3
Part _. VII	Investments—Other Securities.			
	Complete if the organization answered "Yes" to f		11b See Form 990, Part	t X, line 12.
	(a) Description of security or category	(b) Book value	(c) Method of va	
	(including name of security)		Cost or end-of-year	market value
(1) Financial of	derivatives			
(2) Closely-he	ld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	n (b) must equal Form 990, Part X, col. (B) line 12.) ▶			· · · · · · · · · · · · · · · · · · ·
Part VIII	Investments—Program Related.		<u> </u>	
1 die vier	Complete if the organization answered "Yes" to F	Form 990 Part IV line	11c See Form 990 Part	X line 13
	(a) Description of investment	(b) Book value	(c) Method of vi	
	(a) Description of Intestitions	(b) book value	Cost or end-of-year	
<u> </u>				
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
_(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 13) ▶			
Part iX	Other Assets.			
	Complete if the organization answered "Yes" to f	Form 990, Part IV, line	11d See Form 990, Part	X, line 15
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)		•••		
(9)				
-	n (b) must equal Form 990, Part X, col (B) line 15)		>	
Part X	Other Liabilities.			 ,
	Complete if the organization answered "Yes" to I	Form 990. Part IV. line	11e or 11f. See Form 99	0. Part X.
	line 25			-,
1.	(a) Description of liability	(b) Book value		······································
	income taxes			
	income taxes			
(2)				
(3)		- 		
(4)				
(5)				
(6)	 			
_(7)				
(8)				
_(9)				
Total. (Column	n (b) must equal Form 990, Part X, col (B) line 25)	1		
2. Liability for	uncertain tax positions. In Part XIII, provide the text of the footnotes	ote to the organization's finar	ncial statements that reports the	_
organization's	liability for uncertain tax positions under FIN 48 (ASC 740) Che	ck here if the text of the footr	note has been provided in Part)	(III

DAA

GARAND COLLECTORS ASSOCIATION, INC. 35-2151649 Schedule D (Form 990) 2013 <u>Page</u> **4** Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains on investments 2a b Donated services and use of facilities 2b 2c c Recovenes of pnor year grants 2d d Other (Describe in Part XIII) 2e e Add lines 2a through 2d Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b 4b b Other (Describe in Part XIII) c Add lines 4a and 4b 4c 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Part XII Complete if the organization answered "Yes" to Form 990, Part IV, line 12a 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities 2a 2b **b** Prior year adjustments 20 c Other losses d Other (Describe in Part XIII) 2d Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b b Other (Describe in Part XIII) 4c c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information PART X - FIN 48 FOOTNOTE

THE ASSOCIATION IS EXEMPT FROM INCOME TAX UNDER SECTION 501(C)(7) OF THE INTERNAL REVENUE CODE AND HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A) OF THE INTERNAL REVENUE CODE. MANAGEMENT HAS ANALYZED THE ASSOCIATION'S TAX POSITIONS TAKEN ON INCOME TAX RETURNS FOR ALL OPEN TAX YEARS (GENERALLY AUGUST 31, 2011 AND LATER YEARS) AND HAS CONCLUDED THAT NO PROVISION FOR INCOME TAX WOULD BE REQUIRED UNDER THE ASSOCIATION'S FINANCIAL STATEMENTS.

Part XIII Supplemental Information (continued)

Page 5

SCHEDULE L

Name of the organization

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

► See separate instructions.

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

OMB No 1545-0047

Inspection

Employer identification number

GARAND COLLECTORS ASSOCIATION, INC. 35-2151649 Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (d) Corrected? (b) Relationship between disqualified person and (a) Name of disqualified person (c) Description of transaction organization No (1) (2) (3) (4) (5) (6) 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (a) Name of interested person (b) Relationship (c) Purpose of (d) Loan to (e) Onginal (f) Balance due (g) In default? (h) Approved (i) Written with organization loan or from the principal amount by board or agreement? org? committee? To From Yes No Yes No No (2) (5)_ (6) (9) (10)Total ▶ \$ Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27 (c) Amount of assistance (e) Purpose of assistance (a) Name of interested person (b) Relationship between interested (d) Type of assistance person and the organization (1) (2) (3) (4) (5) (6) (7) (8) (9)

Part IV	Business Transactions Involving In Complete if the organization answered "Yes" or		28h or 28c			uge .
(a) Name of interested person		(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	of	Sharing org enues?
(1) JAMES	SPAWN	SECRETARY/TREAS		SEE BELOW	Yes	No X
(2)	JIANN	SECRETARY TREAS		JOHN BRION	_	 ^
(3)						
(4)						
(5)					_ _	ــــ
(6)					-	 —
(7)					-	╁
(8) (9)		-			+-	\vdash
(10)						1
Part V	Supplemental Information Provide additional information for responses to	questions on Schedule L (se	e instructions)			
SCHE	DULE L, PART V - ADDITION	AL INFORMATION	I			
_JIM S	SPAWN, APPOINTED AS SECRE	TARY/TREASUREF	R BY THE GCA	A BOARD, IS A		
SHARE	EHOLDER OF ATTACHE INTERN	ATIONAL, INC.,	WHO PROVI	DES ADMINISTRATIO	N	
AND (OVERALL MANAGEMENT SERVIC	ES FOR GCA UNI	ER CONTRACT	T. THIS RELATIONS	HIP	
WAS E	ESTABLISHED IN 2004. THIS	APPOINTMENT T	O SECRETARY	//TREASURER, A		
NONVO	OTING POSITION, CAME AFTE	R GCA AND ATTA	CHE HAD ENT	TERED INTO THEIR		
BUSIN	NESS RELATIONSHIP. SINCE	JIM WAS ALREAD	Y MANAGING	THE DAY TO DAY		
AFFA	IRS FOR GCA, THIS TITILE	ADDED CONVENIE	NCE AND EXE	PEDIENCY FOR HIM	TO	
CONDU	UCT BUSINESS FOR GCA.					
		<u> </u>				
						_

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Open to Public

Inspection

OMB No 1545-0047

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number INC GARAND COLLECTORS ASSOCIATION,

35-2151649

FORM 990 - ORGANIZATION'S MISSION

TO EXCHANGE INFORMATION AND EXPAND KNOWLEDGE OF THE U.S. RIFLE, CALIBER.30, M1; TO PRESERVE AND PUBLICIZE THE HISTORY OF THE RIFLE AND ITS INVENTOR JOHN C. GARAND. TO ASSIST AND ENCOURAGE NEW COLLECTORS; TO ASSIST AUTHORS IN WRITING NEW REFERENCE WORKS; TO ASSIST MEMBERS IN THEIR COLLECTING; AND TO ENCOURAGE COMPETITIVE AND RECREATIONAL SAFE SHOOTING OF THE RIFLE.

FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS THE BYLAWS WERE AMENDED FOR THE INSERTION OF CONFLICT OF INTEREST, AND DOCUMENTATION RETENTION AND DESTRUCTION POLICIES, CHANGE IN INDIANA REGISTERED ADDRESS AND CHANGE IN MEMBERSHIP DUES COLLECTION CYCLE.

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS MEMBERSHIP IN THE CORPORATION SHALL BE OPEN TO ADULTS OF GOOD CHARACTER, WITHOUT REGARD TO RACE, RELIGION OR NATIONAL ORIGIN, UPON WRITTEN APPLICATION, ACCEPTANCE OF THE CODE OF CONDUCT PRINTED ON THE APPLICATION, AND PAYMENT OF ANNUAL DUES. ALL REGULAR MEMBERSHIPS SHALL EXTEND 12 MONTHS. THE CORPORATION MAY FROM TIME TO TIME OFFER LIFE OR MULTI-YEAR MEMBERSHIPS.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS DIRECTORS ARE ELECTED BY AND FROM THE MEMBERSHIP FOR A TERM OF FOUR YEARS.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE 990 IS PROVIDED TO THE EXECUTIVE DIRECTOR, PRESIDENT, AND TREASURER FOR REVIEW.

Page 2

Name of the organization

GARAND COLLECTORS ASSOCIATION, INC.

Employer identification number 35-2151649

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
BOARD MEMBERS ARE EXPECTED TO EXERCISE THEIR AUTHORITY FOR THE SOLE BENEFIT
OF THE CORPORATION. ANY USE OF A BOARD MEMBER'S POSITION TO BENEFIT HIMSELF
OR HERSELF, OR HIS OR HER FAMILY OR BUSINESS INTERESTS, IS INAPPROPRIATE.
FULL DISCLOSURE SHOULD BE MADE OF ANY OCCURENCES OF POTENTIAL CONFLICT,
FINANCIAL OR OTHERWISE.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION DISCLOSURES ARE AVAILABLE UPON REQUEST.

Form 8868

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

(Rev. January 201	14)	▶ File	a senarate	application for each return.					
S			•	its instructions is at www.		868.		ł	
		tomatic 3-Month Extension, comple							▶ X
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part (bn page 2 of this form)									
•	•	lessyou have already been granted an		• • • •		868.			
Electronic fil	ina /a fila) Va	. on plantagraphy file Form 9959 if you	i nood o 2 m	earth automatic extension of ti	me to file /f me	nthe	for		
	- •	ا can electronically file Form 8868 if you Form 990-T), or an additional (not autor							
-	=	of time to file any of the forms listed in	•		=		•••		
•		ted With Certain Personal Benefit Contr		•					
		s on the electronic filing of this form, visi		• •	•	rofits	•		
Part I		3-Month Extension of Time.							
A corporation		Form 990-T and requesting an automat			_				
Part I only									▶ 🗌
Ail other corpo	orations (includi	ng 1120-C filers), partnerships, REMICs	s, and trusts	must use Form 7004 to reque	st an extension	of tir	ne	1	
to file income t	tax returns								
					Enter filer's id	entif	ying nun	nber, see	instructions
Type or	Name of exe	mpt organization or other filer, see instr	ructions		Employer ide	ntifica	ation num	iber (EIN)	or
print	CADAND	COLL BOMODO ACCOCLA	m T O N T	TVO	25 215	1 <i>- 1</i>	_		
		COLLECTORS ASSOCIA			35-215				
File by the Sue date for	1	et, and room or suite no If a PO box, OX_7498	see instructi	ons	Social secun	ty nur	nber (SS	N)	
iling your		post office, state, and ZIP code. For a f	foreign addre	es see instructions					
sturn See nstructions	ı •	· ·	64116						
	<u>=</u>								
Enter the Retu	rn code for the	return that this application is for (file a s	eparate app	lication for each return)					01
Application)		Return	Application					Return
ls For			Code	Is For					Code
Form 990 or	Form 990-EZ		01	Form 990-T (corporation)					07
Form 990-BI	<u> </u>		02	Form 1041-A					8
Form 4720 (03	Form 4720 (other than indiv	(dual)				09
Form 990-PI			04	Form 5227					10
	(sec. 401(a) or		05	Form 6069					11
F01111 990-1	(trust other than	JAMES SPAWN	06	Form 8870					12
		1912 CLAY ST							
The books a	re in the care of I	NORTH KANSAS CITY					МС	0 641	16
Telephone	No ▶ 81	6-471-2005	FAX No	•					
If the organ	nization does no	ot have an office or place of business in	the United S	States, check this box					▶ 🗌
 If this is for 	r a Group Retur	n, enter the organ <u>iza</u> tion's four digit Gro	oup Exemption	on Number (GEN)	If this is	5			
	roup, check this		the group, ch	eck this box	and attach				
		of all members the extension is for.							
		3-month (6 months for a corporation req							
	•	, to file the exempt organization return	for the orga	nization named above. The ex	tension is				
	rganızation's rei calendar year								
	calelidal year _	or							
	tax vear beginn	ing 09/01/13 , and ending (18/31/	1 4					
		line 1 is for less than 12 months, chec			al return				
	nange in accour		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
		forms 990-BL, 990-PF, 990-T, 4720, or	6069, enter	the tentative tax, less any			-		
	dable credits. S					3a_	\$		0
b If this ap	plication is for F	forms 990-PF, 990-T, 4720, or 6069, er	nter any refu	ndable credits and					·
<u>estimate</u>	d tax payments	made Include any prior year overpayn	nent allowed	as a credit.		3b	\$		0
c Balance	due. Subtract	line 3b from line 3a. Include your payme	ent with this t	form, if required, by using			_	_	
		eral Tax Payment System) See instruct				3c	\$		0
Caution, If you a	are going to make	an electronic funds withdrawal (direct debit) v	with this Form	8868, see Form 8453-FO and Form	n 8879-EO for na	vment	instruction	ne	