orm **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

Go to www.irs.gov/Form990 for instructions and the latest information

2017 Open to Public Inspection

OMB No. 1545-0047

A Fo	r the 2	017 calendar year, or tax year beginning	and end			
B Che	eck if	C Name of organization			D Employer identifica	tion number
/	Address	MUE CRIDIBON CITIE AN	D ECHNIDATION			
	change Name	THE GRIDIRON CLUB AN	D FOONDATION		36-46	43320
	change Initial	Doing business as Number and street (or P.0 box if mail is no	t delivered to street address) Roo	om/suite	E Telephone number	43320
□ f	return Final return/	529 14TH ST NW-NATL				83-4050
â	termin- ated	City or town, state or province, country,	and ZIP or foreign postal code		G Gross receipts \$	525,64
f	Amended return	WASHINGTON, DC 2004			H(a) Is this a group retu	
يُ لــــا	Applica- tion	F Name and address of principal officer C	HRISTOPHER ROWLAND		for subordinates?	Yes X
	pending		NATIONAL PRESS BUIL			
1 Tax	x-exem	pt status X 501(c)(3) 501(c) () ◀ (insert no)	527		
		▶ GRIDIRON. CLUB@GMAIL.		I. v	H(c) Group exemption	
		· · · · · · · · · · · · · · · · · · ·	Association Other	L Year	of formation 2008 M	state of legal domicile, i
Par	τη 5	ummary	CONTRI	דייונם	NO TO THE BE	ייתקאקאייי
ဗ	1 Bri	efly describe the organization's mission or the THE JOURNALISTIC COM	MITNITUV DV ACCICUTNO	TOT	ING TO THE BE	ICATION
nar						
છ ∣	2 Ch	eck this box In the organization dimber of voting members of the governing be	scontinued its operations or disposed	RE(515
Ĝ	3 110	inber of voting members of the governing t	ody (Fait VI, IIIIe Ia)		184	
که در	4 Nu	mber of independent voting members of th tal number of individuals employed in calen	dar year 2017 (Part V line 2a)	NÖV	1 9 2018	
iţ	5 To	tal number of volunteers (estimate if necess	any)		26	
Activities &		tal unrelated business revenue from Part VI	. **	005		-
٩		t unrelated business taxable income from F	· · · · · · · · · · · · · · · · · · ·	OGL	DEN, UT	
			-		Prior Year	Current Year
ای	8 Co	intributions and grants (Part VIII, line 1h) .			78,267.	186,49
ž		ogram service revenue (Part VIII, line 2g)			4,435.	5,46
Revenue		vestment income (Part VIII, column (A), lines	3, 4, and 7d)		50,759.	44,82
	11 Ot	her revenue (Part VIII, column (A), lines 5, 6	i, 8c, 9c, 10c, and 11e)		-14,756.	-23,58
	12 To	tal revenue - add lines 8 through 11 (must e	qual Part VIII, column (A), line 12)		118,705.	213,19
	13 Gr	ants and similar amounts paid (Part IX, colu	mn (A), lines 1-3)	<u> </u>	57,000.	65,00
		nefits paid to or for members (Part IX, colur		L	0.	
es		laries, other compensation, employee bene			0.	
Expenses		ofessional fundraising fees (Part IX, column			0.	
χ̈́		tal fundraising expenses (Part IX, column (D		<u>'• </u>	79,095.	77775
- II -		her expenses (Part IX, column (A), lines 11a			136,095.	77,75 142,75
- 1		tal expenses Add lines 13-17 (must equal F		\vdash	-17,390.	70,44
Soci	19 Re	venue less expenses. Subtract line 18 from	line 12	 		
ည္က				P.	eginning of Current Year 563, 764.	End of Year 634,20
Sel .		tal assets (Part X, line 16)		\vdash	0.	
ao⊂l		tal liabilities (Part X, line 26)	From line 20	 	563,764.	634,20
Par		t assets or fund balances Subtract line 21 Signature Block	rom line 20		30377021	000,00
		s of perjury, I declare that I have examined this re	turn, including accompanying schedules an	nd statem	nents, and to the best of my l	cnowledge and belief, i
		and complete Declaration of propager (other than				, ,
		Ma lillian			11/1	4/18
Sign		Signature of officer	(Transport		Date	// 0
Here		CHRISTOPHER ROWLAND	TREASURER			<u>(</u>
		Type or print name and title			N-1-	TI STA
	Р	rınt/Type preparer's name	Preparer's signature		Date Check	JT PTIN
Paid					self-emptoyed	
Prepa	rer Fi	rm's name 🕒			Firm's EIN	
Use O	nly Fi	rm's address 🕨				
		•		_	Phone no	
May t	he IRS	discuss this return with the preparer shows	above? (see instructions)			Yes L
732001	1 11-28-1	7 LHA For Paperwork Reduction Act	lotice, see the separate instructions	S.		Form 990 (2)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION.

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Form 990 (2017)

13

ABDG TO 36-4643320 Page 3

Form 990 (2017) THE GRIDIRON
Part IV Checklist of Required Schedules

				140
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		х	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	 		
•	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	- <u> </u>		 -
•	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
	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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
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, VIII, 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,			3,7
	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		х	
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	44-		Х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
u	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
۵	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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			7,7
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	40		v
	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,	47		Х
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
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	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	1.5	 -	
	complete Schedule G, Part III	19		х
			200	(2017)

Form 990 (2017) THE GRIDIRON CLUB AND FOUNDATION

Part IV Checklist of Required Schedules (continued)

			162	140
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		_	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		Х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "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		$\tilde{\mathbf{X}}^{-1}$
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?		-	
	If "Yes," complete Schedule N, Part I	31		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
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		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	_ <u></u>		
٠.	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	38	Х	
	The second secon		990	2017)

	1 990 (2017) THE GRIDIRON CLUB AND FOUNDATION 36-4643	320	Р	age 5
Pai	rt 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			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming]	l	
	(gambling) winnings to prize winners?	1c	Х	
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 2a 2a			
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		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
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)	١.,		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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	Х	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
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		
_	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			
	sponsoring organization have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		Х
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			٠ -
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		,
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against]		
	amounts due or received from them)	_		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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			l
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			
С	Enter the amount of reserves on hand			_

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

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 X Check if Schedule O contains a response or note to any line in this Part VI

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	l 1a	1	9[-					
	If there are material differences in voting rights among members of the governing body, or if the governing			7		ľ l				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O			ŧ	·	7				
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		· · · · · · · · · · · · · · · · · · ·	7						
2		P WIGH	arry ourier	2		$\overline{\mathbf{x}}$				
2	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the	e dire	et eupenvieion	 _						
3	of officers, directors, or trustees, or key employees to a management company or other person?	ie dire	ot supervision	3		Х				
	Did the organization make any significant changes to its governing documents since the prior Form 9	200	as filed?	4		X				
4			as meu ·	5		X				
5	Did the organization become aware during the year of a significant diversion of the organization's as:	2612,		6	Х					
6										
/a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or	7a	х					
	more members of the governing body?	-4	-1-1	/a						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockn	olders, or			х				
_	persons other than the governing body?	a b 4 ba	a fallouuna	7b		<u> </u>				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by tr	ie ronowing.	<u> </u>	$\overline{\mathbf{x}}$	لــــا				
а	The governing body?			8a		х				
b	Each committee with authority to act on behalf of the governing body?			8b		<u> </u>				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached	at the		İ					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	<u> </u>	Х				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code)		r					
					Yes	No				
	Did the organization have local chapters, branches, or affiliates?			10a	<u> </u>	X				
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapter	s, affiliates,							
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	-	v				
	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly befo	ore filing the form?	11a		Х				
þ	Describe in Schedule O the process, if any, used by the organization to review this Form 990					<u> </u>				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	ļ					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	-					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," d	escribe	1						
	ın Schedule O how this was done			12c	<u> </u>	37				
13	Did the organization have a written whistleblower policy?			13	<u> </u>	X				
14	Did the organization have a written document retention and destruction policy?			14	 	X				
15	Did the process for determining compensation of the following persons include a review and approve	-	ndependent		1	1				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	'				لــــا				
а	The organization's CEO, Executive Director, or top management official			15a		X				
b	Other officers or key employees of the organization			15b		X				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					1. 1				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a			ليبا				
	taxable entity during the year?			16a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ite its į	participation		1					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nızatıc	n's	<u>-</u>		اــــا				
	exempt status with respect to such arrangements?		 	16b		L				
<u>Sec</u>	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 (Sect	tion 501(c)(3)s only	avaılat	ole					
	for public inspection. Indicate how you made these available. Check all that apply									
	Own website Another's website X Upon request Other (explain									
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	nflict o	of interest policy, a	nd finan	cıal					
	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 bo	oks a	nd records 🕨							
	SUSAN L HAHN - 202-783-4050									
	976 NATIONAL PRESS BUILDING, WASHINGTON, DC 20045	j								

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

X Check this box if neither the organization	nor any related	orga	anıza	ation	CO	mpe	nsat	ted any current officer,	director, or trustee	
(A)	(B)			(6	C)			(D)	(E)	(F)
Name and Title	Average	(do	not o	Pos heck	more	1 than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot or/trus	h an	compensation	compensation	amount of
	week (list any	⊢		Г	Ī	Ī	T .	from the	from related organizations	other compensation
	hours for	individual trustee or director				l.		organization	(W-2/1099-MISC)	from the
	related	ë	stee			nsate		(W-2/1099-MISC)	,	organization
	organizations	trust	naj tru) se	ad w		(** = *********************************		and related
	below ,	wdua	institutional trustee	ļ Ķ	Key employee	Highest compensated employee	Former			organizations
	line)	를	T <u>s</u>	Officer	Key	풀를	쥰			
(1) THOMAS BURR	12.00	ļ		l		1				
SECRETARY		X		Х		L	L	0.	0.	0.
(2) LYNN SWEET	2.00	1	ł	i	ł	l	ŀ			
PRESIDENT		X	<u> </u>	Х	<u> </u>	╙		0.	0.	0.
(3) ROBIN SPROUL	2.00	ļ			ļ	ļ				
EXECUTIVE COMMITTEE MEMBER		X	L	<u> </u>	<u> </u>	Ц_		0.	0.	0.
(4) CHRISTOPHER ROWLAND	3.00	ļ		l						•
TREASURER	<u> </u>	X	<u> </u>	X	<u> </u>	<u> </u>		0.	0.	0.
(5) GEORGE E. CONDON JR.	0.50	1		l						•
HISTORIAN		X		X	_	<u> </u>	<u> </u>	0.	0.	0.
(6) DAVID LIGHTMAN	2.00	ļ				ļ				•
VICE PRESIDENT		X	_		$oxed{oxed}$	<u> </u>		0.	0.	0.
(7) JUDY WOODRUFF	2.00	ļ								•
EXECUTIVE COMMITTEE MEMBER		X		_	<u> </u>	<u> </u>	_	0.	0.	0.
(8) DOYLE MCMANUS	2.00	ļ			İ					_
IMMEDIATE PAST PRESIDENT		Х		Х	_	<u> </u>	_	0.	0.	0.
(9) BRET BAIER	2.00		l		l	ľ			_	^
EXECUTIVE COMMITTEE MEMBER		X	_	_	L.	L		0.	0.	0.
(10) CARL P LEUBSDORF	2.00								_	•
ASSISTANT SECRETARY		L		X	_	$ldsymbol{ldsymbol{ldsymbol{eta}}}$	<u> </u>	0.	0.	0.
		ļ	}	ļ	ļ					
	 	<u> </u>	_		<u> </u>					
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	_	_	<u> </u>	ļ	_	▙				
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		 	igspace	_	<u> </u>	⊢	<u> </u>	ļ		
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	+	_	_		<u> </u>	<u> </u>				
		-								
		<u> </u>	ļ	_	<u> </u>	<u> </u>	_			
		1			l					
	 	\vdash	-		⊢	\vdash				
		ł								
		L			L		l			

	rt VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	and	d Hi	ghe	st C	Compensated Employe	es (continued)			•	age o
	(A)	(B)				C)	<u> </u>		(D)	(E)			(F)	
	Name and title	Average	///	not c		ition		one	Reportable	Reportable		Es	tımate	ed
		hours per	box	, unle	ss pe	rson	ıs bot	h an	compensation	compensation	'n	am	ount	of
		week	⊢	cer an	oao	irecto	rrtrus	tee)	from	from related			other	
		(list any hours for	recto						the	organization	· · · · · ·		pensa	
		related	p o a	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MIS	,0,		om th anızat	
		organizations	truste	al trus		aa/	mpen		(17 27 1000 171100)			_	relat	
		below	ndividual trustee or director	Institutional trustee	la l	Key employee	est co loyee	늘		ı	Ì	orga	nızatı	ons
		line)	hpul	lusti	Officer	Key 6	Highest compensated employee	Former						
		•												
						-						_		
								_			\longrightarrow			
									_					
								_			\dashv			
														
				Н			_				 -∤			
	Sub-total						1	>	0.		0.			0.
С	Total from continuation sheets to Part VII	, Section A							0.		0.			0.
	Total (add lines 1b and 1c)							<u> </u>	0.	,	0.			0.
2	Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	d at	oove	e) wh	o re	eceived more than \$100	,000 of reportabl	е			0
	dempendation from the organization	_	-									T	Yes	No
3	Did the organization list any former officer,	director, or tru	stee	e, ke	y en	nplo	yee,	or	highest compensated e	mployee on	ſ			.
	line 1a? If "Yes," complete Schedule J for su	•		,	•	•					l	3		X
4	For any individual listed on line 1a, is the su	m of reportabl	e cc	mpe	ensa	tion	and	otl	her compensation from	the organization				
	and related organizations greater than \$150	,000? If "Yes,	" co	mple	ete S	Sche	dule	e J f	for such individual			4		X
5	Did any person listed on line 1a receive or a	•				•		elat	ted organization or indivi	dual for services				لپ
<u> </u>	rendered to the organization? If "Yes," comp	olete Schedule	e J f	or su	ıch j	oers	on			<u> </u>		5		X
	tion B. Independent Contractors							_		*		-4: 6		
1	Complete this table for your five highest cor the organization. Report compensation for t	•									pensa	ation ii	om	
	(A)								(B) Description of s	- 1		(C		
משם	Name and business NAISSANCE WASHINGTON DO							-	FOOD & BEVER			omper	isalio	
	NAISSANCE WASHINGTON DO 9 NINTH ST NW, WASHINGT		20	000	1			- 1	SERVICE	AGE		178	3,3	80.
		•						$ \top $						
								\dashv		-				
	-	 						_					_	
,								T				_		
2	Total number of independent contractors (in	_	ot lır	nited	d to	_		ted	d above) who received m	ore than				
	\$100,000 of compensation from the organiz	ation 🛌					L							

Pa	rt VII	Statement of Rever	nue					
		Check if Schedule O conf	tains a response	or note to any lin	e in this Part VIII			
			The server of	۽ ۽	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business	Revenue excluded from tax under sections 512 - 514
1 (2.12)		يح ديد مياهي ا			<u> </u>	revenue	revenue	512 - 514
ints	1 a	Federated campaigns	1a					
Gra	b	Membership dues	16	53,904.				1
ts, An	С	Fundraising events	1c	15,160.				
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations	1d		i			1
	е	Government grants (contribut	tions) 1e					
itio er S	f	All other contributions, gifts, gran	its, and					
rib.		similar amounts not included abo	ve 1f	117,426.				
ont nd (g	Noncash contributions included in lines	1a-1f \$					
ă C	<u>h</u>	Total. Add lines 1a-1f			186,490.			
		1/01/miii ir - r - r - r - r - r - r - r - r -		Business Code	 -			
ice	2 a			900004	2,295.	2,295.		
Program Service Revenue	b			900004	1,925.	1,925.		<u> </u>
en S	С	PRODUCER DINNER		900004	1,245.	1,245.		
gra	d							
ro	е						··	
_	f	All other program service reve	enue	<u> </u>	5 165			ļ
		Total. Add lines 2a-2f		>	5,465.			<u> </u>
	3	Investment income (including	aiviaenas, intere	est, and	17,564.			17,564.
		other similar amounts)			17,304.		·	17,304.
	4 5	Income from investment of ta	x-exempt bond p	roceeds				
ŀ	3	Royalties	(ı) Real	(ii) Personal				
	6.3	Gross rents	(i) Neai	(ii) Fersonai				
	b]
		Rental income or (loss)	-					
		Net rental income or (loss)		<u> </u>				
		Gross amount from sales of	(i) Securities	(II) Other	·		· 	
		assets other than inventory	45,186.	(1,7,01.110.				
	b	Less cost or other basis		-1				
		and sales expenses	17,930.					
	С	Gain or (loss)	27,256.					
	d	Net gain or (loss)		•	27,256.			27,256.
یو	8 a	Gross income from fundraisin	g events (not					
eune		including \$ 15,1	.60 • of .					
ě		contributions reported on line						
Other Rev		Part IV, line 18	а	269,813.				
돭	b	Less direct expenses	b	294,518.				
Ĭ	С	Net income or (loss) from fund	draising events		-24,705.			-24,705.
	9 a	Gross income from gaming ac	tivities See					
		Part IV, line 19	а					
		Less direct expenses	b	L				<u></u>
		Net income or (loss) from gam		<u></u>				ļ
}	10 a	Gross sales of inventory, less	returns	J J]]
- 1		and allowances	а					
		Less cost of goods sold	ь	L				
}	<u>c</u>	Net income or (loss) from sale		P				
- 1		Miscellaneous Revenu		Business Code 900099	1,125.	1,125.		J
		DATE OF VECOGNI	TION FI	-500033	1,143.	1,143.		
ļ	b			} 				
	c	All other revenue					 -	
	d	All other revenue Total. Add lines 11a-11d		<u> </u>	1,125.			
	12	Total revenue. See instructions.		[]	213,195.	6,590.	0.	20,115.
73200	11-28				,			Form 990 (2017)

Form 990 (2017) THE GRIDIRON (Part IX Statement of Functional Expenses

Sect	on 501(c)(3) and 501(c)(4) organizations must com			emplete column (A)	II
	Check if Schedule O contains a respon			(A)	(D)
	not 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	Fundraising expenses
1	Grants and other assistance to domestic organizations	,	65 AAA	•	
	and domestic governments. See Part IV, line 21	65,000.	65,000.		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign			İ	
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
6	trustees, and key employees Compensation not included above, to disqualified	0			
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include			· · · · · · · · · · · · · · · · · · ·	
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management	28,600.		28,600.	
b	Legal		· <u></u>		
С	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17	0 010		8,810.	
f	Investment management fees	8,810.		0,010.	
9	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	4,039.		4,039.	
13 14	Office expenses Information technology	, 1,0001	·	2,002.	
15	Royalties				
16	Occupancy	15,065.		15,065.	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	9,720.	9,720.		
20	Interest				
21	Payments to affiliates		* *** **		
22	Depreciation, depletion, and amortization	1 606		1 606	
23	Insurance	1,686.		1,686.	
24	Other expenses, Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line		,		
	24e amount exceeds 10% of line 25, column (A)				
_	amount, list line 24e expenses on Schedule 0.) PRESENTATION ITEMS	4,871.	4,360.	511.	
a	PRINTING	3,922.	91.	3,831.	
b c	POSTAGE	464.	710	464.	
d	COMPUTER SOFTWARE UPDAT	395.	-	395.	
e	All other expenses	181.		181.	
25	Total functional expenses Add lines 1 through 24e	142,753.	79,171.	63,582.	0.
26	Joint costs Complete this line only if the organization			-	·
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here If following SOP 98-2 (ASC 958-720)				

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	45,971.	1	40,618.
	2	Savings and temporary cash investments	123,770.	2	217,530.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	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			
ts		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
ä	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	ļ <u>.</u>
	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	0.5.0.5.0
	12	Investments - other securities See Part IV, line 11	394,023.	12	376,058.
	13	Investments - program-related See Part IV, line 11		13_	
	14	Intangible assets		14	·
	15	Other assets See Part IV, line 11		15	504 005
	16	Total assets. Add lines 1 through 15 (must equal line 34)	563,764.	16	634,206.
	17	Accounts payable and accrued expenses	· · · · · · · · · · · · · · · · · · ·	17	<u>'</u>
	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	
es	22	Loans and other payables to current and former officers, directors, trustees,	i		
Ħ		key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X of		25	
		Schedule D	0.	25	0.
	26	Total liabilities. Add lines 17 through 25	- 0.	26	0.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and			
Ses		complete lines 27 through 29, and lines 33 and 34.			
ā	27	Unrestricted net assets		27	
Net Assets or Fund Balances	28	Temporarily restricted net assets		28 29	
μ	29	Permanently restricted net assets		29	
Ę		Organizations that do not follow SFAS 117 (ASC 958), check here ► X			
õ		and complete lines 30 through 34.	0.	30	0.
set	30	Capital stock or trust principal, or current funds	0.	31	0.
As	31	Paid-in or capital surplus, or land, building, or equipment fund	563,764.	32	634,206.
Net	32	Retained earnings, endowment, accumulated income, or other funds	563,764.	33	634,206.
_	33	Total net assets or fund balances	563,764.	34	634,206.
	34	Total liabilities and net assets/fund balances	303,704.	34	031,2000

	990 (2017) THE GRIDIRON CLUB AND FOUNDATION	36-4	643320	Page	e 12	
Pai	T XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
	·				_	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,19		
2	Total expenses (must equal Part IX, column (A), line 25)	2		142,753		
3	Revenue less expenses Subtract line 2 from line 1	3		70,442		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	563	,76	4.	
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	634	, 20	6.	
Pai	1 XII Financial Statements and Reporting				_	
	Check if Schedule O contains a response or note to any line in this Part XII		.,			
1	Accounting method used to prepare the Form 990 X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	_ 🗂	Yes	No	
20	Were the organization's financial statements compiled or reviewed by an independent accountant?	O	2a	— ·	X	
Za	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	Jona		:	,	
	Separate basis Consolidated basis Both consolidated and separate basis		2b	-	\mathbf{x}	
b	Were the organization's financial statements audited by an independent accountant?		20	\dashv		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e Dasis,	ľ		ь	
	consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis				- 1	
	•	o audit			, 1	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,	2c	-		
	review, or compilation of its financial statements and selection of an independent accountant?	adula O	20		<u> </u>	
٥-	If the organization changed either its oversight process or selection process during the tax year, explain in Sch			. -	. 1	
Sa	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil Act and OMB Circular A-133?	igie Addit	3a	-	$\overline{\mathbf{x}}$	
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ired audit	<u> </u>	_		
D	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Ju addit	3b			
	or addits, explain wity in confedure of and describe any steps taken to undergo soon addits		Form	990 (2	2017)	
				_	,	

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public

Name of the organization

THE GRIDIRON CLUB AND FOUNDATION

Employer identification number 36-4643320

Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box) 1 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)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 10 X 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). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 12 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 f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization listed (vi) Amount of other (ı) Name of supported (II) EIN (III) Type of organization (v) Amount of monetary n your go document (described on lines 1-10 support (see instructions) support (see instructions) organization Yes No above (see instructions))

Sch	edule A (Form 990 or 990-EZ) 2017 TI	HE GRIDIR	ON CLUB A	ND FOUNDA	TION	36-464	33/20 Page 2
Pa	rt II Support Schedule for (
	(Complete only if you checked		\		on failed to qualify	under Part III II the	organization
_	fails to qualify under the tests	listed below, plea	ise complete Part	III)			
_	ction A. Public Support				,		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 20¼ ⁷	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	•					
2	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge		•				
	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)			X			
6	Public support. Subtract line 5 from line 4			/ \			
Se	ction B. Total Support			/			
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2013	(b) 2014 /	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4		/_	1			
8	Gross income from interest,				1		
	dividends, payments received on				\		
	securities loans, rents, royalties,					1	
	and income from similar sources				1		
9	Net income from unrelated business		/				
	activities, whether or not the						
	business is regularly carried on	/					_
10	Other income Do not include gain				1.		
	or loss from the sale of capital	,	•		l \		
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10				1		
	Gross receipts from related activities,	etc (see instructi	ons)			12	
	First five years. If the Form 990 is for			d, fourth, or fifth ta	ax year as a sectic	<u> </u>	
	organization, check this box and stop	,			•	1	ightharpoons
Sec	ction C. Computation of Publi	c Support Pe	rcentage			1	······································
14	Public support percentage for 2017 (li	ne 6. column (f) d	ıvıded by line 11. d	column (fl)		14	%
	Public support percentage from 2016			(7)		15	%
	33 1/3% support test - 2017. If the o			n line 13, and line	14 is 33 1/3% or r	nore, checkithis bo	
102	stop here. The organization qualifies				, , , , , , , , , , , , , , , , , , , ,		▶ □
F	33 1/3% support test - 2016. If the o				line 15 is 33 1/3%	or more, check th	nis box
•	and stop here. The organization quali					1	▶ □
170	10% -facts-and-circumstances test				e 13 16a or 16b	and line 14 is 10%	or more
176	and if the organization meets the "fac						
	meets the "facts-and-circumstances"					it ti now the organ	
						17a and line 15 is	10% or
t	10% -facts-and-circumstances test						
	more, and if the organization meets the						` \ \
40	organization meets the "facts-and-circ Private foundation. If the organization						, \\ \
ıĸ	rrivate foundation. If the organization	i did not check a	DOX OF THE 13, 10	a, 100, 17a, 0/ 171		edule A (Form 990	
					Cin		7,20,,

(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 qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")	94,695.	66,961.	70,758.	91,185.	186,490.	510,089.	
2	Gross receipts from admissions,			į.				
	merchandise sold or services per-							
	formed, or facilities furnished in any activity that is related to the	`		i				
	organization's tax-exempt purpose	240,360.	251,202.	248,490.	251,555.	269,813.	1261420.	
3	Gross receipts from activities that							
	are not an unrelated trade or bus-							
	iness under section 513	675.	1,100.	1,800.	800.	1,125.	5,500.	
4	Tax revenues levied for the organ-							
	ızatıon'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	335,730.	319,263.	321,048.	343,540.	457,428.	1777009.	
7 a	Amounts included on lines 1, 2, and							
	3 received from disqualified persons						0.	
b	Amounts included on lines 2 and 3 received							
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the							
	amount on line 13 for the year						0.	
c	Add lines 7a and 7b						0.	
8	Public support. (Subtract line 7c from line 6.)	3	r		4		1777009.	
Sec	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013 335, 730.	(b) 2014 319, 263.	(c) 2015	(d) 2016	(e) 2017	(f) Total	
9	Amounts from line 6	335,730.	319,263.	321,048.	343,540.	457,428.	1777009.	
10a	Gross income from interest,				· ·			
	dividends, payments received on securities loans, rents, royalties,							
	and income from similar sources	24,030.	25,323.	24,208.	21,471.	17,564.	112,596.	
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975		· · · · · · · · · · · · · · · · · · ·					
c	Add lines 10a and 10b	24,030.	25,323.	24,208.	21,471.	17,564.	112,596.	
11	Net income from unrelated business							
	activities not included in line 10b, whether or not the business is					05 056	040 500	
	regularly carried on	51,819.	72,855.	32,381.	29,288.	27,256.	213,599.	
12	Other income Do not include gain or loss from the sale of capital							
	assets (Explain in Part VI)	444 550	445 444	200 620	204 000	500 040	2102204	
	Total support. (Add lines 9, 10c, 11, and 12)				394,299.		2103204.	
14	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organız	zation,	
	check this box and stop here							
	ction C. Computation of Publ						94 40 **	
	Public support percentage for 2017 (I		•	column (f))		15	84.49 %	
	Public support percentage from 2016					16	80.54 %	
	ction D. Computation of Inves			40 1 (0)		47	5 35 %	
	, ,	017 (line 10c, column (f) divided by line 13, column (f)) 17 5.35 8 2016 Schedule A Part III line 17						
	Investment income percentage from 2					18		
19a	33 1/3% support tests - 2017. If the						I / is not ▶ X	
	more than 33 1/3%, check this box a						•	
b	33 1/3% support tests - 2016. If the						and	
	line 18 is not more than 33 1/3%, che							
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	structions		

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.	All	Supportin	ng Organizations

Sec	tion A. All Supporting Organizations			
			Yes	No
1	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	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		<u> </u>
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			<u> </u>
	(b) and (c) below '	3a		
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			الـــــا
	organization made the determination	3b		<u> </u>
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			اــــا
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		<u> </u>
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	4a	<u> </u>	 .
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	4b	 	<u> </u>
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	l .		
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(III) the authority under the organization's organizing document authorizing such action, and (IV) how the action			
	was accomplished (such as by amendment to the organizing document)	5a		l
b	Type I or Type II only. Was any added or substituted supported organization part of a class already		 	
	designated in the organization's organizing document?	5b		├
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?			 ,
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			1 1
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6	ļ	 .
7	Did the organization provide a grant, loan, compénsation, 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)	7	ļ	 -
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?		ļ	لــــا
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8	-	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more	l		
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described	 -		
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	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.	9c		├
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	10a		 ,
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	I	l	لسناا

10b

determine whether the organization had excess business holdings)

Sche	dule A (Form 990 or 990-EZ) 2017 THE GRIDIRON CLUB AND FOUNDATION 36-4	54332	0 P	age 5
Pa	rt IV Supporting Organizations (continued)			
		_	Yes	No
	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	<u> </u>	<u> </u>
	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.v	
	Did the dispetant to the analysis of the second supported as a second support		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	٦.		
	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,]	ļ. J
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			1
	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	├	\vdash	 -
~	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			1
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		٠.	
	supervised, or controlled the supporting organization	2		
Sec	tion C. Type II Supporting Organizations			
			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	1.	İ	
	or management of the supporting organization was vested in the same persons that controlled or managed	l		
	the supported organization(s)	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	1		
	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_1_		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			لــــا
	the organization maintained a close and continuous working relationship with the supported organization(s)	2	<u></u>	<u>.</u>
3	By reason of the relationship described in (2), did, the organization's supported organizations have a			1
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3	<u> </u>	L
	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions	5).		
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 The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in.	etructions	-1	
C	Activities Test Answer (a) and (b) below.	Structions	Yes	No
2 a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		103	1
a	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a	-	
h	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
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			
a	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a	_	
ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	<u> </u>		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		
70000	Schedule A (Form		00-E7	2017

Pa	rt V	Type III Non-Functionally Integrated 509(a)(3) Supporting	Orga	anizations	
1		Check here if the organization satisfied the Integral Part Test as a qualifying	trust o	n Nov 20, 1970 (explain in	Part VI) See instructions. All
		other Type III non-functionally integrated supporting organizations must con	nplete S	Sections A through E	
Sect	ion A	- Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net	short-term capital gain	1		
2	Rec	overies of prior-year distributions	2		
3	Othe	er gross income (see instructions)	3		
4	Add	lines 1 through 3	4		
5	Dep	reciation and depletion	5		
6	Port	tion of operating expenses paid or incurred for production or			
	colle	ection of gross income or for management, conservation, or			
	mair	ntenance of property held for production of income (see instructions)	6		
7	Othe	er expenses (see instructions)	7		
8	Adju	usted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect		- Mınımum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggı	regate fair market value of all non-exempt-use assets (see			1
	ınstr	ructions for short tax year or assets held for part of year)			1
а	Aver	rage monthly value of securities	1a		
b	Ave	rage monthly cash balances	1b		
с	Fair	market value of other non-exempt-use assets	1c		
d	Tota	al (add lines 1a, 1b, and 1c)	1d		
е	Disc	count claimed for blockage or other		1	
	facto	ors (explain in detail in Part VI)	<u> </u>		
2	Acq	uisition indebtedness applicable to non-exempt-use assets	2	*****	
3	Sub	tract line 2 from line 1d	3		
4	Casi	h 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	Mult	tiply line 5 by 035	6	····	
7	Rec	overies of prior-year distributions	7		
8	Mıni	imum Asset Amount (add line 7 to line 6)	8		
Sect	ion C	- Distributable Amount			Current Year
1	Adju	usted net income for prior year (from Section A, line 8, Column A)	1		
2		er 85% of line 1	2		
3	Mını	mum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Ente	er greater of line 2 or line 3	4		
5	Inco	ome tax imposed in prior year	5		
6	Dist	tributable Amount. Subtract line 5 from line 4, unless subject to			
	eme	ergency temporary reduction (see instructions)	6	•	
7		Check here if the current year is the organization's first as a non-functionally	/ integra	ated Type III supporting org	ganization (see
		instructions)			

Schedule A (Form 990 or 990-EZ) 2017

Гаі	v Type III Non-Functionally integrated 509	(a)(s) supporting Orga	anizations (continued)		
Secti	ion D - Distributions			Current Year	
1	Amounts paid to supported organizations to accomplish exer				
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity				
3	Administrative expenses paid to accomplish exempt purpose				
4	Amounts paid to acquire exempt-use assets				
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	ne organization is responsive	•		
	(provide details in Part VI) See instructions			·	
9	Distributable amount for 2017 from Section C, line 6				
10	Line 8 amount divided by line 9 amount				
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(II) Underdistributions Pre-2017	(III) Distributable Amount for 2017	
1	Distributable amount for 2017 from Section C, line 6				•
2	Underdistributions, if any, for years prior to 2017 (reason-				ĺ
	able cause required- explain in Part VI) See instructions				
3	Excess distributions carryover, if any, to 2017				
а	<u> </u>				i
b	From 2013				
С	From 2014				
d	From 2015 .				
е	From 2016				
	Total of lines 3a through e				į
	Applied to underdistributions of prior years				t
h	Applied to 2017 distributable amount				i
i	Carryover from 2012 not applied (see instructions)				
J	Remainder Subtract lines 3g, 3h, and 3i from 3f	·			
4	Distributions for 2017 from Section D,				
	line 7 \$				•
	Applied to underdistributions of prior years				
	Applied to 2017 distributable amount				i
	Remainder Subtract lines 4a and 4b from 4				į
5	Remaining underdistributions for years prior to 2017, if				ĺ
	any Subtract lines 3g and 4a from line 2 For result greater			ļ	
	than zero, explain in Part VI. See instructions				!
6	Remaining underdistributions for 2017 Subtract lines 3h				
	and 4b from line 1 For result greater than zero, explain in				
	Part VI See instructions				í
7	Excess distributions carryover to 2018. Add lines 3j				ĺ
	and 4c				1
8					!
	Excess from 2013				i
	Excess from 2014				
	Excess from 2015				1
	Excess from 2016				į
•	EVEDER TROM 2017	ı	i	1	ł

Schedule A (Form 990 or 990-EZ) 2017

Schedule A	(Form 990 or 990-EZ)	2017 THE	GRIDIRON	CLUB_A	ND FOU	NDATION		36-4643320	Page 8
Part VI	Supplemental I Part IV, Section A, Ii line 1, Part IV, Section Section D, lines 5, 6 (See instructions)	nformation nes 1, 2, 3b, 3c on D, lines 2 an , and 8, and Pa	Provide the exp c, 4b, 4c, 5a, 6, 9 d 3, Part IV, Sect art V, Section E, Ii	lanations requa, 9b, 9c, 11a tion E, lines 1d nes 2, 5, and	uired by Part , 11b, and 1 c, 2a, 2b, 3a, 6 Also com	t II, line 10, Part 1c, Part IV, Sec , and 3b, Part V, plete this part fo	II, line 17a or 1 tion B, lines 1 a line 1, Part V, S or any additiona	7b, Part III, line 12, nd 2, Part IV, Sect Section B, line 1e, I information	on C, Part V,
	· · · · · · · · · · · · · · · · · · ·		•						
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

THE GRIDIRON CLUB AND FOUNDATION

Employer identification number 36-4643320

Pai	organizations Maintaining Donor Advised		S OF ACCOUNTS. Complete if the
		(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 v	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any other purpose	e conferring
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land for public use (e.g., recreation or el	· —	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualification	ied conservation contribution in the form	
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic struc	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by th	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		L Yes
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	nservation easements during the year
_	<u> </u>		- A
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserv	ation easements during the year
_	\$	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	0/1-1/41/171//
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 17	∪(⊓)(4)(B)(I)
	and section 170(h)(4)(B)(ii)?	and avenue	
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat	lion's financial statements that describes	s the organization's accounting for
Da	conservation easements rt III Organizations Maintaining Collections of	f Art Historical Treasures, or C	Other Similar Assets.
Га	Complete if the organization answered "Yes" on Form		Times Treseres
10	If the organization elected, as permitted under SFAS 116 (AS		ment and balance sheet works of art
Ia	historical treasures, or other similar assets held for public exh		
	the text of the footnote to its financial statements that describ		ande of public service, provide, in that thin,
.	If the organization elected, as permitted under SFAS 116 (AS		ot and balance sheet works of art, historical
b	treasures, or other similar assets held for public exhibition, ed		
		docation, or research in furtherance of pr	able 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	nourse, or other similar senate for financia	
2	If the organization received or held works of art, historical trea		ai gairi, provide
_	the following amounts required to be reported under SFAS 1:	TO (AGO 900) relating to these items	▶ \$
	Revenue included on Form 990, Part VIII, line 1		*
b	Assets included in Form 990, Part X		- Ψ

Schedule D (Form 990) 2017

c Leasehold improvements

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)

d Equipmente Other

Complete if the organization answered "Yes"	on Form 990, Part IV, lin			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of val	uation Cost or end	i-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other	· · · · · · · · · · · · · · · · · · ·			······
(A) INVESTMENTS IN MUTUAL	75 047	0000		
(B) FUNDS	75,847	. COST		
(C) INVESTMENTS IN PUBLICLY	200 211	. COST	·	
(D) TRADED STOCKS	300,211	COST		
(E)		 	<u> </u>	
(F)				
(G)				<u>, </u>
(H) Total (Col. (h) must equal Form 000, Part V, col. (P) line 12.)	376,058			
Total. (Col. (b) must equal Form 990, Part X, col. (8) line 12.) Part VIII Investments - Program Related.	370,030	•]		
	on Form 000 Port IV Iro	a 11a Saa Earm 990 B	art V line 13	
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value			f-of-year market value
(1)	(0)	(0,111111111111111111111111111111111111	***	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(2)				
(3)			•	
(4)	-			
(5)				·· · · ····
(6)				
(7)		, , , , , , , , , , , , , , , , , , , ,		
(8)				
(9)				
Total (Col. (b) must equal Form 990, Part X, col (B) line 13.)		3		
Part IX Other Assets.				
Complete if the organization answered "Yes"	on Form 990, Part IV, lin	e 11d See Form 990, P	art X, line 15	
(a)	Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				- "
(8)			 .	
(9)	· , .			****
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities.				
Complete if the organization answered "Yes"	on Form 990, Part IV, lin		990, Part X, line 25	·
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
_				
(6)				
(7)				
(7) (8)			,	
(7) (8) (9)			•	
(7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) lin				
(7) (8) (9)	the text of the footnote			

Schedule D (Form 990) 2017 THE GRIDIRON CLUB AND		36-464332	U Page
Part XI Reconciliation of Revenue per Audited Financial St	atements With Revenu	ie 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		Ť	
a Net unrealized gains (losses) on investments	2a	z.	
b Donated services and use of facilities	2b	, 1	
c Recoveries of prior year grants	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 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	<u> </u>	4c	
· · · · · · · · · · · · · · · · · ·	21	5	
Part XII Reconciliation of Expenses per Audited Financial S		<u> </u>	
		303 per metarii.	
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	1 1		
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	<u> </u>	4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	18)	5	
Part XIII Supplemental Information.	<u> </u>		
nes 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) 2017

SCHEDULE G

(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.

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. Go to www irs gov/Form990 for the latest instructions.

Open to Public Inspection

OMB No 1545-0047

Name of the organization Employer identification number THE GRIDIRON CLUB AND FOUNDATION 36-4643320 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17 Form 990 EZ fillers are not required to complete this part 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events С J In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or . J Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fundraiser have custody or control of (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) to (or retained by) (II) Activity or entity (fundraiser) fundraiser from activity organization listed in col (i) 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

36-4643320 Page 2 Schedule G (Form 990 or 990-EZ) 2017 THE GRIDIRON CLUB AND FOUNDATION Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b List events with gross receipts greater than \$5,000 (c) Other events (a) Event #1 (b) Event #2 (d) Total events ANNUAL CLUB WINTER NONE (add col (a) through DINNER DINNER col (c)) (event type) (event type) (total number) Revenue 261,403. 23,570. 284,973. 1 Gross receipts 15,160 15,160. 2 Less Contributions 246,243. 23,570. 269,813. 3 Gross income (line 1 minus line 2) 4 Cash prizes Noncash prizes Direct Expenses Rent/facility costs 171,762. 23,328. 148,434. 7 Food and beverages 89,194. 85,462 3,732 8 Entertainment 29,736. 33,562. 3,826 9 Other direct expenses 294,518. -24,705. 10 Direct expense summary Add lines 4 through 9 in column (d) 11 Net income summary Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming Revenue (a) Bingo bingo/progressive bingo col (a) through col (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes Yes % No No 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities a is the organization licensed to conduct gaming activities in each of these states? Yes b If "No," explain 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No b If "Yes," explain

Schedule G (Form 9	90 or 990-EZ) 2017 THE GRIDIRON CLUB AND FOUNDATION 3	6-4643320 _{Pag}	је 3
	nization conduct gaming activities with nonmembers?	Yes	No
12 Is the organizat	tion a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	haritable gaming?	L Yes L	No
	rcentage of gaming activity conducted in	1 1	
a The organization	·	13a	%
b An outside faci		13b	%
14 Enter the name	e and address of the person who prepares the organization's gaming/special events books and records	;	
Name ▶			
Address ▶ _	,		
15a Does the organ	nization have a contract with a third party from whom the organization receives gaming revenue?	Yes	No
	the amount of gaming revenue received by the organization > \$ and the amoun	nt	
of gaming reve	nue retained by the third party > \$		
c If "Yes," enter r	name and address of the third party		
Name 🕨			
Address ▶ _			
16 Gaming manag	ger information		
Name 🕨			
Gaming manag	ger compensation > \$		
Description of	services provided >		
	·		
			
Director	r/officer Employee Independent contractor		
17 Mandatory dist	tributions		
-	tion required under state law to make charitable distributions from the gaming proceeds to		
retain the state	gaming license?	└ Yes └	No
	ant of distributions required under state law to be distributed to other exempt organizations or spent in	the	
	own exempt activities during the tax year > \$	wt III, Isaac O. Ob. 10b. 15	
	lemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Pa I 6, and 17b, as applicable. Also provide any additional information. See instructions	rt III, IIIIes 9, 90, 100, 13	D,
,	0, 410 110, 100 5,510 110 110 110 110 110 110 110 110 110		
		.=.	
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Schedule G	(Form 990 or 990-EZ)	THE GRIDIRON	CLUB AN	ND FOUNDATION	36-4643320 _{Pag}	e 4
Part IV	(Form 990 or 990-EZ) Supplemental Info	rmation (continued)				
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SCHEDULE I (Form 990)

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Go to www irs gov/Form990 for the latest information

Employer identification number 36-4643320 Name of the organization THE GRIDIRON CLUB AND FOUNDATION

Part I General Information on Grants a	ind Assistance				•	· · · · · · · · · · · · · · · · · · ·	
Does the organization maintain records	to substantiate th	e amount of the grant	s or assistance, the	grantees' eligibilit	y for the grants or as	sistance, and the selec	otion
criteria used to award the grants or assi		J		•			X Yes No
2 Describe in Part IV the organization's pr		itoring the use of gran	t funds in the Unite	d States			
Part II Grants and Other Assistance to					anization answered "	Yes" on Form 990, Par	t IV, line 21, for any
recipient that received more than							
(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 noncash assistance	(h) Purpose of grant or assistance
							SCHOLARSHIPS FOR ASPIRING
NORWICH UNIVERSITY							JOURNALISTS AND/OR
158 HARMON DRIVE							POLITICAL SCIENCE
NORTHFIELD, VT 05663	03-0179424	501(C)(3)	5,000.	0.			STUDENTS
UNIVERSITY OF MARYLAND PHILIP MERRIL COLLEGE OF JOURNALISM -				-			
1100 KNIGHT HALL, UNIV OF MARYLAND		SCHOLARSHIPS FOR ASPIRING					
- COLLEGE PARK, MD 20742		JOURNALISTS					
		1					SCHOLARSHIPS FOR ASPIRING
GEORGE WASHINGTON UNIVERSITY							JOURNALISTS
2121 I STREET							SCHOLARSHIPS FOR ASPIRING
NW WASHINGTON, DC 20052	53-0196584	501(C)(3)	5,000.	0.	•		JOURNALISTS
							SCHOLARSHIPS FOR
AMERICAN UNIVERSITY SCHOOL OF							INTERACTIVE
COMMUNICATION - 4400 MASSACHUSETTS							(MULTI-MEDIA) EDUCATIONAL
AVE - NW WASHINGTON, DC 20052	53-0196549	501(C)(3)	5,000.	0			STUDIES TO ASSIST
							EDUCATIONAL PLATFORM THAT
THE NEWS LITERACY PROJECT							TEACHES MIDDLE AND HIGH
5335 WISCONSIN AVE NW, STE 440							SCHOOL STUDENTS NEWS
WASHINGTON, DC 20015	27-4011343	501(C)(3)	8,000.	٥.			LITERACY AND FOSTERS AN
AMERICAN SOCIETY OF NEWS EDITORS							SUPPORT FOR LEGAL EFFORTS
FOUNDATION - 209 REYNOLDS							TO DEPEND CASES OF
JOURNALISM INST - COLUMBIA, MO		1					FEDERAL INTRUSION INTO
65211	23-9935413	501(C)(3)	15,000.	0			INVESTIGATIVE REPORTING
2 Enter total number of section 501(c)(3)	and government o	rganizations listed in t	he line 1 table				>
3 Enter total number of other organization							
LHA For Paperwork Reduction Act Notice	, see the Instruc	tions for Form 990.					Schedule I (Form 990) (2017

НΔ	For Paperwork Reduction Act Notice, see the In	structions for Form 990.

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2017)

732101 11 01 17

Schedule I (Form 990) THE GRIDI		36-4643320 Page 1					
Part II Continuation of Grants and Other	Assistance to Go	vernments and Orga	inizations in the U	nited States (Sch	edule I (Form 990), Pa	irt II)	
(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 JOHN H JOHNSON SCHOOL OF COMMUNICATIONS - 525 BRYANT STREET NW - WASHINGTON, DC 20059		501(C)(3)	5,000.	0.			STUDENT SCHOLARSHIPS FOR PRINT/ONLINE AND BROADCAST NEWS MAJORS
SIGMA DELTA CHI FOUNDATION OF WASHINGTON, DC - P.O. BOX 19555 - WASHINGTON, DC 20036	52-6055635	501(C)(3)	5,000	0.			AWARDING OF SCHOLARSHIP FUNDS FOR 2 JOURNALISM STUDENTS
JOURNALISM AND WOMEN SYMPOSIUM 2885 SANFORD AVE SW #29226 GRANDVILLE, MI 49418-1342	84-1077803	501(C)(3)	5,000.	0.			PUNDING FOR 4 WORKSHOPS AND TWO REGIONAL ONE-DAY SESSIONS THAT SEEK TO ENHANCE PODCAST SKILLS
STUDENT PRESS LAW CENTER 1608 RHODE ISLAND AVE, NW, STE 211 WASHINGTON, DC 20036	52-1184647	501(C)(3)	2,000	0.			FUNDING FOR STUDENTS FIRST AMENDMENT ISSUES ADVOCACY
			:				
	,						
						l	L

Schedule I (Form 990) (2017) THE GRIDIRON CI	TOR WND L	OUNDATION			36-4643320	Page 2
Part III Grants and Other Assistance to Domestic Individual Part III can be duplicated if additional space is needed	s Complete if the	organization answ	rered "Yes" on Form !	990, Part IV, line 22		
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash as	sistance
	,					
					,	
	 ,					
Part IV Supplemental Information Provide the information re-	ouired in Part I. lir	ne 2. Part III. colum	n (b), and any other a	dditional information		
PART I, LINE 2:	,		- (-/)			
		VID AND EOL	TON TON I C	DUTI ANDUDODIC		
BASED ON SELECTION CRITERIA USED I						
COMMITTEE, THE AWARDS ARE DETERMIN	ED, DIST	RIBUTED, 1	RECORDED AN	ID ACCOUNTED		
FOR IN THE FINANCIAL SYSTEM.						
PART II, LINE 1, COLUMN (H):		<u></u>				
NAME OF ORGANIZATION OR GOVERNMENT	· ·					
AMERICAN UNIVERSITY SCHOOL OF COM	MUNICATIO	N				
(H) PURPOSE OF GRANT OR ASSISTANCE	E: SCHOLA	RSHIPS FO	R INTERACTI	VE		
732102 11 01-17					Schedule I (Form	990) (2017)

Schedule I (Form 990) THE GRIDIRON CLUB AND FOUNDATION 36 Part IV Supplemental Information	5-4643320	Page 2
(MULTI-MEDIA)EDUCATIONAL STUDIES TO ASSIST MID-CAREER JOURNALI	 ISTS	
SCHOLARSHIPS TO ASSIST MID-CAREER EDUCATION OF JOURNALISTS		_
NAME OF ORGANIZATION OR GOVERNMENT: THE NEWS LITERACY PROJECT		
(H) PURPOSE OF GRANT OR ASSISTANCE: EDUCATIONAL PLATFORM THAT	TEACHES	
MIDDLE AND HIGH SCHOOL STUDENTS NEWS LITERACY AND FOSTERS AN	 -	
UNDERSTANDING OF THE FIRST AMENDMENT AND THE IMPORTANCE OF A	REE PRESS	
IN A DEMOCRACY		
NAME OF ORGANIZATION OR GOVERNMENT:		
AMERICAN SOCIETY OF NEWS EDITORS FOUNDATION		
(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR LEGAL EFFORTS	TO DEFEND	ı
CASES OF FEDERAL INTRUSION INTO INVESTIGATIVE REPORTING		
FOCUS ON FREEDOM OF INFORMATION ISSUES	···	
NAME OF ORGANIZATION OR GOVERNMENT:		
HOWARD UNIVERSITY JOHN H JOHNSON SCHOOL OF COMMUNICATIONS		
(H) PURPOSE OF GRANT OR ASSISTANCE: STUDENT SCHOLARSHIPS FOR		
PRINT/ONLINE AND BROADCAST NEWS MAJORS		
CHOLARSHIP FUND		
•		
		· · · · · · · · · · · · · · · · · · ·
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

THE GRIDIRON CLUB AND FOUNDATION

Employer identification number 36-4643320

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
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 &
TREASURER TO REVIEW BEFORE FILING.

Name of the organiza	ition		RON	CLU	JB AND FO	UND	ATION		Emplo 3 (yer identification number 5 – 4 6 4 3 3 2 0
				•						
FORM 990, E	PART VI	, SECT	NOI	c,	LINE 19:					
APPLICABLE	INFORM	MATION	CAN	BE	OBTAINED	ву	REQUESTING	FROM	THE	ORGANIZATION.
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