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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.

OMB No 1545-0047 2015 Open to Public Inspection

<u>A</u> _	For the		<u>8/31/1</u>	L6		
В	Check if ap	oplicable C Name of organization			D Employer	dentification number
	Address cl	hange GARAND COLLECTORS ASSOCIATION,	INC.			
$\bar{\sqcap}$	Name cha	Doing business as				51649
=		Number and street (or P O box if mail is not delivered to street address)		Room/suite	E Telephone	
	Initial retur			<del> </del>	810-4	171-2005
	Final return terminated	_				
$\Box$	Amended	NORTH KANSAS CITY MO 64116			G Gross recei	ots \$ 529,961
H		r Name and address of principal officer		H(a) Is this a gro	un return for sub	ordinates? Yes X No
L	Application	OTHVER IS ROTHEDON		11(=, 10 0 10 0 9 10	ар (олан тол осо	
		P.O. BOX 7498		H(b) Are all sub		
		NORTH KANSAS CITY MO 64116		If "No,"	'attach a list (s	ee instructions)
<u></u>	Tax-exem		527	j		
J_	Website.	▶ WWW.THEGCA.ORG		H(c) Group exe	mption number	<u> </u>
<u>-</u> -	Form of o	rganization X Corporation Trust Association Other	LY	ear of formation 2	001	M State of legal domicile IN
F	art i	Summary				
		Briefly describe the organization's mission or most significant activities				
_	į.	SEE SCHEDULE O				
2	İ	DIE GOUIDOEE C				
ğ						
Je.	1	. <del>, •••</del>				
Ó	2 (	Check this box $lacktriangle$ if the organization discontinued its operations or disposed of more	e than 25%	of its net assets	, ,	
Activities & Governance	3 1	Number of voting members of the governing body (Part VI, line 1a)			3	_10
€8	4 1	Number of independent voting members of the governing body (Part VI, line 1b)			4	10
<b>*</b>	5 7	Fotal number of individuals employed in calendar year 2015 (Part V, line 2a)			5	0
F#5	6 1	Fotal number of volunteers (estimate if necessary)			6	15
CSC	72.7	Fotal unrelated business revenue from Part VIII, column (C), line 12			7a	0
168	'".				7b	0
	l Di	Net unrelated business taxable income from Form 990-T, line 34		Prior Yea		Current Year
		Contributions and grants (Part VIII, line 1h)	<u> </u>	11101 100	164	56
9			10			
20	9 1	Program service revenue (Part VIII, line 2g)		6,717	527,691	
- <b>₹</b>	10 1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		2,648	2,214	
SCREVENIE	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0		
<u>ir</u>	12 T	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)			9,529	529 <b>,</b> 961
	13 (	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	L	10	9,382	18,363
	14 E	Benefits paid to or for members (Part IX, column (A), line 4)	i			0
w	40.0	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	[			0
xpenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)				0
ĕ	h 1	Total fundraising expenses (Part IX, column (D), line 25)	9-3	<del></del>		<u>-</u>
X	17 (	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) RECEIVED	ĭ¦ F	12	2,768	504,355
		State expenses (Falt IX, Column (A), lines 11a-11d, 111-24e)	isi F	52	2,150	522,718
		otal expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	SOC			
	19 F	Revenue less expenses Subtract line 18 from line 12 FFR 1 6 2017	2,621	7,243 End of Year		
50		L	K -	Beginning of Cui		683,830
See	20 T	Fotal labilities (Part X, line 16)  OGDEN, UT	1 -	67	6 <b>,</b> 587	003,830
Net Assets or	21 1	otal habition (Fall 1), into 20)	' -		0	500 000
		Net assets or fund balances Subtract line 21 from line 20	<u></u> <u>_</u> <u>_</u>	<u> </u>	6 <b>,</b> 587	<u>683,830</u>
	art II	Signature Block				
		nalties of perjury, I declare that I have examined this return, including accompanying schedules a				ledge and belief, it is
tr	ue, corre	ct, and complete Declaration of preparer (other than officer) so based on all information of which	n preparer ha	is any knowledge	- 1	1
					TV	1412017
Sig	an	Signature of officer			Date	
He	_	STEVEN T. RUTLEDGE	PRESI	רות		
116		Type or pnnt name and title	<u> </u>	>11/1 T		
_		Print/Type or print name and title  Print/Type preparer's name  Preparer's signature		Data	1	DTIN
D-:	a	$ G\rangle$	`	2/3/1.	Check	If PTIN
Pai		DIANE M. ZIMMERMAN, CPA Plane M. Jumen	nan		self-empl	<del></del>
	parer	Firm's name   BADEN, GAGE & SCHROEDER, LLC			ımı's EIN	<u> 35-1939627</u>
Use	e Only	6920 POINTE INVERNESS WAY #300				
		Firm's address FORT WAYNE, IN 46804-7926		_	hone no	260-422-2551
May	y the IRS	S discuss this return with the preparer shown above? (see instructions)	<del></del>			X Yes No

B

cm 990 (2015) GARAND COLLECTORS ASSOCIATION, INC. 35-2151649	Page <b>2</b>
Part III Statement of Program Service Accomplishments	ত্য
Check if Schedule O contains a response or note to any line in this Part III	X
Briefly describe the organization's mission.     SEE SCHEDULE O	
SEE SCHEDOLL 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?	$oxedsymbol{oxed}$ Yes $oxedsymbol{oxed{X}}$ 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	☐ Tes ☑ NO
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	
	<del></del>
4a (Code ) (Expenses \$ 4,638 including grants of \$ ) (Revenue	, , , , , , , , , , , , , , , , , , , ,
DISTRIBUTION OF DOCUMENTARY IN DVD FORM. THE DOCUMENTARY HAS EINTO A THIRTY MINUTE VERSION TO BE SHOWN ON PBS STATIONS.	RE-EDITED
INTO A THIRT MINOTE VERSION TO BE SHOWN ON FBS STATIONS.	
4b (Code. ) (Expenses \$ 138,773 including grants of \$ ) (Revenue	\$ 1,400)
PUBLISH QUARTERLY JOURNAL- SPONSORING EVENTS TO PROMOTE THE HI	
EXCHANGE OF INFORMATION BETWEEN COLLECTORS OF THE U.S. RIFLE.	SERVES
APPROXIMATELY 20,133 MEMBERS.	
	<del> </del>
4c (Code ) (Expenses \$ 57, 131 including grants of \$ ) (Revenue	
PUBLISHED BOOK 6 OF THE BEST OF GCA JOURNAL AND REPRINTED BOOK	: 1
4d Other program services (Describe in Schedule O.)	
(Expenses \$ 18,363 including grants of \$ 18,363 ) (Revenue \$ 4e Total program service expenses ► 218,905	
TO TOTAL PROGRAM CONTINUES F	

<u> </u>	To the disconnection to the di			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
-	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	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,			1
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			l .
	Part III	_5_		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			ł
	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,"			\ \v
۵	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			ļ
	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
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted	-		<u> </u>
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	- 10		
•	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,"			į .
	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_
С	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 16? If "Yes," complete Schedule D, Part VIII	11c		_X_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	- 1		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	j		
	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			1,7
_	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts Xi and XII is optional	12b		X
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking.	14a		
b	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
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	170		45
•	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Χ_
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	· <del>··</del>		
-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	j	X
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e <sup>2</sup> If "Yes," complete Schedule G, Part I (see instructions)	17	- 1	_X_
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	- 1	Χ
9	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		Χ

			Yes	No
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		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			Ì
	Part IX, column (A), line 2º If "Yes," complete Schedule I, Parts I and III	22		_X_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			,
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			Ì
	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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
þ	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 pnor 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			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,		1	
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled		1	ı
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Χ
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		1	
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)		1	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_X_
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		. }	ı
	Schedule L, Part IV	28b		_X_
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	1	ŀ	
	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		<u>X</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	Į	l	
	conservation contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	- 1	1	
	Part I	31		<u>_X</u> _
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	- 1	}	
	complete Schedule N, Part II	32		_ <u>X</u> _
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		]	
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,		- 1	
	or IV, and Part V, line 1	34		<u>X</u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
D	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-charitable		)	
	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	l	- 1	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	[	ı	17
	Part VI	_37		<u>X</u>
8	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	$\Lambda$	

	n 990 (2015) GARAND COLLECTORS ASSOCIATION, INC. 35-2151649  Statements Regarding Other IRS Filings and Tax Compliance			age 5
	Check if Schedule O contains a response or note to any line in this Part V			
	,		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  1a 3			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			ŧ
	reportable gaming (gambling) winnings to prize winners?	1c	Χ	
2a				
	Statements, filed for the calendar year ending with or within the year covered by this return  2a 0			İ
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)			ĺ
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	1 1		1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	1 1		
	account)?	4a		X
b	If "Yes," enter the name of the foreign country. ▶			ĺ
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	1 1		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	} }		ł
	gifts were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			Ė
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			Ė
_	and services provided to the payor?	7a		<del> </del>
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<del> </del>
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1	- 1	
	required to file Form 8282?	7c		<del></del>
d	If "Yes," indicate the number of Forms 8282 filed during the year		1	i
e	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. Did a donor advised fund maintained by the		1	j
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		ŧ	:
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10_	Section 501(c)(7) organizations. Enter		1	
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  [10b]		ı	
11	Section 501(c)(12) organizations. Enter:		1	
a	Gross income from members or shareholders  11a		1	
b	Gross income from other sources (Do not net amounts due or paid to other sources		1	:
	against amounts due or received from them )		ł	
2a	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  Section 504(2)(2) and lifted approach to be left incorrected in a control of tax-exempt interest received or accrued during the year		I	:
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		ı	
b	Enter the amount of reserves the organization is required to maintain by the states in which		1	
	the organization is licensed to issue qualified health plans		1	
C	Enter the amount of reserves on hand			<del></del>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	}	<u>X</u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	1	

	1 990 (2015) GARAND COLLECTORS ASSOCIATION, INC. 35-2151649  Governance, Management, and Disclosure For each "Yes" response to lines 2 through response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Check of School up O contains a response or note to any line in this Best VI.				lo"	Page <b>6</b>
Sec	• Check if Schedule O contains a response or note to any line in this Part VI  tion A. Governing Body and Management					X
<u> </u>	HOWA. Governing body and management				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	10		163	140
	If there are material differences in voting rights among members of the governing body, or	"				Ì
	if the governing body delegated broad authority to an executive committee or similar					
	committee, explain in Schedule O					
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					
_	any other officer, director, trustee, or key employee?			2	Х	1
3	Did the organization delegate control over management duties customanly performed by or under the direct			-		├
•	supervision of officers, directors, or trustees, or key employees to a management company or other person?			3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6	Did the organization have members or stockholders?			6	X	
7a	Did the organization have members of stockholders, or other persons who had the power to elect or appoint			-	Δ_	
, a	one or more members of the governing body?			7.	Х	l
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			7a		
	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 b	v tha fr	llowing	75		
a	The governing body?	y tric ic	mo <b>w</b> mig	8a	х	Ī
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			1		
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Inter-	nal Re	evenue 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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the	form?		11a	Χ	
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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	conflic	3?	12b	X	
¢	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			1 1	·	
	describe in Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13		X
14	Did the organization have a written document retention and destruction policy?			14	X	<del></del>
15	Did the process for determining compensation of the following persons include a review and approval by					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
a	The organization's CEO, Executive Director, or top management official			15a		<u>X</u>
b	Other officers or key employees of the organization			15b		X
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)				I	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement				ŧ	37
_	with a taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the				1	
	· · · · · · · · · · · · · · · · · · ·			1,01	ŧ	
<u> </u>	organization's exempt status with respect to such arrangements? tion C. Disclosure			16b		
<u>3ec</u> 17	List the states with which a copy of this Form 990 is required to be filed IN			<del></del>		
1 <i>7</i> 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c	(3)e or	lv)			
. •	available for public inspection. Indicate how you made these available. Check all that apply	(S)S UI	··y <i>)</i>			
	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 process.	nalias s	nd			
	financial statements available to the public during the tax year.	onoy, e	ii iu			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:	•				
	TACHE INTERNATIONAL, INC. 2005 BUCHANAN ST.	-				
	ORTH KANSAS CITY MO 6411	6	81	6-47	1-2	005

Form 990 (2015)	GARAND COLLECTORS ASSOCIATION, II	NC. 35-2151649	Page '
Part VII	Compensation of Officers, Directors, Trustees, Key	<b>Employees, Highest Compens</b>	ated Employees, and
1	Independent Contractors		
• (	Check if Schedule O contains a response or note to an	y line in this Part VII	
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Com	pensated Employees	
1a Complete this	s table for all persons required to be listed. Report compensation for th	e calendar year ending with or within the	

- Tal 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 organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any	bo	x, unl	Pos check ess pe	rson i irecto	than or s both r/truste	an e)	(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) ANTHONY PUCCI, C	R 10.00									
CHAIRMAN	0.00	X		Х				0	0	0
(2) STEVEN T. RUTLED										<u>~</u>
	20.00									
PRESIDENT	0.00	X		Χ				0	0	0
(3) DON KEMPS										
	10.00	•	1							p.
SECRETARY	0.00	Х	<u> </u>	Х		$\sqcup$		0	0	0
(4) THOMAS S. RUTLED	ľ									
	10.00									_
TREASURER	0.00	X		X				0	0	0
(5) JAMES ADELL	15.00					1				
DIRECTOR	0.00	X				]		o	0	0
(6) MICHAEL BERNAZZA		^				-		<del> </del>	0	<u> </u>
(O) THE CHILD DERIVING	20.00									
DIRECTOR	0.00	Х						0	0	0
(7) ANDREW HALL									<del></del>	<u>~</u>
( , , , , , , , , , , , , , , , , , , ,	15.00							Ì		
DIRECTOR	0.00	Х						ol	0	0
(8) DAVID H. MCCLAIN										
	15.00									
DIRECTOR	0.00	Χ						0	0	0
(9) ROBERT SEIJAS							ĺ			
	20.00					ı	1			
DIRECTOR	0.00	X						0	01	0
(10) FRANK TODARO										
	20.00							_	_	
DIRECTOR	0.00	Х						0	0	0
(11)										

Form 990 (2015) GARAND COLLECTORS ASSOCIATION, INC. 35-2151649 Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (F) Name and title Average Position Reportable Reportable Estimated hours per (do not check more than one compensation compensation from amount of week box, unless person is both an from related other (list any officer and a director/trustee) the organizations compensation (W-2/1099-MISC) hours for organization from the nstitutional (W-2/1099-MISC) related organization organizations and related employee below dotted organizations line) 1b Sub-total Total from continuation sheets to Part VII, Section A Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such Χ ındıvıdual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address (B) Description of services 2005 BUCHANAN ST. ATTACHE INTERNATIONAL, INC. NORTH KANSAS CITY OM 64116 ADMINISTRATION 138,000 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue (A) Total revenue (C) exempt excluded from tax business function under sections 512-514 revenue Gifts, Grants ilar Amounts 1a 1a Federated campaigns 1b **b** Membership dues 1c c Fundraising events 1d d Related organizations Contributions, and Other Simi 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 56 1f g Noncash contributions included in lines 1a-1f 56 h Total. Add lines 1a-1f Program Service Revenue Busn Code 900099 482,645 482,645 2a MEMBERSHIP DUES 900099 24,928 24,928 b BOOK INCOME 13,118 511120 13,118 PROMOTIONAL ITEMS 5,600 900099 5<u>,6</u>00 CONVENTION INCOME 511120 1,400 1,400 GCA JOURNAL f All other program service revenue 527,691 g Total. Add lines 2a-2f Investment income (including dividends, interest, 2,214 2,214 and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6a Gross rents **b** Less rental exps c Rental inc or (loss) Net rental income or (loss) Gross amount from (ii) Other (i) Securities sales of assets other than inventor b Less cost or other basis & sales exps c 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 **b** 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 10a Gross sales of inventory, less returns and allowances b Less. cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code 11a b All other revenue  $\blacktriangleright$ Total. Add lines 11a-11d 527,691 2,214 Total revenue. See instructions 529,961

## Part IX Statement of Functional Expenses

Sect	<ul> <li>con 501(c)(3) and 501(c)(4) organizations must contains a responsibility.</li> </ul>			iete column (A)	
		(A)	(B)	(C)	(D)
	ot include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	Total expenses	Program service	Management and	Fundraising
		<del> </del>	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations	18,363	1		
_	and domestic governments. See Part IV, line 21	10,303	<del></del>	<u> </u>	<del></del>
2	Grants and other assistance to domestic				
_	individuals See Part IV, line 22	<del></del>			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16		<del></del>		
4	Benefits paid to or for members				<del> </del>
5	Compensation of current officers, directors,			Ì	
	trustees, and key employees			ļ <del></del>	<del> </del>
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)			<del> </del>	<u> </u>
7	Other salaries and wages				<del> </del>
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				<u> </u>
10	Payroll taxes				<u> </u>
11	Fees for services (non-employees)				
а	Management	138,000			<u> </u>
b	Legal	10,000		<u> </u>	<u> </u>
С	Accounting	3,580		<u> </u>	
đ	Lobbying				
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				
Ŭ	(A) amount, list line 11g expenses on Schedule O)				1
12	Advertising and promotion			[	
13	Office expenses	16,393			
14	Information technology	1,972			
15	Royalties				
16	Occupancy				
17	Travel	24,556			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	22,757	- <del></del>		1
20	Interest				<u> </u>
21	Payments to affiliates				1
22	Depreciation, depletion, and amortization			<del> </del> -	<del> </del>
23	Insurance	2,258	<del></del>	<del></del> -	<del> </del>
24	Other expenses Itemize expenses not covered				
24	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	138,773	<u> </u>	<u> </u>	<del> </del>
_	BOOK - BEST OF GCA JOURNA	57,131		<del></del>	<del> </del>
b	POSTAGE	33,782	<del></del>	<del> </del>	<del> </del>
ر 2	CAMP PERRY	19,142	<del> </del>	<del> </del>	<del> </del>
d		36,011	<del></del>	<del> </del>	<del> </del>
е 25	All other expenses	522,718	0	0	0
25 26	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	JZZ, 110		<del> </del>	<del>'</del>
20	organization reported in column (B) joint costs				1
	from a combined educational campaign and				}
	fundraising solicitation. Check here full if				
	following SOP 98-2 (ASC 958-720)	L		<u> </u>	<del></del>

Form 990 (2015)

GARAND COLLECTORS ASSOCIATION, INC. 35-2151649 Page **11** Part X Balance Sheet

<u> </u>	art)			<del></del>		<del></del>
		Check if Schedule O contains a response or note	to any line in this Part X		,	
		•		(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing		53,720	1	58,93
	2	Savings and temporary cash investments	I	622,867	2	624,90
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former of	ficers, directors,			
	İ	trustees, key employees, and highest compensated employees	oloyees.			
		Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified pers	sons (as defined under section			
	]	4958(f)(1)), persons described in section 4958(c)(3)(В),	and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary				
ß	ļ	organizations (see instructions) Complete Part II of Sch	· ·		6	
Assets	7	Notes and loans receivable, net			7	
Ä	8	Inventories for sale or use			8	<del></del>
	9	Prepaid expenses and deferred charges		<del></del>	9	
	10a	Land, buildings, and equipment cost or	1 1			
	1	other basis. Complete Part VI of Schedule D	10a			
	ь	Less accumulated depreciation	10b		10c	
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11	ì		13	
	14	Intangible assets	Ì		14	
	15	Other assets. See Part IV, line 11		15	·	
	16	Total assets. Add lines 1 through 15 (must equal line 34	4)	676,587	16	683,830
	17	Accounts payable and accrued expenses			17	
į	18	Grants payable		18		
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	<del></del>
	21	Escrow or custodial account liability Complete Part IV of	f Schedule D		21	<del></del>
s	22	Loans and other payables to current and former officers,	į	· · · · · · · · · · · · · · · · · · ·		
<u>=</u>		trustees, key employees, highest compensated employe	· •		1	
Liabilities		disqualified persons Complete Part II of Schedule L	]		22	
ز د	23	Secured mortgages and notes payable to unrelated third	parties		23	<del></del>
	24	Unsecured notes and loans payable to unrelated third pa	· .		24	
	25	Other liabilities (including federal income tax, payables to	t			<del></del>
		parties, and other liabilities not included on lines 17-24)				
		of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25	Ţ	0	26	0
		Organizations that follow SFAS 117 (ASC 958), chec	k here ▶ X and			
S		complete lines 27 through 29, and lines 33 and 34.			I	
Ĕ	27	Unrestricted net assets		676,587	27	683,830
ğ	28	Temporarily restricted net assets			28	
2	29	Permanently restricted net assets			29	
2		Organizations that do not follow SFAS 117 (ASC 958	), check here ▶ ☐ and			<del></del>
net Assets of Fund Balances		complete lines 30 through 34.		1	1	
3	30	Capital stock or trust principal, or current funds		ľ	30	
	31	Paid-in or capital surplus, or land, building, or equipment	fund		31	
	32	Retained earnings, endowment, accumulated income, or	F		32	
ا :	33	Total net assets or fund balances		676,587	33	683,830
-{	34	Total liabilities and net assets/fund balances	ł	676,587	34	683,830

Form **990** (2015)

-0rm	990 (2015) GARAND COLLECTORS ASSOCIATION, INC. 35-2151649				<u>Pa</u>	<u>ge 12</u>
Pa	art XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					$\Box$
1	Total revenue (must equal Part VIII, column (A), line 12)	1		52	29,	961
2	Total expenses (must equal Part IX, column (A), line 25)	2		52	22,	<u>718</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			7,	243
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		67	76,	<u>587</u>
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	1 1	-			
	33, column (B))	10		68	33,	830
Pa	art XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				_	Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O				1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		1_2	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			- 1		
þ	Were the organization's financial statements audited by an independent accountant?			b_		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both				1	
	Separate basis Consolidated basis Both consolidated and separate basis		-		1	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		1	Į	Į	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		_ 2	:c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in					
	Schedule O.				1	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		1	- 1	l	
	the Single Audit Act and OMB Circular A-133?		_ 3	a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		} -	T		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		<u> </u>	ь		
				Form	990	(2015)

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on 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.qov/form990.

OMB No 1545-0047 2015 Open to Public Inspection

lame of the org	ganization	1 '	Employer	identification number	
GARAN	ID COLLECTORS ASSOCIATION, INC.	}	35-2	151649	
Part I	Organizations Maintaining Donor Advised Fu Complete if the organization answered "Yes" on	inds or Other Similar Funds or Acc			
	Complete if the organization answered Tee on	(a) Donor advised funds		(b) Funds and other accounts	
1 Total r	number at end of year			<del></del>	
	gate value of contributions to (dunng year)				
	gate value of grants from (dunng year)				
• • •	gate value at end of year				
5 Did the	e organization inform all donors and donor advisors in writing that	the assets held in donor advised			
funds	are the organization's property, subject to the organization's exclu	usive legal control?		Yes	No
6 Did the	e organization inform all grantees, donors, and donor advisors in	writing that grant funds can be used			
only fo	or chantable purposes and not for the benefit of the donor or dono	r advisor, or for any other purpose			
confer	ring impermissible private benefit?			Yes	No
Part II	Conservation Easements.				<u> </u>
	Complete if the organization answered "Yes" on	Form 990, Part IV, line 7.			
1 Purpos	se(s) of conservation easements held by the organization (check	all that apply)			
Pr	reservation of land for public use (e.g., recreation or education)	Preservation of a historically importa	ant land	area	
Pr	rotection of natural habitat	Preservation of a certified historic st	tructure		
Pr	reservation of open space				
	lete lines 2a through 2d if the organization held a qualified conser	vation contribution in the form of a conservatio	n	,	
easem	nent on the last day of the tax year			Held at the End of the	Tax Year
a Total n	number of conservation easements		2a	ļ	
	acreage restricted by conservation easements		2b_	<u> </u>	
c Numbe	er of conservation easements on a certified historic structure inclu	uded in (a)	2c	ļ	
d Numbe	er of conservation easements included in (c) acquired after 8/17/0	06, and not on a	1		
	c structure listed in the National Register		_2d	<u> </u>	
	er of conservation easements modified, transferred, released, ext	inguished, or terminated by the organization di	uring the	•	
tax yea		_			
	er of states where property subject to conservation easement is lo				
	the organization have a written policy regarding the periodic monit	toring, inspection, handling of		<u></u>	<u> </u>
	ons, and enforcement of the conservation easements it holds?			Yes	∐ No
6 Staff a	nd volunteer hours devoted to monitoring, inspecting, handling of	violations, and enforcing conservation easeme	ents dur	ang the year	
_	nt of expenses incurred in monitoring, inspecting, handling of viola	ations, and enforcing conservation easements	dunng ti	ne year	
<b>▶</b> \$		22 22 22 22 22 22 22 22 22 22 22 22 22			
	each conservation easement reported on line 2(d) above satisfy the	ne requirements of section 170(n)(4)(B)(I)		□ Vaa	
	ection 170(h)(4)(B)(ii)?	anto in its sevenite and synamos statement, and		Yes	∐ No
	XIII, describe how the organization reports conservation easeme se sheet, and include, if applicable, the text of the footnote to the organization.	•			
	zation's accounting for conservation easements	rganizations intandal statements that describi	es uie		
Part III	Organizations Maintaining Collections of Art,	Historical Treasures or Other Sin	nilar A	lesets	
, 2012 101	Complete if the organization answered "Yes" on		a. <i>,</i>		
1a If the o	organization elected, as permitted under SFAS 116 (ASC 958), no	<del></del>	e sheet	<del></del>	
	of art, historical treasures, or other similar assets held for public e	•			
	service, provide, in Part XIII, the text of the footnote to its financia				
•	organization elected, as permitted under SFAS 116 (ASC 958), to		heet		
	of art, historical treasures, or other similar assets held for public e	•			
	service, provide the following amounts relating to these items.	,			
•	evenue included on Form 990, Part VIII, line 1		•	\$	
• • •	sets included in Form 990, Part X		•	s.	
	organization received or held works of art, historical treasures, or o	other similar assets for financial gain, provide t	the	<b>*</b>	
	ng amounts required to be reported under SFAS 116 (ASC 958) r				
	ue included on Form 990, Part VIII, line 1		•	<b>S</b>	
	uncluded in Form 900. Part Y			r	

Sche	edule D (Form 990) 2015 GARAND C	COLLECTORS A	ASSOCIATION,	INC.	35-2	151649		Page 2
Pa	art III Organizations Maintainir	ng Collections of	Art, Historical Tr	easures,	or Other	Similar Assets	(continued)	
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records,	, check any of the follow	ing that are	a significan	t use of its		
а	Public exhibition	d 🗍	Loan or exchange prog	grams				
b	F	e 🗍	Other	•				
C								
4	Provide a description of the organization's c	ollections and explain l	how they further the org	anızation's e	exempt purp	ose in Part		
	XIII.	•						
5	During the year, did the organization solicit of	or receive donations of	art, historical treasures	, or other sir	nılar			
	assets to be sold to raise funds rather than t	to be maintained as pa	rt of the organization's	collection?			Yes	No
P	art IV Escrow and Custodial A	rrangements.						
	Complete if the organization 990, Part X, line 21.	on answered "Yes	" on Form 990, Pa	rt IV, line	9, or repo	orted an amount	on Form	
1a	Is the organization an agent, trustee, custod	ian or other intermedia	ITV for contributions or o	ther assets	not .			
	included on Form 990, Part X?		ing for contributions of c	trici bascia i	101		Yes	□ No
b	If "Yes," explain the arrangement in Part XIII	and complete the follo	owing table.					
-						[	Amount	
С	Beginning balance					1c		
	Additions during the year					1d		
	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on F	form 990, Part X, line 2	21, for escrow or custod	ial account l	ability?		Yes	No
b	If "Yes," explain the arrangement in Part XIII	Check here if the exp	lanation has been provi	ded on Part	XIII			
Pa	art V Endowment Funds.						<del></del>	
	Complete if the organization	on answered "Yes"	on Form 990, Par	t IV, line	10.			
	!	(a) Current year	(b) Pnor year	(c) Two ye	ars back	(d) Three years back	(e) Four years	s back
1a	Beginning of year balance	<u> </u>	<u> </u>					
b	Contributions	<u></u>						
C	Net investment earnings, gains, and	!	}		ł		1	
	losses							
đ	Grants or scholarships							
e	Other expenditures for facilities and						ŀ	
	programs	_ <del></del>						
f	Administrative expenses		<b> </b>					
g	End of year balance		<u> </u>	L	1			
2	Provide the estimated percentage of the cur	-	(line 1g, column (a)) hel	ld as				
	Board designated or quasi-endowment ▶	%						
_	Permanent endowment ► %							
С	Temporarily restricted endowment ▶	%						
1-	The percentages on lines 2a, 2b, and 2c sho	·			41			
зa	Are there endowment funds not in the posse	ssion of the organization	on marare neig and agr	mnisterea to	ii (ne		[V	
	organization by: (i) unrelated organizations						Yes	No
	(ii) related organizations						3a(i) 3a(ii)	+
h	If "Yes" on line 3a(ii), are the related organizations	ations listed as require	d on Schedule D2				3b	+
4	Describe in Part XIII the intended uses of the						[30]	<u> </u>
	art VI Land, Buildings, and Equ		men unus					
	Complete if the organization		on Form 990 Par	t IV line 1	1a See	Form 990 Part	X line 10	
	Description of property	(a) Cost or other b				ccumulated	(d) Book value	
	· · · ·	(investment)	(othe		, ,	preciation	. ,	
1a	Land	<del></del>						
	Buildings						<del></del>	
	Leasehold improvements							
	Equipment							
	Other							
	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part X	(, column (B), line 10c )			<b></b>		

Part VII	Investments—Other Securities.  Complete if the organization answered "Yes"	on Form 990 Part IV Ju	ne 11b. See Form 990. F	Part X June 12
	(a) Description of security or category	(b) Book value	(c) Method	
	(including name of security)		Cost or end-of-ye	ear market value
(1) Financial of	denvatives			
(2) Closely-he	eld equity interests			
(3) Other				
(A)		<u> </u>		
(B)		<u> </u>		
(C)				
(D)			<u> </u>	
(E)				
(F)		<del></del>	<del></del>	<del></del>
(G)			<del></del>	
(H)			<del> </del>	
	n (b) must equal Form 990, Part X, col. (B) line 12)		<u> </u>	<del> </del>
Part VIII	Investments—Program Related.	F 000 D (B()	44 0 5 000 5	
	Complete if the organization answered "Yes"			
	(a) Description of investment	(b) Book value	(c) Method of	
			Cost or end-of-ye	an market value
(1)		<del> </del>	_ <del> </del>	- <del></del>
(2)			<del>- </del>	<del></del>
_(3)			<del></del>	
(4)			<del></del>	<del></del>
(5)			<del></del>	
(6)			<del>}</del>	<del> </del>
(7)			<del>                                     </del>	
(8)			<del> </del>	
(9)	(h) must equal Form 000, Bod V, col. (P) line 12.)		<del> </del>	
Part IX	n (b) must equal Form 990, Part X, col (B) line 13 ) ► Other Assets.	<del></del>	<del></del>	<del></del>
FRITIA	Complete if the organization answered "Yes"	on Form 990 Part IV lin	e 11d See Form 990 P	art X line 15
	(a) Description		e rra. dee ronn 330, r	(b) Book value
(1)		<del></del>		1-7
(2)		<del></del>		
(3)	<del></del>	<del></del>		
(4)	<del></del>			<del></del>
(5)				<del> </del>
(6)			<del></del>	
(7)			· <del></del>	
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 15)		<b>•</b>	
Part X	Other Liabilities.			<del></del>
	Complete if the organization answered "Yes"	on Form 990, Part IV, lin	e 11e or 11f. See Form	990, Part X,
	line 25.	·		
1.	(a) Description of liability	(b) Book value		······································
(1) Federal	income taxes		7	
(2)			7	
(3)			7	
(4)			7	
(5)			7	
(6)			7	
(7)			7	
(8)			7	
(9)			7	
	n (b) must equal Form 990, Part X, col. (B) line 25.) ▶			
	uncertain tax positions In Part XIII, provide the text of the fo	potnote to the organization's fina	incial statements that reports t	he

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

GARAND COLLECTORS ASSOCIATION, INC. 35-2151649 Schedule D (Form 990) 2015 Page **4** Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on 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. Net unrealized gains (losses) on investments b Donated services and use of facilities 2b c Recoveries of prior year grants 2c 2d Other (Describe in Part XIII) ď Add lines 2a through 2d 3 Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 11 a Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII) c Add lines 4a and 4b 4c Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on 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. 2 a Donated services and use of facilities 2a b Pnor year adjustments 2b c Other losses 2c 2d d Other (Describe in Part XIII) e Add lines 2a through 2d 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 b Other (Describe in Part XIII) c Add lines 4a and 4b 4c Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 Supplemental Information. 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, 2013 AND LATER YEARS) AND HAS CONCLUDED THAT NO PROVISION FOR INCOME TAX WOULD BE REQUIRED IN THE ASSOCIATION'S FINANCIAL STATEMENTS.

Schedule D (Form 990) 2015 GARAND COLLECTORS ASSOCIATION, INC. 35-2151649

Part XIII Supplemental Information (continued)

Page 5

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OMB No 1545-0047

SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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

Open to Public Inspection 2015

Employer Identification number

% ⊠ (h) Purpose of grant RIFLE RANGE-CMP or assistance Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form Yes 35-2151649 (g) Description of non-cash assistance 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (e) Amount of noncash assistance 18,363 (d) Amount of cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table INC. (c) IRC section if applicable 34-1839195 501C3 GARAND COLLECTORS ASSOCIATION, General Information on Grants and Assistance (p) EIN 3 Enter total number of other organizations listed in the line 1 table the selection criteria used to award the grants or assistance? (1) CORP FOR PROMOTION OF RIFLE PRACTIC AL 36207 (a) Name and address of organization or government 1401 COMMERCE BLVD. ANNISTON Part II Part 3 ල **4** 3 9 8 8 6

Schedule I (Form 990) (2015)

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

Schedule I (Fo	Schedule (Form 990) (2015) GARAND COLLECTORS ASSOCIATION, INC. 35-2151649	TORS ASSOCIAT	ION, INC. 3	5-2151649		Page 2
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	Domestic Individual nal space is needed.	s. Complete if the o	rganization answered	"Yes" on Form 990, Part I\	/, line 22.
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
2						
, m						
4						
LO.						
9						
7						
Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	ide the information rec	quired in Part I, line	2, Part III, column (b),	and any other additional ir	Iformation.

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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Name of the organization

GARAND COLLECTORS ASSOCIATION, INC.

Employer identification number 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 III, LINE 4D - ALL OTHER ACCOMPLISHMENT

GRANT TO THE CORPORATION FOR PROMOTION OF RIFLE PRACTICE AND FIREARMS

SAFETY, DBA CIVILIAN MARKMANSHIP PROGRAM, FOR THE RIFLE RANGE AT CMP

TALLADEGA MARKSMANSHIP PARK. THIS GRANT WAS MADE TO FURTHER GARAND'S

MISSION OF ENCOURAGING COMPETITIVE AND RECREATIONAL SAFE SHOOTING OF THE RIFLE.

FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS

STEVEN RUTLEDGE

THOMAS RUTLEDGE

TREASURER

FAMILY RELATIONSHIP

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. THE BOARD OF DIRECTORS ARE OFFERED THE OPPORTUNITY TO REVIEW THE
990 PRIOR TO FILING.

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.