Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2016
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

<u> </u>	01 011	20 to calendar year, or tax year beginning	and	ending				
B c	heck if opticable	C Name of organization			D Employe	r identificati	on number	
	Addre	THE GRIDIRON CLUB AND	FOUNDATION					
]Name]chang					36-464	3320	
]initial return	Number and street (or P.O. box if mail is not de	livered to street address)	Room/suite	E Telephor	ne number		
]Fınal return		ESS	976	<u> </u>	202-78	3-4050	
	termir ated	City or town, state or province, country, and	ZIP or foreign postal code		G Gross receip	ots \$	410,6	<u>13.</u>
<u> </u>	Amen	WASHINGTON, DC 20045			_ H(a) Is this :	a group retur		_
L	Application pendi	·				ordinates?	Yes X	_
		529 14TH ST, NW, 976 NA						∐No
			(insert no.) 4947(a)(1)	or 52	− 1 '		. (see instructions	s)
		te: ► GRIDIRON. CLUB@GMAIL. CC organization: Corporation Trust X A	ssociation Other	I Voc		exemption nu	ate of legal domicil	o· DC
	rt I	Summary	SSOCIATION OTHER	L_Teal	or formationa	ZUUO MISI	ate of legal dornich	<u>e. DC</u>
·		Briefly describe the organization's mission or mos	t significant activities: CONT	RIBUT	ING TO	THE BET	TERMENT	
Governance		OF THE JOURNALISTIC COMMU						
rna			ntinued its operations or dispo					
ove	3	Number of voting members of the governing body	(Part VI, line 1a)	ē		. 3		9
2	4	Number of independent voting members of the go	overning body (Part VI, line 1b)			4		9
Activities &	5	Total number of individuals employed in calendar	year 2016 (Part V, line 2a)			5		0
iţ	6	Total number of volunteers (estimate if necessary)				. 6		16
Act	7 a	Total unrelated business revenue from Part VIII, co	olumn (C), line 12	,		. 7a		0.
_	b	Net unrelated business taxable income from Form	990-T, line 34		•	7b		0.
3	_			\vdash	Prior Yea		Current Year	
~	,	Contributions and grants (Part VIII, line 1h)		-		,758. ,704.	78,2	35.
JUN L Revenu		Program service revenue (Part VIII, line 2g)		-		,589.	$\frac{4,4}{50,7}$	
₹ & !	l	Investment income (Part VIII, column (A), lines 3, 4	· · · · · · · · · · · · · · · · · · ·			,919.>		<u>56.</u> >
5		Other revenue (Part VIII, column (A), lines 5, 6d, 8d Total revenue - add lines 8 through 11 (must equa		• • -		,132.	118,7	
3		Grants and similar amounts-paid-(Part-IX, column				,000.	57,0	
Expenses		Benefits paid to or for members (Part X) column				0.		0.
3 8		Salaries, other compensation, employee benefits				0.		0.
S as	l	Professional fundraising fees (Part JX, column (A),	1001			0.		0.
Ž Š	ь	Total fundraising expenses (Part IX, column (D), lir	ne 250 . ►	<u>0.</u>				
ш	17	Other expenses (Part IX, column (A), lines 14a 14c	;-11f-24e)			,241.	<u>79,095.</u>	
	18	Total expenses. Add lines 18-11/2 must equal Part	X, cọlumn (A), line 25)			,241.	<u>136,0</u>	
	19	Revenue less expenses Subtract line 18 from line				<u>,109.></u>	<17,3	<u>90.</u> >
Net Assets or Fund Balances				В	eginning of Cur		End of Year	-
Sset	20	Total assets (Part X, line 16)			581	,154.	563,7	
ig te	21	Total liabilities (Part X, line 26)		_	581	0. ,154.	563,7	0.
P	ırt II	Net assets or fund balances. Subtract line 21 from Signature Block	n line 20		201	,154.	303,1	04.
		alties of perjury, I declare that I have examined this return	including accompanying schedul	es and stater	ments, and to the	hest of my kn	owledge and helief	f it is
		ct, and completed Declaration of preparer (other than office					omougo and bono.	, 1. 10
<u></u> ,		A P PO			7	111/17	,	
Sign	1	Signature of officer	, starty		Date			
Her		L CARL P LEUBSDORF, SECF	RETARY					
		Type or print name and title						
	_	Print/Type preparer's name	Preparer's signature		Date	Check	PTIN	
Paid			<u> </u>			self-employed	<u> </u>	
	arer	Firm's name			Firm	's EIN		
Use	Only	Firm's address						
		1			Pho	ne no.		٦
		RS discuss this return with the preparer shown ab		·			Yes Form 990 (<u> No</u>
6320	01 11-	11-18 LHA For Paperwork Reduction Act Noti	ce, see the separate instruct	ions.			rorm 330 (ZU16)

	990 (2016) THE GRIDIRON CLUB AND FOUNDATION 36-4643320 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	ESTABLISHMENT OF A FORUM FOR WASHINGTON JOURNALISTS TO PROMOTE
	FRIENDLY RELATIONS AND THE EXCHANGE OF IDEAS AMONG ITS MEMBERS AND TO
	EDUCATE THE PUBLIC ABOUT THE FIELD OF WASHINGTON JOURNALISM IN
	GENERAL.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	• • • • • • • • • • • • • • • • • • • •
	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?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code) (Expenses \$
70	AWARDING OF EDUCATIONAL SCHOLARSHIPS AND ASSISTING ORGANIZATIONS THAT
	HELP AND PROTECT JOURNALISTS AND THEIR ACTIVITIES.
4b	(Code) (Expenses \$
	HOSTING OF A NUMBER OF MEMBERSHIP EVENTS DURING THE YEAR TO PROMOTE
	JOURNALISTIC EXCHANGES, EDUCATION AND RECOGNITION.
4c	(Code) (Expenses \$2, 857. including grants of \$) (Revenue \$)
	MEMBERSHIP PIN RECOGNITION PROGRAM
	Other argument and inco (December) Cabadula (O.)
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 2,052. including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 71,371.
	Form 990 (2016)

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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		v	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	1	Х	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			<u>A</u>
	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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		_X_
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
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		<u> </u>
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			37
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	444		x
122	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		
120	Schedule D, Parts XI and XII	12a	ĺ	x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	1Za_		
~	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	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	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		<u> </u>
		Earm	മമവ ദ	2016

Pai	t IV Checklist of Required Schedules (continued)			
			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	200		
	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			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		\mathbf{x}
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	_22		-^-
23	·			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1 ~~		.
	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			ļ
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			77
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	ļ <u>-</u>	
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		ļ <u> </u>
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	1	1	İ
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	1	 	}
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	_	X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200	_	
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes, " complete Schedule M	29		X
		_28		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	1 00		٠.
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v
	If "Yes," complete Schedule N, Part I	31	-	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I	33_		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	ļ	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	ļ	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1		
	If "Yes," complete Schedule R, Part V, line 2	36		X_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			\
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			

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

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Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		·	<u> </u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	ļ		ļ
	(gambling) winnings to prize winners?	1c	X_	L
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return		ļ	Ì
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)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u></u>	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	<u> </u>	<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	ļ		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	<u> </u>	X
b	If "Yes," enter the name of the foreign country: ▶			
	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		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit		:	
	any contributions that were not tax deductible as charitable contributions?	6a	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	X	
7	Organizations that may receive deductible contributions under section 170(c).	Ì		1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	_7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			1
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<u></u>	
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	ļ		
	sponsoring organization have excess business holdings at any time during the year?	8		<u>X</u>
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X_
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	Į		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
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.]		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	ļ		l
С	Enter the amount of reserves on hand			•

14a

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form 990 (2016) THE GRIDIRON CLUB AND FOUNDATION 36-4643320 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 9			
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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3_		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	-
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
_	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	OD		
9	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 Internal Revenue Code)			- 22
	tion D. 1 Onolog (mis decitor b requests information about policies not required by the internal nevenue dode)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	163	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
D	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	Па		-22
10a		100		х
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	_	Λ
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40.		
40	In Schedule O how this was done	12c		v
13	Did the organization have a written whistleblower policy?	13_		X
14	Did the organization have a written document retention and destruction policy?	14_		
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			v
a	The organization's CEO, Executive Director, or top management official	15a		X
ь	Other officers or key employees of the organization	15b		
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40.		.
	taxable entity during the year?	16a		X
p	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 organization's			
<u> </u>	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vallab	Ιθ	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website	_		
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	tinan	cial	
_	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	SUSAN L HAHN - 202-783-4050			
	976 NATIONAL PRESS BUILDING, WASHINGTON, DC 20045			

Form	990	(2010	3)

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any li	ine in this Part VII
---	----------------------

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization		orga I	anıza			mper	nsat	· ·		/F:
(A)	(B))) Pos	C) itior	1		(D)	(E)	(F)
Name and Title	Average hours per	(do	do not check i			than	one	Reportable	Reportable	Estimated amount of
	week			ess person is both an and a director/trustee)			compensation from	compensation from related	other	
	(list any	į						the	organizations	compensation
	hours for	Į į	_ a			휼		organization	(W-2/1099-MISC)	from the
	related	stee	truste		ه.	pensa		(W-2/1099-MISC)		organization
	organizations	nal tru	onalt		ploye	5 g				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) CARL P. LEUBSDORF	12.00	<u> </u>	트	۹	¥	= 5	32			
SECRETARY	12.00	x		x	i			0.	0.	0.
(2) LYNN SWEET	2.00							•		0
VICE PRESIDENT	2.00	x		x				0.	0.	0.
(3) CLARENCE PAGE	2.00		<u> </u>	 _		\vdash			•	
IMMEDIATE PAST PRESIDENT	2.00	x						0.	0.	0.
(4) GERALD SEIB	3.00									
TREASURER	3.30	x		x				0.	0.	0.
(5) GEORGE E. CONDON JR.	0.50									
HISTORIAN		X		X				0.	0.	0.
(6) DAVID LIGHTMAN	2.00								·	
EXECUTIVE COMMITTEE MEMBER		X						0.	0.	0.
(7) CHRISTOPHER ROWLAND	2.00									
EXECUTIVE COMMITTEE MEMBER		X						0.	0.	0.
(8) DOYLE MCMANUS	2.00				Ì					
PRESIDENT		X		X				0.	0.	0.
(9) BRET BAIER	2.00									
EXECUTIVE COMMITTEE MEMBER		X				ļ		0.	0.	0.
			ļ			<u> </u>				
					-	ļ				
	 									
		_			_					
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			-		\vdash					
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		l								
	1				T				·	

L. ai	Section A. Officers, Directors, Tri	<u>ustees, Key Em</u>	ploy	ees_	, an	d Hi	ghe	st C	Compensated Employe	es (continued)				
	(A)	(B)	ļ			C)			(D)	(E)	J		(F)	
-	Name and title	Average	(do			sition k more than one		one	Reportable	Reportable			timate	
		hours per week	box	, unle	ss pe	rson	is bot	h an	I '	compensation	ו		nount	of
		(list any	├	<u> </u>		1	T	1	from	from related	.		other pensa	tion
		hours for	rect	1		1	_	1	the organization	organizations (W-2/1099-MIS			om the	
		related	50	g			SE		(W-2/1099-MISC)	(00-2/1099-10113	ا (۲		anizat	
		organizations	truste	a ti		8	mper		(17 2) 1000 111100)			•	d relat	
		below	Individual trustee or director	Institutional trustee	 =	Key employee	o st co	<u></u>				orga	anızatı	ons
		line)	ln div	Instit	Officer	Key	Highest compensated employee	Former						
_		-												
_			1				l							
_														
								i						
		_]					<u> </u>						
			1		ļ	ļ	ļ			,	- 1			
														_
			1			ĺ								
]					Ĺ.						
1b	Sub-total							lacksquare	0.		0.			0.
С	Total from continuation sheets to Part	VII, Section A							0.		0.			0.
d	Total (add lines 1b and 1c)								0.		0.			0.
2	Total number of individuals (including but	not limited to th	ose	liste	ed al	bov	e) wh	no r	eceived more than \$100	,000 of reportable)			
	compensation from the organization													<u>c</u>
													Yes	No
3	Did the organization list any former office	er, director, or tru	uste	e, ke	y er	nplo	yee,	or	highest compensated e	mployee on				
	line 1a? If "Yes," complete Schedule J for	r such individual									.	3_		X
4	For any individual listed on line 1a, is the	sum of reportab	le co	omp	ensa	atior	n and	d ot	her compensation from	the organization				
	and related organizations greater than \$1	50,000? If "Yes,	" co	mple	ete S	Sche	edule	e J i	for such individual			4		X
5	Did any person listed on line 1a receive o	r accrue compe	nsat	ion f	rom	any	unr/	elat	ted organization or indivi	dual for services)			
	rendered to the organization? If "Yes," co	mplete Schedul	e <i>J 1</i>	or su	uch	pers	son					5		<u> </u>
Sec	tion B. Independent Contractors	<u> </u>								 -				
1	Complete this table for your five highest of	compensated in	depe	ende	nt c	ont	racto	ors t	that received more than	\$100,000 of comp	pens	ation 1	rom	
	the organization. Report compensation for	or the calendar y	ear	<u>endı</u>	ng v	vith	or w	ıthır	n the organization's tax	/ear				
	(A)							i	(B)		_	(0)	
	Name and busines								Description of s		<u>c</u>	ompe	nsatio	<u>n</u>
	NAISSANCE WASHINGTON I							- 1	FOOD & BEVER	AGE				
<u>999</u>	<u>9 NINTH ST NW, WASHING</u>	GTON, DC	20	000)1				SERVICE			<u> 17</u>	<u>9,9</u>	<u>64.</u>
								l						
							_							
		-						_						
												_		
									 					
2	Total number of independent contractors		ot li	mite	d to	tho	se lis 1	stec	above) who received m	ore than				
	\$100,000 of compensation from the orga	nization 🕨					<u> </u>							

Form **990** (2016)

Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) Related or (C) Unrelated (**D)** Revenue excluded from tax under Total revenue exempt function business sections 512 - 514 revenue revenue , Gifts, Grants nilar Amounts 1 a Federated campaigns 1a 57,650. **b** Membership dues 1b 10,482. c Fundraising events 1c Contributions, Gif and Other Similar d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 10,135. g Noncash contributions included in lines 1a-1f \$ <u>78,267</u> h Total. Add lines 1a-1f Business Code <u>2,1</u>25. 2 a MONTHLY LUNCHES & EXEC 900004 2,125. Program Service Revenue 1,375 **b** PRODUCER DINNER 900004 1,375 900004 935. 935. c ORGANIZATION DINNER f All other program service revenue 4,435. a Total, Add lines 2a-2f investment income (including dividends, interest, and 21,471. 21,471. other similar amounts) Income from investment of tax-exempt bond proceeds 4 Royalties (i) Real (ii) Personal 6 a Gross rents b Less. rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other 53,985 assets other than inventory b Less: cost or other basis 24,697 and sales expenses 29,288. c Gain or (loss) 29,288. 29,288. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ 10,482. of contributions reported on line 1c). See a 251,555 Part IV, line 18 **b** Less: direct expenses ь 267,211. <15,656.> <15,656. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less. direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances .. . **b** Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 900. 900 900099 11 a SALE OF RECOGNITION PI d Ail other revenue 900. e Total. Add lines 11a-11d 118,705. 5,335 35,103. Total revenue. See instructions.

Form 990 (2016) THE GRIDIRON CLUB AND FOUNDATION
Part IX | Statement of Functional Expenses

25000	Check if Schedule O contains a respons			p.oto coluilli (//y.	
	Check if Schedule O contains a respons of Include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
			expenses	general expenses	ехрепзез — — — — — — — — — — — — — — — — — —
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	57,000.	57,000.		
2	Grants and other assistance to domestic	37,000.	37,000.		
2	Individuals. See Part IV, line 22				
_					
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign			i	
	Individuals. See Part IV, lines 15 and 16			·	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B) Other salaries and wages				
7	<u> </u>				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
_	· · · · · · · · · · · · · · · · · · ·				
9	Other employee benefits Payroll taxes				
10					
11	Fees for services (non-employees):	31,200.		31,200.	
a	Management .	31,200.		31,2000	
b	Legal				
C	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17	8,503.	=	8,503.	
f	Investment management fees Other (If line 11g amount exceeds 10% of line 25	8,303.	· · · · · · · · · · · · · · · · · · ·	0,303.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
40	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion Office expenses	2,736.		2,736.	
13	Information technology	2,750.		277300	<u> </u>
14	Royalties				 .——
15 16	Occupancy	13,247.		13,247.	
	Travel	13,21,			
17	Payments of travel or entertainment expenses				
18	for any federal, state, or local public officials				
10	Conferences, conventions, and meetings	9,462.	9,462.		
19 20	Interest	2,3020			
20 21	Payments to affiliates		-	<u> </u>	
22	Depreciation, depletion, and amortization	- "			
23	Insurance	1,103.		1,103.	
24	Other expenses. Itemize expenses not covered	2/2001			
_7	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 0.)				
а	PRINTING	6,651.	1,911.	4,740.	
b	PRESENTATION ITEMS	3,122.	2,857.	265.	
c	COMPUTER REPAIRS	2,200.	_,	2,200.	
d	POSTAGE	815.	141.	674.	
	All other expenses	56.		56.	
25	Total functional expenses. Add lines 1 through 24e	136,095.	71,371.	64,724.	0.
<u>25</u> 26	Joint costs. Complete this line only if the organization				
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 27,638. 45,971. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 147,363. 123,770. 2 Pledges and grants receivable, net 3 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 7 Notes and loans receivable, net 7 Inventories for sale or use Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b Less accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 406,153. 394,023. 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 16 Total assets, Add lines 1 through 15 (must equal line 34) 581,154 16 563,764 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 0. 0. 26 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances Unrestricted net assets 27 27 28 Temporaniv restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 0 . 0. 31 Paid-in or capital surplus, or land, building, or equipment fund 31 563,764. 581,154. 32 Retained earnings, endowment, accumulated income, or other funds 581,154. 563,764. 33 Total net assets or fund balances

> 563,764. Form **990** (2016)

Total liabilities and net assets/fund balances

	990 (2016) THE GRIDIRON CLUB AND FOUNDATION	<u> 36-464</u>	<u>3320 </u>	Page 12
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			🗀
1	Total revenue (must equal Part VIII, column (A), line 12)	1	118	705.
2	Total expenses (must equal Part IX, column (A), line 25)	2	136	,095.
3	Revenue less expenses. Subtract line 2 from line 1	3	<17	,390.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	581	,154.
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	<u> 563</u>	764.
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	<u>·</u>	·	
			<u></u>	Yes No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			1
	if the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.		'
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a		
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		_2b	X_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,		
	consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis		1 1	'
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,		1
	review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch		1	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Audit		
	Act and OMB Circular A-133?		3a	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ired audıt		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	200 12 2 (7)
			Form \$	990 (2016)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization **Employer identification number** THE GRIDIRON CLUB AND FOUNDATION 36-4643320 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi), (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi), (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) is the organization listed in your governing document? (ii) EIN (v) Amount of monetary (iii) Type of organization (vi) Amount of other (i) Name of supported (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

hedule A (Form 990 or 990 EZ) 2016 TH art II Support Schedule for O						<u>3320 Page</u>
(Complete only if you checked						
fails to qualify under the tests li			-	ir ialied to quality	diddir art iii. ii are	
ction A. Public Support	,,,,		····,			
	(n) 2012	(L) 0012	(-) 2014	(d) 2015	(=) 2016	(f) Total
endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) fotal
Gifts, grants, contributions, and membership fees received. (Do not						
include any "unusual grants ")			'			
Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
The value of services or facilities						
furnished by a governmental unit to		!				
the organization without charge						
Total. Add lines 1 through 3						
The portion of total contributions						
by each person (other than a						
governmental unit or publicly						
supported organization) included						
on line 1 that exceeds 2% of the						
amount shown on line 11,						
column (f)						
Public support. Subtract line 5 from line 4						
ction B. Total Support		T			1 1 2 2 2 2	40 T. I.I
endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
Amounts from line 4					 	
Gross income from interest,						1
dividends, payments received on						
securities loans, rents, royalties and income from similar sources						
Net income from unrelated business						
activities, whether or not the						
business is regularly carried on					1	
Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part VI.)						
Total support. Add lines 7 through 10						
Gross receipts from related activities, e	etc. (see instruct	ions)			12	
First five years. If the Form 990 is for			d, fourth, or fifth to	ax year as a secti	on 501(c)(3)	_
organization, check this box and stop	here			· ·		▶□
ction C. Computation of Public	Support Pe	ercentage				
Public support percentage for 2016 (lin	ne 6, column (f) d	divided by line 11, o	column (f))		14	
Public support percentage from 2015					15	
a 33 1/3% support test - 2016. If the or	ganization did n	ot check the box o	n line 13, and line	14 is 33 1/3% or	more, check this bo	ox and
stop here. The organization qualifies a		_				▶∟
b 33 1/3% support test - 2015. If the or				l line 15 is 33 1/39	% or more, check th	nis box
and stop here. The organization qualif						▶∟
a 10% -facts-and-circumstances test						
and if the organization meets the "fact					aπ vi now the orgar	ization ⊾ Г
meets the "facts-and-circumstances" t	aet Iha organiz	e ae aaitilei in noite	DUDINGLY SUDDOME	a organization		-

b 10% -facts-and-circumstances test - 2015. 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.
 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

Schedule A (Form 990 or 990-EZ) 2016

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Se	ction A. Public Support	эюw, piease comp	olete Part II)		·				
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total		
	Gifts, grants, contributions, and		(2)2010	(0) = 5	(4) = 0.10	107 = 0 10			
	membership fees received. (Do not								
	include any "unusual grants.")	85,250.	94,695.	66,961.	70,758.	91,185.	408,849.		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	251,133.				251,555.			
3	Gross receipts from activities that								
	are not an unrelated trade or bus-	600.	675.	1 100	1 000	800.	4 075		
	,	- 800.	6/5.	1,100.	1,800.	000.	4,975.		
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf					_			
5	The value of services or facilities furnished by a governmental unit to the organization without charge								
6	Total. Add lines 1 through 5	336,983.	335,730.	319,263.	321,048.	343,540.	1656564.		
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.		
t	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						0.		
•	Add lines 7a and 7b						0.		
	Public support. (Subtract line 7c from line 6)						1656564.		
	endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total		
	Amounts from line 6	336,983.	335,730.	319,263.	321,048.	343,540.	1656564.		
_	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	23,009.	24,030.	25,323.	24,208.	21,471.	118,041.		
ŧ	Unrelated business taxable income								
	(less section 511 taxes) from businesses acquired after June 30, 1975								
(Add lines 10a and 10b	23,009.	24,030.	25,323.	24,208.	21,471.	118,041.		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	95,865.	51,819.	72,855.	32,381.	29,288.	282,208.		
12	Other income. Do not include gain or loss from the sale of capital	33,003.	31/0131	,2,033	32/3321	23/2303	202/2000		
13	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12)	455,857.	411,579.	417,441.	377,637.	394,299.	2056813.		
	First five years. If the Form 990 is for								
•	check this box and stop here		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-,	,				
Se	ction C. Computation of Publ	ic Support Per	rcentage						
	Public support percentage for 2016 (I			column (f))	-	15	80.54 %		
16	Public support percentage from 2015	• •	•			16	79.68 %		
	ction D. Computation of Inves			<u></u>					
17				ne 13. column (fl)		17	5.74 %		
18	E 51 0								
	19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not								
	more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization								
1	33 1/3% support tests - 2015. If the	=							
20	line 18 is not more than 33 1/3%, che Private foundation. If the organization		•						

Schedule A (Form 990 or 990 EZ) 2016 THE GRIDIRON CLUB AND FOUNDATION

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. A.	AII	Supporting	Organizations
---------------	-----	------------	----------------------

- Are all of the organization's supported organizations listed by name in the organization's governing 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b 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.
- c 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.
- 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 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 or 990-EZ).
- 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.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) 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**.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - 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.)

		Yes	No
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Sche	dule A (Form 990 or 990-EZ) 2016 THE GRIDIRON CLUB AND FOUNDATION 36-46	<u> 4332</u>	<u>0 Ра</u>	age 5
Pai	t IV Supporting Organizations (continued)			
			Yes	No_
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	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?	11a		
	A family member of a person described in (a) above?	11b		
	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.	11c		
Sec	tion B. Type I Supporting Organizations		T.,	
_			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	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,	İ		
	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		
2	Did the organization operate for the benefit of any supported organization other than the supported	1		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,			
<u></u>	supervised, or controlled the supporting organization	2	Ь	L
<u> </u>	tion C. Type II Supporting Organizations		T.,	
	Miles a second of the comment of the description of		Yes	No
1	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		·	
<u></u>	the supported organization(s).	1 1	<u> </u>	
Sec	tion D. All Type III Supporting Organizations			1
	Deliberary of the second of th		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		ļ ,	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	 	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	ļ	ŀ	ĺ
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2		
•	the organization maintained a close and continuous working relationship with the supported organization(s).	-		
3	By reason of the relationship described in (2), did the organization's supported organizations have a		ł	
	significant voice in the organization's investment policies and in directing the use of the organization's	1		l
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3		
Sec	supported organizations played in this regard. etion E. Type III Functionally Integrated Supporting Organizations	1 3	<u> </u>	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
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 is the parent of each of its supported organizations complete line or below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	structions	s).	
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			ĺ
	those supported organizations and explain how these activities directly furthered their exempt purposes,			1
	how the organization was responsive to those supported organizations, and how the organization determined	1	1	ł
	that these activities constituted substantially all of its activities.	2a		
b				
_	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	1		1
	activities but for the organization's involvement.	2b		
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	ĺ	1	
•	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b				Γ
-	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	_3b	<u>L</u>	

	It V Type III Non-Functionally Integrated 509(a)(3) Supporting			36-4643320 Page 6
	13po			
1	Check here if the organization satisfied the Integral Part Test as a qualifying	=		Part VI.) See instructions. Al
Sect	other Type III non-functionally integrated supporting organizations must clion A - Adjusted Net Income	omplete S	(A) Prior Year	(B) Current Year
				(optional)
	Net short-term capital gain	1_		
2	Recoveries of prior-year distributions	_ 2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or	[[
	maintenance of property held for production of income (see instructions)	6		
7		7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		<u> </u>
Sect	ion 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 tax year or assets held for part of year):			
<u>a</u>	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		<u> </u>
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):	,		
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
_3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	tion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
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		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		<u> </u>
7	Check here if the current year is the organization's first as a non-function	ally integra	ited Type III supporting or	ganization (see
	instructions).			

Sche Pa r	t V Type III New Eventionally Integrated 500			6-4643320 Page 7
	- Type in Non-Tunetionally integrated occ	(a)(3) Supporting Orga	anizations (continuea)	1 2
Secti	on D - Distributions			Current Year
	Amounts paid to supported organizations to accomplish exe			
~	Amounts paid to perform activity that directly furthers exemp organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose			
	Amounts paid to acquire exempt-use assets	es of supported organization	<u> </u>	
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	he organization is responsive		
•	(provide details in Part VI). See instructions	no organization to respection o	•	
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
		Excess Distributions	Underdistributions	Distributable
Secti	on E - Distribution Allocations (see instructions)		Pre-2016	Amount for 2016
1_	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2016:			
а				
b				
С	From 2013			<u></u>
d	From 2014			
е	From 2015			<u> </u>
f	Total of lines 3a through e		<u> </u>	<u> </u>
g	Applied to underdistributions of prior years			<u> </u>
h_	Applied to 2016 distributable amount		<u> </u>	<u> </u>
i	Carryover from 2011 not applied (see instructions)			
i_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2 For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI See instructions			
7	Excess distributions carryover to 2017. Add lines 3			
	and 4c			
8	Breakdown of line 7:			
<u>a</u> _	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
u	E 6 0040			

Part VI Supplemental Information, Provide the explanations required by Part II, line 10; Part III, line 117; Part III, line 11	Schedule A	<u>(Form</u> 990 or 990-	EZ) 2016 THE	GRIDIRON	CLUB 2	AND FOU	NOITAGN	36-46	43320 Page 8
	Part VI	Supplementa Part IV, Section A line 1; Part IV, Se Section D, lines 5	al Information A, lines 1, 2, 3b, 3 ection D, lines 2 al 5, 6, and 8; and P	1. Provide the exp c, 4b, 4c, 5a, 6, 9a nd 3, Part IV, Sect	lanations rea a, 9b, 9c, 11 non E, lines	quired by Par a, 11b, and 1 1c, 2a, 2b, 3a	t II, line 10, Part 1c; Part IV, Sect 1, and 3b; Part V,	ll, line 17a or 17b; Part I ion B, lines 1 and 2, Par line 1; Part V, Section B	I, line 12; IV, Section C, Ine 1e; Part V,
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Schedule A (Form 990 or 990-EZ) 2016

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

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.lrs.gov/form990.

Open to Public Inspection

Name of the organization

Employer identification number 36-4643320

	THE GRIDIRON CLUB AN		36-4643320
Pai	t I Organizations Maintaining Donor Advised	Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writ	ting that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's exc	clusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advi	sors in writing that grant funds can be i	used only
	for charitable purposes and not for the benefit of the donor or d	onor advisor, or for any other purpose o	conferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the organ	ization answered "Yes" on Form 990, P	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization	·	
	Preservation of land for public use (e.g., recreation or edu	cation) Preservation of a histo	ncally important land area
	Protection of natural habitat	Preservation of a certif	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form of	
	day of the tax year.		Held at the End of the Tax Year
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		26
C	Number of conservation easements on a certified historic struct	, ,	2c
d	Number of conservation easements included in (c) acquired after	er 8/17/06, and not on a historic structu	
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	sea, extinguishea, or terminated by the	organization during the tax
4	year ▶Number of states where property subject to conservation easer	nent in legated	
5	Does the organization have a written policy regarding the period		
3	violations, and enforcement of the conservation easements it he	• • • • • • • • • • • • • • • • • • • •	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, ha	•	
·		rialing of violations, and officially cont	orvation outsiments daring the year
7	Amount of expenses incurred in monitoring, inspecting, handling	o of violations, and enforcing conservat	on easements during the year
-	▶ \$	g og	······································
8	Does each conservation easement reported on line 2(d) above s	satisfy the requirements of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	n's financial statements that describes t	he organization's accounting for
	conservation easements.		
Pa	t III Organizations Maintaining Collections of A	Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" on Form 99	00, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC	958), not to report in its revenue statem	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibit	tion, education, or research in furtheran	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes		
þ	If the organization elected, as permitted under SFAS 116 (ASC		
	treasures, or other similar assets held for public exhibition, educ	cation, or research in furtherance of pub	lic service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical treasu		gain, provide
	the following amounts required to be reported under SFAS 116	(ASC 958) relating to these items:	. .
a	Revenue included on Form 990, Part VIII, line 1		• \$
- h	Accate included in Form 900 Part V		

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets; continued. 3			DIRON CLUB								Page 2	
Check all that apply): a	Par	i III Organizations Maintaining C	ollections of A	rt, Hist	torical Tr	easures, or C	<u> Other</u>	Simil	ar Asse	ts (continu	ıed)	
a Public exhibition d Loan or exchange programs b Scholarly research e Cother Preservation for future generations excellentions and explain how they further the organization's exempt purpose in Part XIII. Portive a description of the organization societ or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No Portive Formal and advantage and a part of the organization answered "ves" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediatry for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table: Beginning balance C Beginning balance C Beginning balance B Additions during the year D birthorhors during the year during the year during the year balance D birthorhors during the year during the year during the year during the year	3	Using the organization's acquisition, accessi	on, and other record	ds, check	cany of the	following that are	a sıgr	nificant	use of its	collection	items	
b Scholarly research e		(check all that apply):	-				-	-				
c	а	Public exhibition	d	ı 🔲 ı	Loan or exc	hange programs						
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets 10 be sold to raise funds rather than to be maintained as part of the organization's collection? 10 part XIII. 10 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 11 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 12 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. for escrow or custodial account tability. 13 Is the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account lability? 14 Is a list the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account lability? 15 Indirection of the explanation of the explanation has been provided on Part XIII. 16 Part V Endowment Funds. Complete if the explanation has been provided on Part XIII. 17 Indirection of the explanation of the explanation has been provided on Part XIII. 18 Beginning of year balance 19 Contributions 19 Contributions 10 No Environment Funds. 10 Organization answered "Yes" on Form 990, Part IV, line 10. 10 Unrelated organizations 10 Indirection of the organization of the organization answered "Yes" on Form 990, Part IV, line 10. 19 Permanent endowment Impair and Environment Impairs the explanation of the organization of th	b	Scholarly research	e	\Box	Other							
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solf to raise funds rather than to be maintained as part of the organization collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X line 21. Is the organization an aspert, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If Yes, "explain the arrangement in Part XIII and complete the following table. Beginning balance Additions during the year. Destributions during the year. Destributions during the year of the organization answered "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes," or Form 990, Part X, line 10. Beginning of year balance Contributions Additional trust and the part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes," or Form 990, Part X, line 10. Beginning of year balance Contributions Administrative expenses Grants or scholarships Grants or scholarships Contributions Are there endowment	C	Preservation for future generations										
to be sold to raise funds rather than to be maintained as part of the organization's collection?	4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.										
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ves	5						mılar a	ssets	_	_	_	
reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, thustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b if "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year 1 Ending balance 2 Doth britions during the year 1 Ending balance 3 Doth the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b if "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Temporarity organization and the part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Temporarity organization and the part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Temporarity organization answered "Yes" on Form 990, Part IV, line 10. Temporarity restricted endowment Funds and programs and programs and programs Call Temporarity restricted endowment Funds and Part XIII. Temporarity restricted endowment Funds and Part XIII. Check here if the organization set of the organization of property Call Book value Call Bo											No_	
Tall is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	Par			ete if the	organizatio	n answered "Yes	s" on F	orm 990), Part IV,	line 9, or		
on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance 1b Contributions c Net investment earnings, gains, and losses d Grants or scholarships c Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as. a Board designated or quasi-endowment P % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations b If "Yes" on line 3a(ii), are the related organizations is listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10 Describin of property (a) Cost or other (b) Cost or other (c) Accumulated depreciation depreciation depreciation 1a Land b Buildings c Leasehold improvements d Equipment.									<u> </u>			
b If "Yes," explain the arrangement in Part XIII and complete the following table: C Seginning balance	1a		an or other intermed	diary for	contribution	is or other assets	not in	cluded	F	٦		
c Beginning balance d Additions during the year e Distributions during the year 1 te 1 1 to	_	• •							. L	」Yes	No	
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B If "Yes," explain the arrangement in Part XIIII. Check here if the explanation has been provided on Part XIII	7		arm 000 Dart V line	01 60=			 Indhilds			7 v	T No	
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. a Beginning of year balance (a) Current year (b) Pror year (c) Two years back (d) Three years back (e) Four years back		-						<i>,</i> (_	⊒ res	NO	
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Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as. a Board designated or quasi-endowment ▶	f	Administrative expenses]						_		
a Board designated or quasi-endowment ▶	g	End of year balance										
b Permanent endowment	2	Provide the estimated percentage of the curi	rent year end balanc	ce (line 1	g, column (a	a)) held as.						
Temporarily restricted endowment ▶	а	Board designated or quasi-endowment		_%								
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (d) Book value b Buildings c Leasehold improvements d Equipment e Other	b	Permanent endowment	%									
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment other	c	Temporarily restricted endowment ▶	%									
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(i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (other) 1a Land b Buildings c Leasehold improvements d Equipment e Other	3a	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	ınd admınistered	for the	organi	zation	_		
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b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other		• •			•				•			
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other		• • • • • • • • • • • • • • • • • • • •	•		•							
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other	b	-				·				3b		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other				owment	funds.							
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value (d) Book value (e) Equipment (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value	rar			0 Da -4 "	/ lmo 44 = 5	Con Corm 000 D	us V III	aa 10				
basis (investment) basis (other) depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other										(4) Daal		
1a Land b Buildings c Leasehold improvements d Equipment e Other		Description of property							I	(a) Rook	value	
b Buildings c Leasehold improvements d Equipment e Other		Land	Dasis (IIIVesti	ment)	Vasis	(Callel)	uepi		<u>' </u>			
c Leasehold improvements		• • • • •	<u> </u>		<u> </u>							
d Equipment e Other												
e Other			 									
			equal Form 990. Part	X. colur	nn (B). line 1	10c.)					0.	

Schedule D (Form 990) 2016

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

Schedule D (Form 990) 2016 THE GRIDIRON CLUB AND	FOUNDATION	36-4643320 Page 4
Part XI Reconciliation of Revenue per Audited Financial S	tatements With Revenu	e per Return.
Complete if the organization answered "Yes" on Form 990, Part IV,	line 12a	
1 Total revenue, gains, and other support per audited financial statements		. 1 -
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments	2a	
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIII.)	2d	<u> </u>
e Add lines 2a through 2d .		. 2e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII.)	4b_	
c Add lines 4a and 4b .	-	4c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1		
Part XII Reconciliation of Expenses per Audited Financial	Statements With Expen	ses per Return.
Complete if the organization answered "Yes" on Form 990, Part IV,	line 12a.	
1 Total expenses and losses per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		İ
a Donated services and use of facilities .	2a	
b Prior year adjustments .	2b	
c Other losses	. 2c	
d Other (Describe in Part XIII.)	. 2d	
e Add lines 2a through 2d		. 2e
3 Subtract line 2e from line 1		3
4 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.)	4b	
c Add lines 4a and 4b		4c
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	18.)	5
Part XIII Supplemental Information.		
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	id 4; Part IV, lines 1b and 2b, P.	art 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.	
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Schedule D (Form 990) 2016

SCHEDÙLE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2016

Open to Public Inspection

Schedule G (Form 990 or 990-EZ) 2016

THE GRI	DIRON CLUB AND FOU	NDA	TIO	N	36-4643	320
	Complete if the organization answe					
1 Indicate whether the organization raise a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, Pab If "Yes," list the 10 highest paid indivicompensated at least \$5,000 by the	e Solicitat f Solicitat g Special r oral agreement with any individual art VII) or entity in connection with production or entities (fundraisers) pursu	ion of ion of fundra (includ	non-govern govern using of ling of onal f	overnment grants nment grants events fficers, directors, trus undraising services?	stees, or Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribu	Did aiser istody trol of itions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
			_			
		_				
Total .			•			
3 List all states in which the organization or licensing.	n is registered or licensed to solicit o	contrib	utions	s or has been notified	d it is exempt from re	egistration
						

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

Sche Pa	edu rt l	le G (Form 990 or 990 EZ) 2016 THE GRI	DIRON CLUB A	ND FOUNDATIO	N 36-	4643320 Page 2
	-	of fundraising event contributions and gr				
Ф		-	(a) Event #1 ANNUAL CLUB DINNER (event type)	(b) Event #2 WINTER DINNER (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col (c))
Revenue	1	Gross receipts	236,987.	25,050.		262,037.
	2	Less Contributions	10,482.			10,482.
	3	Gross income (line 1 minus line 2)	226,505.	25,050.		251,555.
	4	Cash prizes			<u></u> .	
SS	5	Noncash prizes			 	
Direct Expenses	6	Rent/facility costs				
Irect E	7	Food and beverages	138,640.	20,988.		159,628.
۵	8	Entertainment	82,201.			86,081.
	9	Other direct expenses	18,298.	3,204.		21,502.
	10	Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from	• •	•		267,211. <15,656.
Pa	rt i	Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a	answered "Yes" on Forn	n 990, Part IV, line 19, or	reported more than	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
_	1	Gross revenue			···-	
ses	2	Cash prizes	-			
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	_5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes %	Yes % No	
	7	Direct expense summary Add lines 2 throug	h 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	7 from line 1, column (d)		<u> </u>	
а	ls t	ter the state(s) in which the organization cond the organization licensed to conduct gaming a No," explain:	activities in each of these			Yes No
		ere any of the organization's gaming licenses r Yes," explain:	· · · · · · · · · · · · · · · · · · ·	_	year?	Yes No
	_ 	9-12-16			Schodulo G (Fo	rm 990 or 990-EZ) 2016

Sch	nedule G (Form 990 or 990-EZ) 2016 THE GRIDIRON CLUB AND FOUNDATION 36-4	1643320	Page 3
	Does the organization conduct gaming activities with nonmembers?	Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	Yes	□ No
13	Indicate the percentage of gaming activity conducted in:	103	
	a The organization's facility	13a	%
	An outside facility	13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name ▶		
	Address		 -
15	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	□ No
ŧ	of "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party > \$		
•	c If "Yes," enter name and address of the third party:		
	Name		
	Address >		
16	Gaming manager information:		
	Name ►		
	Gaming manager compensation ▶ \$		
	Description of services provided		
			 -
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	☐ No
1	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year > \$		
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, I 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	ines 9, 9b, 10)b, 15b,
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Schedule G	(Form 990 or 990-EZ)	THE	GRIDIRON	CLUB	AND	FOUNDATION	36-4643320 Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Infor	mation	(continued)				
							
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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990.

Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990

NO 1545-0047	016
OWB NO	2

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2 Employer identification number SCHOLARSHIPS FOR ASPIRING SCHOLARSHIPS FOR ASPIRING SCHOLARSHIPS FOR ASPIRING ASSIST EFFORTS TO IMPROVE SURVEILLANCE AND SUBPOENA SUPPORT FOR LEGAL | EFFORTS SCHOLARSHIPS FOR ASPIRING (MULTI-MEDIA) EDUCATIONAL 36-4643320 INVESTIGATIVE REPORTING EDERAL INTRUSION INTO (h) Purpose of grant INFORMATION & RESIST or assistance O DEFEND CASES OF JOURNALISTS AND/OR POLITICAL SCIENCE TUDIES TO ASSIST SCHOLARSHIPS FOR X Yes RESS ACCESS TO Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any INTERACTIVE TOURNALISTS TOURNALISTS TOURNALISTS TUDENTS 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) Ö Ö o o o (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash grant 5,000 10,000 5,000 12,000 10,000 5 000 AND FOUNDATION (c) IRC section (if applicable) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) GRIDIRON CLUB 03-0179424 53-0196584 53-0196549 52-0972043 General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1100 KNIGHT HALL, UNIV OF MARYLAND COMMUNICATION - 4400 MASSACHUSETTS REPORTERS COMMITTEE FOR FREEDOM OF 1 (a) Name and address of organization THE PRESS - 1101 WILSON BLVD, STE AMERICAN SOCIETY OF NEWS EDITORS 1100 - ARLINGTON, VA 22209-2211 JOURNALISM INST - COLUMBIA, MO MERRIL COLLEGE OF JOURNALISM -AMERICAN UNIVERSITY SCHOOL OF UNIVERSITY OF MARYLAND PHILIP AVE - NW WASHINGTON DC 20052 GEORGE WASHINGTON UNIVERSITY FOUNDATION - 209 REYNOLDS - COLLEGE PARK, MD 20742 or government NW WASHINGTON, DC 20052 VT 05663 Name of the organization NORWICH UNIVERSITY 158 HARMON DRIVE 2121 I STREET NORTHFIELD, Part 65211

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Enter total number of other organizations listed in the line 1 table

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SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2016)

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Schedule I (Form 990) THE GRIDIRON CLUB AND FOUNDATION Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	SON CLUB Assistance to Go	GRIDIRON CLUB AND FOUNDATION and Other Assistance to Governments and Organization	I ON nizations in the U	nited States (Sche	idule I (Form 990), Pai		36-4643320 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOWARD UNIVERSITY JOAN H JOHNSON SCHOOL OF COMMUNICATION - 525 BRYANT STREET NW - WASHINGTON, DC 20059		501(C)(3)	2,000	0			STUDENT SCHOLARSHIPS FOR PRINT/ONLINE AND BROADCAST NEWS MAJORS
SIGMA DELTA CHI FOUNDATION OF WASHINGTON, DC - P.O. BOX 19555 - WASHINGTON, DC 20036		501(C)(3)	.000,5	0			AWARDING OF SCHOLARSHIP FUNDS FOR 2 JOURNALISM STUDENTS
	1						
							Schedule I (Form 990)

Schedule I (Form 990) (2016) (f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) BASED ON SELECTION CRITERIA USED BY THE CLUB AND FOUNDATION'S PHILANTHROPIC DISTRIBUTED, RECORDED AND ACCOUNTED Part IV | Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. 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. (H) PURPOSE OF GRANT OR ASSISTANCE: SCHOLARSHIPS FOR INTERACTIVE (d) Amount of non-cash assistance (c) Amount of cash grant AMERICAN UNIVERSITY SCHOOL OF COMMUNICATION (b) Number of recipients COMMITTEE, THE AWARDS ARE DETERMINED, NAME OF ORGANIZATION OR GOVERNMENT: COLUMN (H): FOR IN THE FINANCIAL SYSTEM (a) Type of grant or assistance LINE 1, ~ PART I, LINE PART II, Part III

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THE GRIDIRON CLUB AND FOUNDATION

Schedule I (Form 990) (2016)

Schedule I (Form 990) THE GRIDIRON CLUB AND FOUNDATION Part IV Supplemental Information	36-4643320 Page 2
(MULTI-MEDIA)EDUCATIONAL STUDIES TO ASSIST MID-CAREER JOUR	RNALISTS
SCHOLARSHIPS TO ASSIST MID-CAREER EDUCATION OF JOURNALISTS	S
NAME OF ORGANIZATION OR GOVERNMENT:	
REPORTERS COMMITTEE FOR FREEDOM OF THE PRESS	
(H) PURPOSE OF GRANT OR ASSISTANCE: ASSIST EFFORTS TO IMPI	ROVE PRESS
ACCESS TO INFORMATION & RESIST SURVEILLANCE AND SUBPOENA	TARGETING
NAME OF ORGANIZATION OR GOVERNMENT:	
AMERICAN SOCIETY OF NEWS EDITORS FOUNDATION	
(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR LEGAL EFF	ORTS TO DEFEND
CASES OF FEDERAL INTRUSION INTO INVESTIGATIVE REPORTING	
FOCUS ON FREEDOM OF INFORMATION ISSUES	
NAME OF ORGANIZATION OR GOVERNMENT:	
HOWARD UNIVERSITY JOAN H JOHNSON SCHOOL OF COMMUNICATION	
(H) PURPOSE OF GRANT OR ASSISTANCE: STUDENT SCHOLARSHIPS	FOR
PRINT/ONLINE AND BROADCAST NEWS MAJORS	
CHOLARSHIP FUND	

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.

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

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Department of the Treasury Internal Revenue Service Name of the organization

THE GRIDIRON CLUB AND FOUNDATION

Employer identification number 36-4643320

Schedule O (Form 990 or 990-EZ) (2016)

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
MAKING CHARITABLE CONTRIBUTIONS TO QUALIFIED JOURNALISM-RELATED
ENTERPRISES AND PROMOTING FRIENDLY RELATIONS AND THE EXCHANGE OF IDEAS
AMONG ITS MEMBERS.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
MEMBERSHIP EVENT COMMUNICATIONS
EXPENSES \$ 2,052. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
FORM 990, PART VI, SECTION A, LINE 6:
THE ORGANIZATION HAS VARIOUS MEMBERSHIP LEVELS INCLUDING ACTIVE, ASSOCIATED
AND LIMITED. ACTIVE MEMBERS ARE LIMITED TO 65 IN NUMBER. LIMITED MEMBERS
DO NOT HAVE TO BE INVOLVED IN THE NEWS JOURNALISM FIELD BUT THEY MUST BE
ELECTED BY A VOTE OF THE ACTIVE MEMBERS AND CANNOT EXCEED A TOTAL OF 15 IN
NUMBER AT ANY TIME. LIMITED MEMBERS ARE ALSO NON-VOTING MEMBERS.
FORM 990, PART VI, SECTION A, LINE 7A:
OFFICERS AND THE EXECUTIVE COMMITTEE ARE VOTED TO A ONE-YEAR TERM EACH YEAR
BY ACTIVE MEMBERS OF THE ORGANIZATION.
FORM 990, PART VI, SECTION A, LINE 8B:
THERE ARE NO COMMITTEES WITH THE AUTHORITY TO ACT ON BEHALF OF THE
GOVERNING BODY.
FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PROVIDED IN ELECTRONIC FORMAT TO SELECTED THE SECRETARY &

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Schedule O (Form 990 or 990-EZ) (2016)	Page
Name of the organization THE GRIDIRON CLUB AND FOUNDATION	Employer identification numbe 36-4643320
TREASURER TO REVIEW BEFORE FILING.	· ·
FORM 990, PART VI, SECTION C, LINE 19:	
APPLICABLE INFORMATION CAN BE OBTAINED BY REQUESTING FROM	M THE ORGANIZATION

Schedule O (Form 990 or 990-EZ) (2016)

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