

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-EZ** 

## **Short Form Return of Organization Exempt From Income Tax**

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

OMB No 1545-1150 2014

Open to Public

Department of the Treasury

Do not enter social security numbers on this form as it may be made public.

Internal Revenue Service Information about Form 990-EZ and its instructions is at www.irs.gov/form990.						mobrocott			
Α	For the	e 2014 calend	dar year, or tax year beginning , and ending						
В	Check if a	applicable	C Name of organization D Employer identification num						
	Address o	change							
	Name cha	ange	Soo Line Historical & Technical Soc	39-	39-1418948				
	Initial retu	ım	Number and street (or P O box, if mail is not delivered to street address)	n/suite	E Telepho	one number			
	Final retu	rn/terminated	39105 Fishermans Ln		906	-523-9209			
	Amended	l return	City or town, state or province, country, and ZIP or foreign postal code		F Group	Exemption			
	Application	on pending	Chassell MI 49916		Numbe	•			
G	Accoun	nting Method	X Cash	H Chec	k <b>▶ X</b> if	the organization is not			
ı	Websit		ch Schedule B						
<u>J</u>	Tax-exe	empt status (cl	neck only one) — X 501(c)(3) 501(c)( )	(Forn	n 990, 990	-EZ, or 990-PF)			
K	Form o	of organization	X Corporation Trust Association Other						
L	Add line	es 5b, 6c, and 7	b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets			· · · · · · · · · · · · · · · · · · ·			
(Par	t II, colu	mn (B) below) a	are \$500,000 or more, file Form 990 instead of Form 990-EZ		▶ \$	41,916			
P	art I	Reven	ue, Expenses, and Changes in Net Assets or Fund Balances (see	the instruc	tions for F	Part I)			
		Check	f the organization used Schedule O to respond to any question in this Part I			X			
	1	Contributions,	gifts, grants, and similar amounts received		1	547			
	2	Program ser	vice revenue including government fees and contracts		2	34,900			
	3	Membership	dues and assessments See Stateme	ent	3	6,467			
	4	Investment i	ncome		4	2			
	5a	Gross amou	nt from sale of assets other than inventory 5a		_				
	b	Less cost o							
9015	C		from sale of assets other than inventory (Subtract line 5b from line 5a)		5c				
	6	•	fundraising events						
ec.	a		e from gaming (attach Schedule G if greater than						
Revenue 🕄	١.	\$15,000)			<b>⊣</b> ∣				
Ğ.	b	Gross incom							
<b>©X</b> .		from fundrais							
C		sum of such	_						
Ų.	C	Less direct	_						
	d		or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract						
	l _	line 6c)			6d				
Ĕ	7a		of inventory, less returns and allowances		_				
	b	Less cost of			┥_ !				
	l _		or (loss) from sales of inventory (Subtract line 7b from line 7a) ue (describe in Schedule O) ue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		7c	<del></del>			
	8		ue (describe in Schedule O)		8	41 016			
_	10			<del>\</del> '	9	41,916			
	11		similar amounts paid (list in Schedule O)	1	10	4,103			
	12	•	of to or for members  er compensation, and employee benefits	13	11	<u> </u>			
ses	13		er compensation, and employee benefits fees and other payments to independent contractors	12	7,446				
ë	14		rent, utilities, and maintenance		14	15,785			
Expenses	15		plications, postage, and shipping						
ш	16		ses (describe in Schedule O)	15 16	38,439 46,570				
	17		ses. Add lines 10 through 16	► 17	112,343				
	18		eficit) for the year (Subtract line 17 from line 9)	<u>'</u>	18	-70,427			
ats	19		r fund balances at beginning of year (from line 27, column (A)) (must agree with		<del>-''° </del>	10,321			
1886			figure reported on prior year's return)		19	220,653			
Net Assets	20	-	es in net assets or fund balances (explain in Schedule O)		20	220,000			
ž	21		21	150,226					
For			r fund balances at end of year Combine lines 18 through 20			- 000 57			

Form 990-EZ (2014) Soo Line Historical & Technical Soc 39-1418948

Ę	Part II	Balance Sheets (see the instructions for P					
	•	Check if the organization used Schedule O t	o respond to any	question in this Part I	I		X
				(A) Beg	ginning of year		(B) End of year
22	Cash, savir	ngs, and investments			67,289	22	3,448
	Land and b				0	23	
		ts (describe in Schedule O)			168,364	24	163,246
	Total asset	•			235,653	25	166,694
_		ities (describe in Schedule O)		<del></del>	15,000	26	16,468
		· · · · · · · · · · · · · · · · · · ·					150,226
		or fund balances (line 27 of column (B) must agr		41 1 1 5 1	220,653	27	130,226
t	Part III	Statement of Program Service Accom	•				_
	<del></del>	Check if the organization used Schedule O t	o respond to any	question in this Part I			Expenses
W	hat is the org	anization's primary exempt purpose?				(Red	quired for section
1	<u>Educate, F</u>	Research, Exchange Information		·		501	(c)(3) and 501(c)(4)
De	scribe the or	ganization's program service accomplishments for	each of its three lai	gest program services,		orga	anizations, optional for
as	measured by	y expenses. In a clear and concise manner, descrit	oe the services prov	rided, the number of		othe	ers )
ре	rsons benefit	ted, and other relevant information for each program	n title.				
28	Printin	ng & Publishing the Soo Magazine, Rese	arching &				
		ng other Soo Line RR Photos and Maps					
	222	.y 0 0.02 000 12.10 12. 1.10000 0.10 1.11p0					
	(Grants \$	) If this amount includes	foreign grants, abo	ak hara		28a	75,670
20			ioreign grants, che	CK Hele		20a	13,010
29	Convent	tion and Annual Meeting					
					<del>,</del>		
	(Grants \$	) If this amount includes	foreign grants, che	ck here	<b>•</b>	29a	14,291
30							
						1 1	
	(Grants \$	) If this amount includes	foreign grants, che	ck here	▶	30a	
31	(Grants \$	) If this amount includes	foreign grants, che	ck here	<b>•</b>	30a	
31	Other prog	ram services (describe in Schedule O)			<u>▶</u>		22.382
	Other prog	ram services (describe in Schedule O) 4,103) If this amount includes	foreign grants, che		• [	31a	22,382 112 343
32	Other prog (Grants \$ Total prog	ram services (describe in Schedule O)  4,103) If this amount includes ram service expenses (add lines 28a through 31a	foreign grants, che	ck here	▶ □	31a 32	112,343
32	Other prog	ram services (describe in Schedule O) 4,103) If this amount includes	foreign grants, che	ck here	▶ □	31a 32	112,343
32	Other prog (Grants \$ Total prog	ram services (describe in Schedule O)  4,103) If this amount includes  ram service expenses (add lines 28a through 31a  List of Officers, Directors, Trustees, and Key E  Check if the organization used Schedule O to res	foreign grants, che mployees (list eac pond to any questio	ck here h one even if not compe n in this Part IV (c) Reportable	(d) Heath ben	31a 32 e instruc	112 , 343 ctions for Part IV)
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Form 990-EZ (2014)

Soo Line Historical & Technical Soc 39-1418948

Pa	Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V	_		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		Yes	No
	detailed description of each activity in Schedule O	33		х
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			{
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O (see instructions)	.34		X
35a		05.		
<b>.</b>	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a 35b		X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,	350		
·	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		x
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
	during the year? If "Yes," complete applicable parts of Schedule N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	_		
b	Did the organization file Form 1120-POL for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
	If "Yes," complete Schedule L, Part II and enter the total amount involved  38b	-{		
39	Section 501(c)(7) organizations Enter Initiation fees and capital contributions included on line 9  39a			
a b	Gross receipts, included on line 9, for public use of club facilities  39b	┪		
	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under	┪		
	section 4911 ▶, section 4912 ▶, section 4955 ▶			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year			[
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed			
	on organization managers or disqualified persons during the year under sections 4912,			
_	4955, and 4958			
a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line  40c reimbursed by the organization			
ρ.	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter			
·	transaction? If "Yes," complete Form 8886-T	40e	1	x
41	List the states with which a copy of this return is filed None			
42a	The organization's books are in care of ▶ C. David Pulse  Telephone no ▶ 90	6-52	23-9	209
	39105 Fishermans Lane			
	Located at ▶ Chassell MI ZIP + 4 ▶ 49	916		,
þ	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country ▶	42b		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and	·		
	Financial Accounts (FBAR)			
С	At any time during the calendar year, did the organization maintain an office outside the U S ?	42c	<u> </u>	X
	If "Yes," enter the name of the foreign country ▶			_
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here			▶
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		1	x
b	completed instead of Form 990-EZ  Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be	44a	_	<u> </u>
ь	completed instead of Form 990-EZ	44b		x
С	Did the organization receive any payments for indoor tanning services during the year?	44c	<del>                                      </del>	X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an	1	1	
_	explanation in Schedule O	44d		-
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	<u></u>	X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ (see instructions)	45b		X

, 1														
Form 990-EZ (	2014)	Soo	<u>Line</u>	Hist	<u>orica</u>	ıl &	Technic	al So	oc 39-14	18948				Page 4
46 Did the	organizat	on ongo	an direct	v or induro	othe in no	lition la	ampaign activitie	bab	alf of an in anno			Γ	Yes	No
	lidates for							s on ben	air or or in oppo	SITION		46	1	x
Part VI	Secti	on 501	(c)(3) oi	rganizat	ions or	าly								
	All sed		1(c)(3) or	ganizatio	ns must	answ	er questions 47	–49b aı	nd 52, and cor	mplete the t	ables for lu	nes		
			roanizati	on used	Schedule	e O to	respond to any	auestia	on in this Part	VI				
													Yes	No
	47 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					47		x						
=					ection 170	)(b)(1)	Άλ(πλ? If "Yes." co	omniete :	Schedule F			48		X
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \													
	," was the		-		-							491	<b>)</b>	<u> </u>
							sated employees							
employ	ees) who	each rec	eived mor	e than \$1	00,000 of	compe	ensation from the					r <del></del>		
	(a) Na	me and tit	le of each e	employee			(b) Average hours per week devoted to position	l co	Reportable mpensation W-2/1099-MISC)	benefit p	i benetits, to employee lans, and impensation	(e) Estima other co		
None		-	<del></del>							delened of	проподлог			
						ļ								
				<del></del>				<u> </u>						
<del></del>					<del></del>									
			<del></del>							ļ				
f Total r	umber of	nther em	niovees n	aid over \$	100.000			<u> </u>	<u> </u>	<u> </u>		<u> </u>		
				•	•	omper	sated independe	nt contra	ictors who each	received mo	re than			
<u>\$100,0</u>							one, enter "None	n	<u> </u>					
	(a) Name	and busi	ness addre	ss of each	independe	nt contr	actor		(b) Typ	e of service		(c) Comp	ensatio	<u> </u>
None														
	_					<del></del>		_						
		<del></del>									<del></del>			
							·							
_							over \$100,000		·				<del></del>	
	e organizat eted Sched		plete Sche	edule A? N	lote. All s	ection	501(c)(3) organiz	ations m	iust attach a			<b>X</b> Y	· □	No
			that I have	examined	this return	ınclud	ing accompanying s	chedules	and statements	and to the bes	t of my knowl			
true, correct, a	and complet	e Declara	ation of pre	parer (othe	than office	er) is ba	sed on all informat	on of whi	ch preparer has a	ny knowledge				
Sign			Val		1/									
Sign		ture of office	or vid P	ulse		Tu	CASUREN	1,	D	ate 8-1	2-11			
Here		or print nam				<u> </u>				<u> </u>				
	Print/Type pr	eparer's na	me			Prep	parer's signature	7 1	T M	Date	Check	, PT	IN .	
Paid	Laurie I	. Aho				\	and My	التتوط	Wy (1)	08/1	3		14326	49
Preparer	Firm's name	<del> </del>	Josep		Daav			PLC			Firm's EIN			
Use Only	Firm's addre			helde										
Mouth IPS	diagram 4		Hough				31-2137				Phone no 9	06-48		$\overline{}$
iviay tile IKS	uiscuss (	iiis ietuff	with the	hichaiei S	HOWII ADO	, ve , 96	ee instructions			<del></del>	<del></del>		Yes 90-F7	No (2014)

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

•

Department of the Treasury Internal Revenue Service Name of the organization

# **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 2014

> Open to Public Inspection

Soo Line Historical & Technical Soc

Employer Identification number 39-1418948

	art l			Status (All organizations				ns
The	orgai	nization is not	a private foundation because	e it is (For lines 1 through 11, o	check only	one box	i.)	
1		A church, co	nvention of churches, or ass	ociation of churches described	ın <b>sectio</b> r	170(b)(	1)(A)(i).	
2		A school des	cribed in section 170(b)(1)(	A)(ii). (Attach Schedule E)				
3		A hospital or	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).					
4	П			d in conjunction with a hospital o				ospital's name
		city, and stat		,				oopitaro marrio,
5				of a college or university owned	or operat	ed by a d	overnmental unit described in	
•	ш		(b)(1)(A)(iv). (Complete Part		or operat	eu by a g	overnmental unit described in	
6				-	4!49			
6				overnmental unit described in s				
7	Ш			substantial part of its support fro	om a gove	ernmenta	I unit or from the general public	;
_			section 170(b)(1)(A)(vi). (C	•				
8				170(b)(1)(A)(vi). (Complete Part				
9	X			l) more than 33 1/3% of its supp				oss
		receipts from	activities related to its exen	npt functions—subject to certain	exceptio	ns, and (2	2) no more than 33 1/3% of its	
		support from	gross investment income ar	nd unrelated business taxable in	icome (le:	ss section	1 511 tax) from businesses	
	_	acquired by t	he organization after June 3	0, 1975 See section 509(a)(2).	. (Comple	te Part III	l)	
10		An organizat	on organized and operated	exclusively to test for public safe	ety See s	ection 5	09(a)(4).	
11				exclusively for the benefit of, to				ses of
				ions described in section 509(a				
				cribes the type of supporting org				
а				ed, supervised, or controlled by				
				o regularly appoint or elect a ma				Δ
			You must complete Part I		ajonty or t	ne unecu	ors or trustees or the supporting	y
b							annania (a) ha ha anna	
-	ш			rised or controlled in connection				
				organization vested in the same	e persons	that con	troi or manage the supported	
			s) You must complete Par					
С				orting organization operated in o				
				tions) You must complete Par				
d	Ш			supporting organization operate				•
				janization generally must satisfy				
		requirement	(see instructions) You mus	t complete Part IV, Sections A	and D, a	nd Part '	V.	
е		Check this be	ox if the organization receive	d a written determination from t	he IRS th	at it is a T	Гуре I, Туре II, Туре III	
		functionally ii	ntegrated, or Type III non-fur	nctionally integrated supporting	organizat	on		
f	Ent	er the number	r of supported organizations					
g	Pro	vide the follov	ving information about the si	ipported organization(s)				<del></del>
(	i) Name	of supported	(II) EIN	(III) Type of organization	(iv) is the c	rganization	(v) Amount of monetary	(vi) Amount of
	org	anization		(described on lines 1-9	listed in you	ır governing	support (see	other support (see
				above or IRC section	docu	ment?	instructions)	instructions)
				(see instructions))	Yes	No		
A)			<del>, ,</del> _,		<del>                                     </del>	.,,_		
•								
B)		····			-			
•								
C)					<del>                                     </del>	-		
,								
D)			-		†			
	_							
E)								
			,				,	
ota	ıl							

<u>e 2</u>

Schedule	e A (Form 990 or 990-EZ) 2014	Soo Line Hi	storical a	& Technic	al Soc 39	9-1418948	Page
Part	Support Schedule fo	r Organizations	Described in S	ections 170(b	)(1)(A)(iv) and	170(b)(1)(A)(v	/i)
	<ul> <li>(Complete only if you of</li> </ul>	checked the box of	on line 5, 7, or 8	of Part I or if the	he organizatior	n failed to quali	fy under
	Part III If the organization	tion fails to qualify	under the tests	s listed below, j	please comple	te Part III.)	•
Sectio	n A. Public Support						
Calendar	year (or fiscal year beginning in) ▶	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
me	fts, grants, contributions, and embership fees received (Do not clude any "unusual grants")						
or	x revenues levied for the ganization's benefit and either paid						

1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge		_				
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	tion B. Total Support	·			- J. I.	<u></u> _	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	-					
9	Net income from unrelated business activities, whether or not the business is regularly carried on				1112-1		
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc	(see instructions)				12	
13	First five years. If the Form 990 is for the	organization's first	, second, third, fou	urth, or fifth tax yea	ar as a section 50°		
	organization, check this box and stop her	e					▶ [

11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc	(see instructions)				12	
13	First five years. If the Form 990 is for the	organization's firs	t, second, third, for	urth, or fifth tax ye	ear as a section 50	1(c)(3)	
	organization, check this box and stop here						▶ 「

organization, check this box and stop here		•
Section C. Computation of Public Support Percentage	•	
		_

14	Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	%
15	Public support percentage from 2013 Schedule A, Part II, line 14	15	%
	AB 4100/		

33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more,

check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

organization b 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line

15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

		$\Box$

▶	

Schedule A (Form 990 or 990-EZ) 2014

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.

Sec	ction A. Public Support	quality under the	e tests listed be	elow, please co	mplete Part II.	)	
_	ndar year (or fiscal year beginning in) ▶	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	· · · · · · · · · · · · · · · · · · ·					- <del></del>
2	grants ")  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	15,504 87,756	12,563 74,056	12,543 85,107	15,891 89,856	41,369	57,048 378,144
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	103,260	86,619	97,650	105,747	41,916	435,192
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	82,756					82,756
С	Add lines 7a and 7b	82,756	-				82,756
8	Public support (Subtract line 7c from line 6)			# # #			352,436
Sec	ction B. Total Support				······································		
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	103,260	86,619	97,650	105,747	41,916	435,192
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	32	46	70	33	2	183
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	32	40	,,			183
С	Add lines 10a and 10b	32	46	70	33	2	183
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 VI)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	103,292	86,665	97,720	105,780	41,918	435,375
14	First five years. If the Form 990 is for the organization, check this box and stop here	<u> </u>		rth, or fifth tax year	as a section 501(	(c)(3)	<b>&gt;</b>
Sec	tion C. Computation of Public Su	pport Percent	age		······································		
15	Public support percentage for 2014 (line 8,		•	ı (f))		15	80.95%
16	Public support percentage from 2013 Sche					16	67.92%
	tion D. Computation of Investme					<del></del>	
17	Investment income percentage for 2014 (li		•	column (f))		17	<u>%</u>
18	Investment income percentage from 2013					18	2 %
19a b	33 1/3% support tests—2014. If the organ 17 is not more than 33 1/3%, check this bo 33 1/3% support tests—2013. If the organ	ox and <b>stop here</b> . T	he organization qu	ualifies as a publici	y supported organ	ization	<b>▶ X</b>
	line 18 is not more than 33 1/3%, check the						▶ □
20	Private foundation. If the organization did						

### Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A. D. and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and com	plete Part V.)		
Sect	ion A. All Supporting Organizations			
1	Are all of the organization's supported organizations listed by name in the organization's governing		Yes	No
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			*********
	(b) and (c) below	3a	į	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and	Ja		
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination	3ь		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)	36		.,
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	2.		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If	3c		
70	"Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4-		
b		4a		
U	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
_	despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
-	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(III) the authority under the organization's organizing document authorizing such action, and (IV) how the action			
	was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (c) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial			
	contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent			
	controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	If "Yes," complete Part I of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
C	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f)			
	(regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting			
	organizations)? If "Yes," answer (b) below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			
	determine whether the organization had excess business holdings )	10ь		

Part IV Supporting Organizations (continued)  11 Has the organization accepted a gift or contribution from any of the following persons?  a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?  b A family member of a person described in (a) above?  c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11a 11b 11c	Yes	No
<ul> <li>a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?</li> <li>b A family member of a person described in (a) above?</li> </ul>	11b	res	ИО
<ul> <li>a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?</li> <li>b A family member of a person described in (a) above?</li> </ul>	11b		
below, the governing body of a supported organization?  b A family member of a person described in (a) above?	11b		
b A family member of a person described in (a) above?	11b		
·			-
Section B. Type I Supporting Organizations			·
1 Did the directors, trustees, or membership of one or more supported organizations have the power to		Yes	No
regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
controlled the organization's activities. If the organization had more than one supported organization,			
describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		ļ
2 Did the organization operate for the benefit of any supported organization other than the supported			
organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
supervised, or controlled the supporting organization	2	<u> </u>	l
Section C. Type II Supporting Organizations	- 1		r
4. Where a manager of the appropriate of a decade or an extended of the format of the first of t		Yes	No
Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
or management of the supporting organization was vested in the same persons that controlled or managed			1
the supported organization(s) Section D. All Type III Supporting Organizations	1		L
Occusion D. An Type in Supporting Organizations		Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	NO
organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		1
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
the organization maintained a close and continuous working relationship with the supported organization(s).	2		1
3 By reason of the relationship described in (2), did the organization's supported organizations have a			
significant voice in the organization's investment policies and in directing the use of the organization's			
income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
supported organizations played in this regard	3		]
Section E. Type III Functionally-Integrated Supporting Organizations			
1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	s)		
a The organization satisfied the Activities Test Complete line 2 below			
b The organization is the parent of each of its supported organizations. Complete line 3 below.			
c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instru-	ctions)		
			·
2 Activities Test Answer (a) and (b) below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
those supported organizations and explain how these activities directly furthered their exempt purposes,			
how the organization was responsive to those supported organizations, and how the organization determined			1
that these activities constituted substantially all of its activities	2a		ļ
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
reasons for the organization's position that its supported organization(s) would have engaged in these			
activities but for the organization's involvement	2b		ļ
3 Parent of Supported Organizations Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
trustees of each of the supported organizations? Provide details in Part VI.	3a		ļ
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b	<u> </u>	<u> </u>

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations	Schedule A (Form 990 or 990-EZ) 2014 Soo Line Historical & Tech	nica	l Soc 39-1418	948 Page 6
other Type III non-functionally integrated supporting organizations must complete Sections A through E  Section A - Adjusted Net Income  (A) Prior Year (A) Prior Year (A) Prior Year (A) Prior Year (optional)  1 Net short-term capital gain 2 Recoveres of prior-year distributions 3 Use of the second of the seco				
Net short-term capital gain   1   2   2   2   3   3   3   3   3   3   3				I
1 Net short-term capital gain 1 2 Recoveres of prior-year distributions 2 3 Other gross income (see instructions) 3 4 Add lines 1 through 3 5 Depreciation and depletion 5 6 Portion of operating expenses paid or incurred for production or collection of gross income of for management, conservation, or maintenance of property held for production of income (see instructions) 7 7 Other expenses (see instructions) 7 8 Adjusted Not Income (subtract lines 5, 6 and 7 from line 4) 8 8 Section B - Minimum Asset Amount (A) Prior Year (B) Current Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short fax year or assets held for part of year) 2 Average monthly value of other non-exempt-use assets = 1 to 1 Total (add lines 7 to 1), and 10 to 1 t	other Type III non-functionally integrated supporting organizations must complete Section	ons A th	rough E	
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8 Minimum Asset Amount (add line 7 to line 6)  8 Current Year  1 Adjusted net income for prior year (from Section A, line 8, Column A)  2 Enter 85% of line 1  3 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)  8 Current Year  Current Year		6		
Section C - Distributable Amount  1 Adjusted net income for prior year (from Section A, line 8, Column A)  2 Enter 85% of line 1  3 Minimum asset amount for prior year (from Section B, line 8, Column A)  4 Enter greater of line 2 or line 3  5 Income tax imposed in prior year  6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)  Current Year  Current Year	7 Recoveries of prior-year distributions	7		· · · · · · · · · · · · · · · · · · ·
1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3 4 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6	8 Minimum Asset Amount (add line 7 to line 6)	8		
2 Enter 85% of line 1 2 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 4 Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 5 5 5 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6		•		Current Year
2 Enter 85% of line 1 2 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 4 Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 5 5 5 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6	1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		<u> </u>
4 Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6 6			<u></u>	
4 Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6 6	3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	•••••••••••••••••••••••••••••••••••••••	
5 Income tax imposed in prior year 5 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6				
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)  6				· · · · · · · · · · · · · · · · · · ·
emergency temporary reduction (see instructions) 6				
	·	6		
			supporting organization (s	see

instructions)

Schedule A (Form 990 or 990-EZ) 2014 Soo Line Historical & Technical Soc 39-1418948  Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Sect	ion D - Distributions			Current Year		
1	Amounts paid to supported organizations to accomplish exempt purpos	ses	<del></del> -	- Garrent real		
2	Amounts paid to perform activity that directly furthers exempt purposes					
	organizations, in excess of income from activity					
3	Administrative expenses paid to accomplish exempt purposes of suppo	orted organizations				
4	Amounts paid to acquire exempt-use assets	ntou organizationo	······································			
-5	Qualified set-aside amounts (prior IRS approval required)	<del></del>	<del></del>			
6	Other distributions (describe in Part VI) See instructions	· · ·		,,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,		
7	Total annual distributions. Add lines 1 through 6		<u>.</u>			
8	Distributions to attentive supported organizations to which the organizations	tion is responsive				
	(provide details in Part VI) See instructions					
9	Distributable amount for 2014 from Section C, line 6	- ****-	<del> </del>			
10	Line 8 amount divided by Line 9 amount	· · · · · · · · · · · · · · · · · · ·	··· ·· ··			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014		
1	Distributable amount for 2014 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2014			,		
	(reasonable cause required-see instructions)					
3	Excess distributions carryover, if any, to 2014					
a						
b	**************************************					
С			***************************************			
d			<del></del>			
е	From 2013		~~····································			
f	Total of lines 3a through e					
	Applied to underdistributions of prior years	· · · · · · · · · · · · · · · · · · ·	<u> </u>			
	Applied to 2014 distributable amount		<del></del>			
i	Carryover from 2009 not applied (see instructions)		······································			
<u></u>	Remainder Subtract lines 3g, 3h, and 3i from 3f		<u> </u>			
4	Distributions for 2014 from Section		***************************************			
	D, line 7 \$					
a	Applied to underdistributions of prior years					
	Applied to 2014 distributable amount					
	Remainder Subtract lines 4a and 4b from 4					
5	Remaining underdistributions for years prior to 2014, if		**************************************			
	any Subtract lines 3g and 4a from line 2 (if amount					
	greater than zero, see instructions).					
6	Remaining underdistributions for 2014 Subtract lines 3h					
	and 4b from line 1 (if amount greater than zero, see					
	instructions)					
7	Excess distributions carryover to 2015. Add lines 3j					
8	and 4c Breakdown of line 7					
	DIEGRADOWII () IIIIE /					
a						
<u>b</u>						
<u>c</u>	Evene from 2012					
`	Excess from 2013					
<u>е</u>	Excess from 2014	<u> </u>		I		

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 Soo Line Historical & Technical Soc 39-1418948

Page 8

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions.)

SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

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

2014

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

rs.gov/form990. Inspection
Employer Identification number

Soo Line Historical & Technical Soc

39-1418948

Form 990-EZ, Part I, Line 16 - Other	с Ехј	penses
Description		Amount
Merchandise		
Cost of Goods Sold	\$	17,025
Soo Magazine		
Cost of Goods Sold	\$	1,190
Expenses		
Supplies	\$	220
Computer Services	\$	487
Annual Meeting	\$	14,291
Board of Directors	\$	20
Promotion	\$	703
Reconcil. Discrepancies	\$	870
Copyright	\$	10
Special projects	\$	1,907
Archives	\$	4,144
Locomotive fund	\$	585
Non-investment Depreciation	\$	5,118
Total	\$	46,570

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

Description	Beg.	of Year	End o	f Year
Other Loans Receivable	\$	5,000	\$	5,000
Equipment & other depreciable assets	\$	202,717	\$	202,717
Less Accumulated Depreciation	\$	39,425	\$	44,543

Description

Cash overdraw

Unsecured Notes and Loans Payable

Schedule O (Form 990 or 990-EZ) (2014)		Page <b>2</b>
Name of the organization	Employer iden	ntification number
Soo.Line Historical & Technical Soc	39-14	18948
Utility deposit \$	72	\$ 72
Total \$	168,364	\$ 163,246
Form 990-EZ, Part II, Line 26 - Other Liabilities		

Form 990-EZ, Part III, Line 31 - All Other Accomplishment
Donations to Colfax & Superior RR Museums and Archives

Beg. of Year End of Year

0 \$

15,000 \$

12,000

4,468

Form **4562** 

Department of the Treasury

**Depreciation and Amortization** 

(Including Information on Listed Property)

Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No 1545-0172

Internal Revenue Service Name(s) shown on return

ldentifying number

Soo Line Historical & Technical Soc 39-1418948 Business or activity to which this form relates Indirect Depreciation Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I Maximum amount (see instructions) 500,000 1 2 Total cost of section 179 property placed in service (see instructions) 2 2,000,000 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions 5 (a) Description of property (b) Cost (business use only) 6 Listed property Enter the amount from line 29 7 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 8 Tentative deduction Enter the smaller of line 5 or line 8 9 9 Carryover of disallowed deduction from line 13 of your 2013 Form 4562 10 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2015 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions) Part III Section A 5,118 17 MACRS deductions for assets placed in service in tax years beginning before 2014 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2014 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (business/investment use (a) Classification of property (e) Convention (f) Method placed in (g) Depreciation deduction period only-see instructions) service 19a 3-year property 5-year property 7-year property d 10-year property 15-year property f 20-year property 25-year property S/L 25 yrs g h Residential rental S/L 27 5 yrs MM property 27 5 yrs MM S/L MM Nonresidential real S/L 39 yrs property ММ S/L Section C—Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs S/L 40-year мм S/L 40 yrs **Summary** (See instructions.) 21 Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 5,118 here and on the appropriate lines of your return Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the 23