Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

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

Open to Public

	mal Revenu	ue Service	► Go to www.irs.gov/Form990 for instructions and the latest informa	tion.		Inspect	ion	
A	For the	2018 cale	ndar year, or tax year beginning , 2018, and ending		, 2	0		
В	Check if a	applicable:	C Name of organization The Vintage Chevrolet Club of America, Inc.	DE	D Employer identification number			
	Address	• •	Doing business as	_1	23-7	7280262		
	Name cha	•	Number and street (or P O. box if mail is not delivered to street address) Room/suite	ΕT	Telephone nun	nber		
$\bar{\Box}$	Initial retu	•	PO Box 41238		708-	455-8222		
\vdash		n/terminated	City or town, state or province, country, and ZIP or foreign postal code					
\Box	Amended		Tucson, AZ 85717	ا ا	Gross receints	¢	325344	
\exists					G Gross receipts \$ 32534 group return for subordinates? Yes No			
ليا	Application			•	ordinates includ	_		
-	T				attach a list (s			
÷	Website:	npt status:			mption numbe		,	
<u></u>					VI State of legs		CA	
	art I	Summ		1301 [1	VI State of legs	ai doi niche.		
a	1	_	scribe the organization's mission or most significant activities:					
Ş	<u> </u>	Dedicated	to the preservation and restoration of Chevrolets and GMCs					
Activities & Governance		Ob I - 4b -	- L N. T. if Also area in the discount and the area through discount of the second	4b 0E	0/ 06 140 00	A		
Š			s box Diff the organization discontinued its operations or disposed of more		1 1	t assets.	40	
Ğ	1		of voting members of the governing body (Part VI, line 1a)		3		12	
95			of independent voting members of the governing body (Part VI, line 1b)		4		12	
Ē			ber of individuals employed in calendar year 2018 (Part V, line 2a)		5		0	
ě			ber of volunteers (estimate if necessary)		6		500	
ď	1		elated business revenue from Part VIII, column (C), line 12		7a		0	
	<u> b </u>	Net unrela	ated business taxable income from Form 990-T, line 38	• •	7b		0	
			<u>P</u>	rior Year		Current Ye		
9	1		ions and grants (Part VIII, line 1h)	2	70496		292683	
ĕ		-	service revenue (Part VIII, line 2g)		38299		32661	
Revenue	10	Investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)		0			
ш.	11 (Other rev	enue (Part V III, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0			
	12	Total reve	nue-add lines 8 the en 1 tmust acual Part VIII, column (A), line 12)	36	08795		325344	
	13 (Grants an	d similar amoun ts paid (Part IX, column (A), in es 1-3)					
	14	Benefits p	paid to or for members (Partyl Xacolumon (Al. One 4)					
ø,			other compensation, employee benefits (Part & column (A), lines 5-10)					
use.	16a	Professio	nal fundraising fees (Part IX, column (A), tine 1e)					
Expenses			fraising expenses (Part (X) 3 (Fu) hh (10) line 25) ▶	•				
ā	17 (Other exp	enses (Part IX, column (A), lines 11a-11d, 111-24e)			· · · · · · · · · · · · · · · · · · ·		
		•	enses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2	97262		296413	
	1		less expenses. Subtract line 18 from line 12		11533		28931	
69				of Curren	nt Year	End of Yea	ir	
age and	20	Total asse	ets (Part X, line 16)	2	25636		254568	
Ass	21		lities (Part X, line 26)		0		0	
Net Assets or Fund Balances	22		s or fund balances. Subtract line 21 from line 20	2	25636		254568	
	art II		ure Block		<u> </u>			
_			y, I declare that I have examined this return, including accompanying schedules and statements, ar	nd to the b	est of my kno	wledge and	belief, it is	
			te. Declaration of preparer (other than officer) is based on all information of which preparer has any					
				1				
Sig	เก	Signa	ture of officer	Date				
He		Jim.	Amos, Accountant	4	4/3/	2017	₽	
			or print name and title		~~~~~~~	-		
_	<u>-</u>		e preparer's name Preparer's signature Date	· T.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	PTIN		
Pa		1			Check [_] if self-employed			
	eparer							
Us	e Only			Firm's E				
NAC	v the ID	Firm's ac		Phone n	10.	□ Va-	[]Na	
ivia	y uje iK	o aiscuss	this return with the preparer shown above? (see instructions)	<u>· · · · · </u>	<u> </u>	. LYes	∐ No	

Form 99	0 (2018)	3)	Р	age 2
Part	111	Statement of Program Service Accomplishments		
	_ (Check if Schedule O contains a response or note to any line in this Part III	<u></u>	
1	Briefly	ly describe the organization's mission:		
	Resto	ore, preserve, drive and enjoy vintago Chovrolets and GMC vehicles		

2	Did th	he organization undertake any significant program services during the year wh	nich were not listed on the	
	prior F	Form 990 or 990-EZ?	· · · · · · · · · Tyes	No
	If "Yes	es," describe these new services on Schedule O.		
3		the organization cease conducting, or make significant changes in how it	conducts, any program	
		ces?	· · · · · · · · □Yes 🗹	No
	If "Yes	es," describe these changes on Schedule O.		
4		cribe the organization's program service accomplishments for each of its three	largest program services, as measure	d by
•		inses. Section 501(c)(3) and 501(c)(4) organizations are required to report the		
		otal expenses, and revenue, if any, for each program service reported.	arrount or granto and anotations to or	,
		oral experience, and revenue, it any, for each program control reported.		
	(Codo	or \(\(\(\(\) \\ \) \(\) \) (Revenue \$	
44	(Code	e:) (Expenses \$ including grants of \$) (nevenue \$	`

		·		
4b	(Code	e:) (Expenses \$including grants of \$) (Revenue \$	
	•			
	<u> </u>	\(\int_{	\	
4 c	(Code	e:) (Expenses \$including grants of \$) (Hevenue \$	
		,		


		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
4d	Other	r program services (Describe in Schedule O.)		
-		enses \$ including grants of \$ ) (Revenue \$	)	
4e		program service expenses ▶		
		<u> </u>		



Part	IV Checklist of Required Schedules			
	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		,
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
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		,
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		,
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		•
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		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		,
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		,
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		v
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		,
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		,
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		,
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		,
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		,
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		,
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		,
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		•
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
Ь	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	:	,
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		•
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		•
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		>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		>
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		7
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		•

Part	Checklist of Required Schedules (continued)			
		<del></del> -	Yes	No
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		•
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		,
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	040	,	,
_	through 24d and complete Schedule K. If "No," go to line 25a	24a 24b		-
C	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		1
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		•
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		,
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):			,
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		/
b	Schedule L, Part IV	28b		/
С	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		,
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		/
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		•
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
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		/
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		,
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		,
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
þ	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		J
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	,	
Part				
	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			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			.
	reportable gaming (gambling) winnings to prize winners?	1c	V	
		Forr	n <del>99</del> 0	(2018)

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
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		>
b	If "Yes," enter the name of the foreign country: ►  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		/
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		•
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		'	
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		l	
_	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
θ	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f	-	
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
0	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		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
Ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			- 1
11	Section 501(c)(12) organizations. Enter:			l
	Gross income from members or shareholders			- {
þ	Gross income from other sources (Do not net amounts due or paid to other sources		1	- 1
40-	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u>'</u>
•	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			l
-	the organization is licensed to issue qualified health plans	- }		ŀ
C	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		
	If "Yes," see instructions and file Form 4720, Schedule N.			
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<u> </u>
	If "Yes," complete Form 4720, Schedule O.	1	000	
		Form	990	(2018)

Part	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. S	ee ins	struct	ions.
	Check if Schedule O contains a response or note to any line in this Part VI		<u>.</u>	. 🛛
Secti	on 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 12			[ .
	If there are material differences in voting rights among members of the governing body, or			'
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent .    12			:
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		,
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		1
6	Did the organization have members or stockholders?	6	1	<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint		<u> </u>	
• •	one or more members of the governing body?	7a	_	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
•	stockholders, or persons other than the governing body?	7b		•
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	7	
b	Each committee with authority to act on behalf of the governing body?	8b	~	<del></del> -
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
•	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		•
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	/	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	•	,
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		>
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	,	
13	Did the organization have a written whistleblower policy?	13		1
14	Did the organization have a written document retention and destruction policy?	11		4
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		1
b	Other officers or key employees of the organization	15b		1
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	160		
L	with a taxable entity during the year?	16a	-+	1
Ь	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► CA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  • Own website • Another's website • Upon request • Other (explain in Schedule O)	(Sec	tion 5	601(c)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of inte	erest _l	oolicy	, and
20	financial statements available to the public during the tax year.	orde		
20	State the name, address, and telephone number of the person who possesses the organization's books and reculum Amos, 3006 S Oceola St , Denver, CO 80236 303-881-9072	oras		

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Part VII	Compensation of Officers, Directors	, Trustees, Key Employees,	, Highest Compensate	d Employees, an	d
	Independent Contractors				

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

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

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

Check this box if neither the organization no	r any relate	d orga	aniz	atic	n c	ompe	ensa	ited any curren	t officer, directo	r, or trustee.
				(	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average					than o is both		Reportable	Reportable	Estimated
	hours per					or/trust		compensation	compensation from	amount of
	week (list any hours for	유공	J.	₽	€	캶	77	from the	related organizations	other compensation
	related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	호텔	long long		탕	8 8	,	(W-2/1099-MISC)		organization and related
	line)	S	툴		yee	# #	]			organizations
		8	Ste			8	ł			
			ّ	_	ļ	8.				
(1) Roger James	9									
Area #4 Director	3	1						1		
(2) Jim Gebhardt	30									
Area #9 Director, President	4	1		~				j		
(3) Franklin Gage	35									
Area #10 Director, Vice-President	10	1		~			l			
(4) Jim Karras	4									
Area #1 Director	1									
(5) Tim Larson	5									
Area #5 Director, Treasurer				1						
(6) Jim Matus	6									
Area #2 Director	1					<u> </u>		ļ <u></u>		
(7) David Gowan	10									
Area #3 Director, Secretary	12			~						
(8) Brian Felt	3						ĺ			
Area #6 Director	4									
(9) David Cufr	8		1							
Area #7A Director									<u> </u>	· · · · · · · · · · · · · · · · · · ·
(10) Tım Mehl	2									li.
Area #7B Director	0 25		<u> </u>				ļ			
(11) Erv Steinly, Jr	4									
Area #8 Director										
(12) John Mahoney	11									
Area #11 Director	0		_	L_			<u> </u>			
(13)										
(14)								_::		
	1		i	I	1 1			I		

Part	VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yees			lighe	st C	ompensated E	mployees (conti	nued)		
	Name and title  Average box, unless person is both an hours per officer and a director/trustee) from relation compensation compensation relations from relat								(E) Reportable compensation from related	able Estimated			
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	f org an	ipensati rom the janizati d relate anizatio	on ed
(15)													
(16)													_
(17)											<del></del>		
(18)													
(19)													<del></del>
(20)								-					
(21)								-					
(22)								-					
(23)								-					
(24)						_		-					_
(25)				_							<u> </u>		
1b	Sub-total	VII. Sectio	 n A	L		L	<u>.</u>	<b>&gt;</b>	0				0
d	Total (add lines 1b and 1c)						<u>.</u>	<u>&gt;</u>	0		<u> </u>		0
2	Total number of individuals (including bureportable compensation from the organization)		to th	ose	list	ed a	above	e) w	no received me	ore than \$100,0	UU OT		
3	Did the organization list any former of employee on line 1a? If "Yes," complete							emp	oloyee, or high	est compensat	ed	Yes	No V
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of reg	portal an \$1	ble ( 150,	com 000	iper	nsatio f "Ye	on a s,"	nd other comp complete Sch	ensation from t	he <i>ch</i> 4	-	-
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co ? If "Yes," o	ompe compl	nsat ete	tion Sch	froi nedu	n any ule J t	un or s	related organiz such person	ation or individu			~
Section	on B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization. Repyear.	compensat compe	ed ind nsatio	depe	end or th	ent 1e c	contr alend	acto lar y	ors that receive year ending wit	ed more than \$1 h or within the c	00,000 organiza	of tion's	tax
	(A) Name and business add	Iress							(B) Description of s	ervices	Compe		
2	Total number of independent contractor							th		ove) who	· · ·		
	received more than \$100,000 of compens	ation from t	ne or	gan	ızat	ion i	<u> </u>		0		Fo	rm <b>9</b> 9	<b>(2</b> 018)

Check if Schedule O contains a response or note to any line in this Part VIII.    Total invenue   Total inventual	Part	VIII	Statement of Revenue					_
Second			Check if Schedule O contains a res	sponse or note to			<u></u>	
Business Code   S41850   32861		•			(A) Total revenue	Related or exempt function	business	Revenue excluded from tax under sections
Business Code   S41850   32861	इ इ	1a	Federated campaigns 1a					
Business Code   S41850   32861	irar	b		292683				
Business Code   S41850   32861	s, G	С	Fundraising events 1c					
Business Code   S41850   32861	ar.	d	Related organizations 1d					ì
Business Code   S41850   32861	s, C	е	Government grants (contributions) 1e					'
Business Code   S41850   32861	ion	f	All other contributions, gifts, grants,					
Business Code   S41850   32861	₽ E		and similar amounts not included above 1f					
Business Code   S41850   32861	5 <u>4</u>	g	Noncash contributions included in lines 1a-1f: \$					
3   Investment income (including dividends, interest, and other similar amounts)	ပ္ပ န္	h	Total. Add lines 1a-1f	▶	292683			
3   Investment income (including dividends, interest, and other similar amounts)				Business Code				
3   Investment income (including dividends, interest, and other similar amounts)	Ven	2a	Newsletter Advertising	541850	32661			
3   Investment income (including dividends, interest, and other similar amounts)	8	b						
3   Investment income (including dividends, interest, and other similar amounts)	≅.	С						
3   Investment income (including dividends, interest, and other similar amounts)	3	d						
3   Investment income (including dividends, interest, and other similar amounts)	ᇤ	е					<u> </u>	
3   Investment income (including dividends, interest, and other similar amounts)	ğ	f						
and other similar amounts)  4 Income from investment of tax-exempt bond proceeds  5 Royalties	<u>~</u>	Ť	Total. Add lines 2a-2f		32661	<del></del>		
4 Income from investment of tax-exempt bond proceeds > Floyalties		3	, , ,					
Second Personal   Second Per		_						
One of the part		!		_				
Ga Gross rents   b Less: rental expenses   c Rental income or (loss)   b		5						
B Less: rental expenses c Rental income or (loss)		6-	···	(ii) i ciscinai				]
The state of the s								
d Net rental income or (loss)		1		+				
Ta Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses. c Gain or (loss). d Net gain or (loss)  8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18								
assets other than inventory b Less: cost or other basis and sales expenses . c Gain or (loss)			) <u></u> -					
b Less: cost or other basis and sales expenses. c Gain or (loss) . d Net gain or (loss) .  8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		/a						
and sales expenses .  c Gain or (loss)		h		†				
The state of the s				İ				
Ba Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		С						
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses b c Net income or (loss) from fundraising events  9a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory   Miscellaneous Revenue Business Code  11a b C d All other revenue e Total. Add lines 11a-11d				>			<del></del>	
events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses b c Net income or (loss) from fundraising events  9a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory  Miscellaneous Revenue Business Code  11a b c d All other revenue e Total. Add lines 11a–11d	_						<u></u>	
C Net income or (loss) from fundraising events . ▶  9a Gross income from gaming activities. See Part IV, line 19 a  b Less: direct expenses b  c Net income or (loss) from gaming activities . ▶  10a Gross sales of inventory, less returns and allowances a  b Less: cost of goods sold b  c Net income or (loss) from sales of inventory . ▶  Miscellaneous Revenue Business Code  11a  b		8a	Gross income from fundraising	1				
C Net income or (loss) from fundraising events . ▶  9a Gross income from gaming activities. See Part IV, line 19 a  b Less: direct expenses b  c Net income or (loss) from gaming activities . ▶  10a Gross sales of inventory, less returns and allowances a  b Less: cost of goods sold b  c Net income or (loss) from sales of inventory . ▶  Miscellaneous Revenue Business Code  11a  b	ver			1				
C Net income or (loss) from fundraising events . ▶  9a Gross income from gaming activities. See Part IV, line 19 a  b Less: direct expenses b  c Net income or (loss) from gaming activities . ▶  10a Gross sales of inventory, less returns and allowances a  b Less: cost of goods sold b  c Net income or (loss) from sales of inventory . ▶  Miscellaneous Revenue Business Code  11a  b	Re							
C Net income or (loss) from fundraising events . ▶  9a Gross income from gaming activities. See Part IV, line 19 a  b Less: direct expenses b  c Net income or (loss) from gaming activities . ▶  10a Gross sales of inventory, less returns and allowances a  b Less: cost of goods sold b  c Net income or (loss) from sales of inventory . ▶  Miscellaneous Revenue Business Code  11a  b	Юř		See Part IV, line 18					
9a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities ▶  10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory ▶  Miscellaneous Revenue Business Code  11a b c d All other revenue e Total. Add lines 11a-11d ▶	ᅙ	ì		·	, , , , , , , , , , , , , , , , , , , ,			
See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities . ▶  10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory . ▶  Miscellaneous Revenue Business Code  11a b c d All other revenue e Total. Add lines 11a–11d ▶	_			events . 🕨				
b Less: direct expenses b  c Net income or (loss) from gaming activities >  10a Gross sales of inventory, less returns and allowances a  b Less: cost of goods sold b  c Net income or (loss) from sales of inventory . >  Miscellaneous Revenue Business Code  11a  b		9a						
c Net income or (loss) from gaming activities . ▶  10a Gross sales of inventory, less returns and allowances a  b Less: cost of goods sold b  c Net income or (loss) from sales of inventory . ▶  Miscellaneous Revenue Business Code  11a  b								
10a Gross sales of inventory, less returns and allowances a  b Less: cost of goods sold b  c Net income or (loss) from sales of inventory ▶  Miscellaneous Revenue Business Code  11a  b C  d All other revenue								
returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory >  Miscellaneous Revenue  Business Code  11a b c d All other revenue								ļ
b Less: cost of goods sold b  c Net income or (loss) from sales of inventory ▶  Miscellaneous Revenue Business Code  11a  b  c		10a						
C Net income or (loss) from sales of inventory								
Miscellaneous Revenue         Business Code           11a							<u> </u>	
11a b c d All other revenue		C						<del>                                     </del>
b		110		Duamess Code				
c		į						
d All other revenue								
e Total. Add lines 11a-11d						***		
				<b>. .</b>				1
					325344			<u> </u>

	00 (2018)			<del> </del>	Page 10
Section	IX Statement of Functional Expenses n 501(c)(3) and 501(c)(4) organizations must con	nolete all columns. A	ll other organization	ns must complete co	olumn (A).
	Check if Schedule O contains a respon				
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
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 individuals. See Part IV, lines 15 and 16				
<b>4</b> <b>5</b>	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages				
9 10 11	Other employee benefits				
а	Management	36000			
b C	Accounting	1600			
d	Lobbying		.,		, -
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	63120	····		
12	Advertising and promotion	15025			· · · · · · · · · · · · · · · · · · ·
13	Office expenses	7095			
14 15	Information technology	7095			
16	Occupancy	•		·	· · · · · · · · · · · · · · · · · · ·
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	10088			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	7127			
23	Insurance	7127		<del></del>	•
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Newsletter Editing & Publishing Expense	130061			
b	Board of Directors Expenses	8487			
C	Membership Services Expenses	12781			
d	Committee Expenses	4965			
9	All other expenses  Total functional expenses. Add lines 1 through 24e	296413			
25 26	Joint costs. Complete this line only if the	290413			
20	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)				

Ē	art X				
_		Check if Schedule O contains a response or note to any line in this Pa	(A)	<u></u>	<u>.</u> . <u></u>
			Beginning of year		End of year
	1	Cash—non-interest-bearing	225636	1	254568
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			<b>b</b>
		trustees, key employees, and highest compensated employees.			<u></u>
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			st z
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and	!		
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			<del></del>
ets		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
•	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			,
		· · · · · · · · · · · · · · · · · · ·		10c	· · · · · · · · · · · · · · · · · · ·
	b   11	· · · · · · · · · · · · · · · · · · ·		11	
	12	Investments—publicly traded securities		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	225636	-	254568
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue	14,	19	
	20	Tax-exempt bond liabilities		20	-
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
S	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
ap		disqualified persons. 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			
	ŀ	parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
Ş		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			,
Š	07		225636	27	254568
ala	27 28	Unrestricted net assets	223030	28	254500
<b>8</b>	29	Temporarily restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and			<del></del>
	1	complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	· · · · · · · · · · · · · · · · · · ·
	31	Paid-in or capital surplus, or land, building, or equipment fund	·	31	···································
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	225636	33	254568
	34	Total liabilities and net assets/fund balances	225636	34	254568

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• • • • • • • • • • • • • • • • • • • •					9
Par	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	· · ·			<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3:	25344
2	Total expenses (must equal Part IX, column (A), line 25)	2		2	96413
3	Revenue less expenses. Subtract line 2 from line 1	3			28931
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2	25636
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			1
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		2	54568
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>			
				Yes	No
1	Accounting method used to prepare the Form 990: ☑ Cash ☐ Accrual ☐ Other				- [
	If the organization changed its method of accounting from a prior year or checked "Other," exp	olain in			- {
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	iled or			- 1
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on a		Ì	- 1
	separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov		1	i	
	of the audit, review, or compilation of its financial statements and selection of an independent account	ntant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, ex	olain in			- 1
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	orth in			
	the Single Audit Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such at	ıdits.	3b	لــــــــــــــــــــــــــــــــــــــ	
			Forn	990	(2018)

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

## Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

22-7290262

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

The vintage Chevrolet Club of America, Inc.	•	25-1200202
Part VI, Section B, line 11a		
All financial records and tax forms are available at any time to any member upon request to a	ny club c	officer
Part VI, Section B, line 11b	.W.Z.IVI	,
Form 990 and Schedule O were emailed as attachments to the officers and directors on March	27 201	<u> </u>
	27, 201	······································
Part VI, Section B, line 12c		
Poicy 1.1.4 and Bylaws Article VI, Section 3 both prohibit any person from being an officer or		
contract or vendor services, either individually or through a business. This is monitored by the	e Board	of Directors throughout the year
as part of the annual review of vendor contracts.		
Part VI, Section C, line 19		
Club Bylaws and Policics are available to the members on the club website www.vcca.org and	from an	y officer and director, all of whom
are listed in the club's monthly magazine. Refer to line Part VI, Section B, line 11a above for ac	cess to	financial and tax records, also
refer to Part VI, Section C, line 20.		
Part IX, Statement of Functional Expenses, line 11g		
Other, \$63,120. This is composed of the following contracted work: Newsletter editor \$26,400,	Newslet	ter design team \$24,720,
Webmaster \$12,000.	*********	
Part IX, Other changes in net assets or fund balances, line 9		
Rounding errors \$1.		
	<b>-</b>	

Schedule O (Form 990 or 990-EZ) (2018)		Page Z
Name of the organization	Employer identification number	
		,,

Schedule O (Form 990 or 990-EZ) (2018)