**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

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www irs gov/form990

Open to Public Inspection

ΑI	For the	2013 calendar year, or tax year beginning	and ending			
В	Check if applicable	C Name of organization		D Emplo	oyer identific	cation number
	Addres	PACIFIC BATTLESHIP CENTER				
	Name change				26-3	934742
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suit	te <b>E</b> Teleph	none numbe	•
	Termin					446-9261
	Ameno return	City or town, state or province, country, and ZIP or foreign postal coo	de	<b>G</b> Gross re	eceipts \$	4,398,611.
	Application	SAN PEDRO, CA 90731		H(a) Is th	nis a group re	eturn
	pendin	F Name and address of principal officer: ROSS O'BRIEN		for s	subordinates	? Yes X No
		SAME AS C ABOVE		<b>H(b)</b> Are a	II subordinates ir	cluded? Yes No
<u>1</u>	Tax-exe		'(a)(1) or	27 If "N	lo," attach a	list. (see instructions)
		e: > HTTP://PACIFICBATTLESHIP.COM				n number 🕨
		organization: X Corporation Trust Association Other	L Yea	ar of formatior	ı: 2008 <b>N</b>	State of legal domicile: CA
Pa	art I	Summary				<u> </u>
e	1	Briefly describe the organization's mission or most significant activities: $\overline{\mathbf{T}}$	HE MISSI	ON OF	THE PA	CIFIC
au		BATTLESHIP CENTER IS TO CELEBRATE THE				
Activities & Governance		Check this box  if the organization discontinued its operations or	•		1 1	
်	1					$\frac{10}{7}$
≪ ″		Number of independent voting members of the governing body (Part VI, lin				37
ţį		Total number of individuals employed in calendar year 2013 (Part V, line 2a			₩	740
₹		Total number of volunteers (estimate if necessary)				305,042.
Ă	1	Net unrelated business taxable income from Form 990-T, line 34				51,400.
	<b>├</b>	Net difference business taxable freeine from 1 offi		Prior \		Current Year
•	8	Contributions and grants (Part VIII, line 1h)			6,704.	902,677.
nue		Program service revenue (Part VIII, line 2g)			7,555.	3,495,537.
Revenue	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		•	623.	397.
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0.	0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line		8,20	4,882.	4,398,611.
	-	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines	5-10)	1,13	9,373.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		52	0,143.	4,000.
ă	b	Total fundraising expenses (Part IX, column (D), line 25)   19	<u>6,829.</u>			
ш	1/	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			7,423.	
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) $_{\dots}$			6,939.	3,984,985.
	19	Revenue less expenses. Subtract line 18 from line 12			7,943.	
Net Assets or Fund Balances			<u> </u>	Beginning of (	7,786.	End of Year
SSe Bala	20	Total assets (Part X, line 16)			$\frac{7,766.}{1,567.}$	6,430,380.
let/	21	Total liabilities (Part X, line 26)			$\frac{1,307}{6,219}$ .	4,527,735.
P	art II	Net assets or fund balances. Subtract line 21 from line 20		3,10	0,210.	4,521,155.
		Ities of perjury, I declare that I have examined this return, including accompanying sc	chedules and state	ments and to	the hest of my	/ knowledge and helief it is
	•	t, and complete. Declaration of preparer (other than officer) is based on all informatio		•		, knowledge and boller, it le
	,	A seription because of property (enter than enterly to become an animothical	от типот ртора.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ougo.	
Sig	n	Signature of officer			ate	
Her		ROSS O'BRIEN, TREASURER/CFO				
		Type or print name and title				
		Print/Type preparer's name Preparer's signature		Date	Check	PTIN
Pai	d	JAN A. ROSATI JAN A. ROSAT	I	11/14/	14 self-employe	d №00047985
Pre	parer	Firm's name MACIAS GINI & O'CONNELL LLP			irm's EIN 🛌	68-0300457
Use	Only	Firm's address 3000 S STREET, SUITE 300				
		SACRAMENTO, CA 95816		P	hone no.91	6-928-4600
Ma	v the IF	RS discuss this return with the preparer shown above? (see instructions)				X Yes No

Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: PROVIDES AN INTERACTIVE NAVAL MUSEUM EXPERIENCE THAT HONORS AND
	ILLUSTRATES THE POSITIVE CONTRIBUTIONS OF THE USS IOWA AND ITS CREW AT
	CRITICAL MOMENTS IN AMERICAN HISTORY.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No  If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 3,290,669. including grants of \$) (Revenue \$ 3,190,495.)
	OPERATE A MUSEUM OF NAVAL HISTORY AND PUBLIC ATTRACTION ABOARD THE
	FORMER BATTLESHIP USS IOWA, KNOWN AS THE BATTLESHIP OF PRESIDENTS
	WHICH IS MOORED IN THE PORT OF LOS ANGELES. THIS INCLUDES RESTORING
	THE SHIP TO OPERATING CONDITION, EXPANDING AREAS OF THE SHIP THAT CAN
	BE VIEWED BY THE PUBLIC, AND MAKING THOSE AREAS SAFE FOR PUBLIC ACCESS.
	WE ALSO OPERATE A MUSEUM THAT COLLECTS RELEVANT HISTORICAL MATERIALS
	AND ARTIFACTS.
41:	
4b	(Code:) (Expenses \$
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
	Other program convices (Describe in Schedule O.)
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )
	Total program service expenses   3,290,669.

332002 10-29-13

#### 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	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		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			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		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		Х
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		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			.,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	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
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
•	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	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			_ v
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			<u> </u>
•	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			_
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			000	(0.0.4.0)

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States 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? <i>If</i> "Yes," <i>complete Schedule J</i>	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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) 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
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		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 so, 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	07		Х
00	of any of these persons? If "Yes," complete Schedule L, Part III	27		22
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Х	
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		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?			X
30	If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
32	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
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			Х
27	If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
37	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	

#### | Part V | Statements Regarding Other IRS Filings and Tax Compliance

Second Programment   Second		Check if Schedule O contains a response or note to any line in this Part V					
b Enter the number of Forms W-2G included in line 1a. Enter of -if-ind applicable   10   0   0   0   0   0   0   0   0						Yes	No
b Enter the number of Forms W26 included in line 1a. Enter o I/I not applicable   10   0   0   0   0   0   0   0   0	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	28			
c Dit the organization comply with backup withholding rules for reportable gamments to vendors and reportable gaming (gammling) withings to prize withinsers?  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  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  2b If Wes, has it filed a Form 900 Tor this year? If Wo, 1 for in 3b, provide an explanation in 3c elements of the without the search of the year? If Wo, 1 for in 3b, provide an explanation in 3c elements of the year? If Wo, 1 for in 3b, provide an explanation in 3c elements (year, a financial account) and foreign country (such as a bank account, securities account, or other financial account)?  4a At any time the name of the foreign country.  5b If Yes, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  5c If Yes, 1 financial account in a foreign country (such as a bank account, securities account, or other financial account)?  5c If Yes, 1 financial account in a foreign country (such as a bank account, securities account, or other financial Accounts.  5d Was the organization have in the foreign country.  5e If Yes, 1 financial accounts (year account) and year of Foreign Bank and Financial Accounts.  5c If Yes, 1 financial accounts (year account) and year of Foreign Bank and Financial Accounts.  5c If Yes, 1 financial accounts (year account) and year of Foreign Bank and Financial Accounts.  5c If Yes, 1 financial accounts (year account) and year of Foreign Bank and Financial Accounts.  5c If Yes, 1 financial accounts (year accounts and year year account and year year accounts (year accounts and year year year accounts and year year year accounts and year year year year year year year year	b		1b	0			
2a Earth the number of employees reported on Form W.3. Transmittal of Wage and Tax Statements.  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines Ta and 2a is greater than 250, you may be required to e-file (see instructions)  3a X  Note. If the sum of lines Ta and 2a is greater than 250, you may be required to e-file (see instructions)  3a IX    Note. If the sum of lines Ta and 2a is greater than 250, you may be required to e-file (see instructions)  3a IX    Note. If the sum of lines Ta and 2a is greater than 250, you may be required to e-file (see instructions)  3a IX    Note. If the sum of lines Ta and 2a is greater than 250, you may be required to e-file (see instructions)  3a IX    Note. If the sum of lines Ta and 2a is greater than 250, you may be required to e-file (see instructions)  3a IX    Note. If the sum of lines Ta and 2a is greater than 250, you may be required to e-file (see instructions)  3a IX    Note If the sum of lines Ta and 2a is greater than 250, you may be required the explanation in schedule O.  3b IX    4a IX    X    Note If the sum of lines Ta and 2a is greater than 250, you may be required in the sum of th	С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportal	ole gaming			
2a Earth the number of employees reported on Form W.3. Transmittal of Wage and Tax Statements.  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines Ta and 2a is greater than 250, you may be required to e-file (see instructions)  3a X  Note. If the sum of lines Ta and 2a is greater than 250, you may be required to e-file (see instructions)  3a IX    Note. If the sum of lines Ta and 2a is greater than 250, you may be required to e-file (see instructions)  3a IX    Note. If the sum of lines Ta and 2a is greater than 250, you may be required to e-file (see instructions)  3a IX    Note. If the sum of lines Ta and 2a is greater than 250, you may be required to e-file (see instructions)  3a IX    Note. If the sum of lines Ta and 2a is greater than 250, you may be required to e-file (see instructions)  3a IX    Note. If the sum of lines Ta and 2a is greater than 250, you may be required to e-file (see instructions)  3a IX    Note If the sum of lines Ta and 2a is greater than 250, you may be required the explanation in schedule O.  3b IX    4a IX    X    Note If the sum of lines Ta and 2a is greater than 250, you may be required in the sum of th		(gambling) winnings to prize winners?			1c		
b if at least one is reported on line 2a, did the organization file all required federal employment tax returns?  3a bid the organization have unrelated business gross income of \$1,000 or more dumpt the year?  3b if 17 Yes, "has it filed a Form 990-17 or this year? If "No." to line 3b, provide an explanation in Schedule O  3a At any time during the calendary 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 accountly?  5a Was the organization a party to a prohibited tax shelter transaction at any time during the taken of the foreign country is to a prohibited tax shelter transaction at any time during the tax year?  5b If Yes," is line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?  5c If Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?  5c If Yes," is line 5a or 5b, did the organization file Form 8886-17  6c Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 organizations that many receive deductible contributions under section 170(c).  8c If Yes," is did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 organizations that many receive deductible contributions under section 170(c).  8c If Yes," is did the organization include with every solicitation and party for goods and services provided to the payor?  7 organization receive apprentin in excess of 35 made party as a contribution of quantitation receive a payment in excess of 35 made party as a contribution of quantitation receive and party of the organization receive and party of the organization receive and the organization receive and party of the organization receive and part	2a						
b If a least one is reported on line 2a, did the organization file all required feeral employment tax returns?  Note, if the sum of lines 1 and 2a is greater than 250, you may be required to ~ fell (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a X  b If "Yes," has it filed a Form 990 T for this year? If "No," to line 3b, provide an explanation in Schedule O  4a At any time during the calendary year, did the organization have an inferest 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 accountly?  4b If "Yes," inter the name of the foreign country. ►  See instructions for filing requirements for Form TD F 90.221, Report of Foreign Bank and Financial Accounts.  5b Was the organization a party to a prohibited tax shelter transaction?  5c Using It was the party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5c Using J If "Yes," it line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c Using J If "Yes," it line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c Using J If "Yes," it line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c Using J If "Yes," it line 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  5c Using J If Yes, "If of the organization notify the donor of the value of the goods on services provided?  7c Organization state was received eductible contributions under section 170(c).  8d If "Yes," include on partial to donor advised fund.  9b Using J If Yes, "Indicate the number of Forms 8282 field during the year  9c Using J If Yes, "Indicate the number of Forms 8282 field during the year  9c Using J If If Yes, "Indicate the number of Forms 8282		filed for the calendar year ending with or within the year covered by this return	2a	37			
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year?  b if Yes, 'has it flied a Form 990T for this year? if "\n", 'n" for ina's p, provide an explanation in Schedule O  d 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 accounts.  b if Yes, 'reter the name of the foreign country: ►  See instructions for fling requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial accounts.  5a Was the organization of party to a prohibited tax shelter transaction at any time during the tax year?  5a Was 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 chariable contributions?  6b If Yes, 'reter the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7b Organizations that may receive deductible contributions under section 170(c).  a bid the organization sele, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  b If Yes, 'ride the organization necesse a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  b If Yes, 'ride the organization or eceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c X  d If Yes, 'ride the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  7f If the organization creceived a contribution of cars, boats, arplanes, or other vehicles, did the organization file Form 1090-C7 \$900 personal benefit contract?  7f If Yes, 'ride the organization maintaining door a divised funds an adection of indirectly, on a personal benefit contract?  7f If Yes, 'ride the organization	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?		2b	Х	
b if "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly.  4b If "Yes," enter the name of the foreign country.  5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5a Was 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 or other hands any contributions that were not tax deductible or other work of the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible or of the value of the goods or services provided?  7 Organizations that may receive deductible contributions under section 170(c).  8 If "Yes," idl the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 If "Yes," idle the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  9 If "Yes," idle the organization include with every solicitation and partly for goods and services provided to the part of the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 If "Yes," indicate the number of Forms 8282 filed during the year of the value of the goods or services provided?  9 If "Yes," indicate the number of Forms 8282 filed during the year.  9 If the organization received any funds, directly or indirectly, no payernal property for which it was required to the		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)s				
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?  See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  BY See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  BY See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  BY See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  BY See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  BY See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  BY See in See instructions of See instructions of See instructions on the See instructions on the See instructions on the See instruction on the See instruction on the See instruction on the See instructions on the See instruction on the See instructions on the See instruction on the See in See in See instruction on the See instruction on	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		
financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b (if "Yes," enter the name of the foreign country; "  see instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts.  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any stable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5c If "Yes," to line 5a or 5b, did the organization file Form 8886.7?  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 Z X  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions?  7 Organizations that may receive deductible contributions under section 170(c).  a bid the organization that may receive deductible contributions under section 170(c).  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  7 Organization shall exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  9 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  10 Did the organization multiple year, pay premiums, directly or indirectly, on a personal benefit contract?  7 T X  7 T X  7 T X  9 If the organization maintaining donor advised funds and section 509(a) supporting organizations. Did the supporting organizations but the supporting organizations. Did the supporting organizations but the supporting organizations. Did the supporting organizations but for the account of the properties of the payon organization maintaining donor advised fu	b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b	Х	
b If "Yes," enter the name of the foreign country:   See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts.  Sa Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b X C If "Yes," to line Sa or 5b,	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authori	ity over, a			
See instructions for filing requirements for Form TD F90-22.1, Report of Foreign Bank and Financial Accounts.  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b X  5c If "Yes," to line 5a or 5b, did the organization file Form 8886-17  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6a X  5b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7b Organizations that may receive deductible contributions under section 170(c).  a 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?  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  7b If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c X  g If the organization received a contribution of qualified intellectual property, did the organization file Form 899 as required?  h If the organization make any taxable distribution of qualified intellectual property, did the organization file Form 899 as required?  7b If the organization make any taxable distributions under section 4966?  9c Sponsoring organizations maintaining donor advised funds and section 598(a)3 supporting organizations. Did the supporting organization make any taxable distributions under section 4966?  9c Sponsoring organizations maintaining donor advised funds and section 598(a)3 supporting organization file Form 599.  9c Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contribution for damone of the orga		financial account in a foreign country (such as a bank account, securities account, or other financial	accour	nt)?	4a		X
Sa X	b	If "Yes," enter the name of the foreign country: ►					
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  6 If "Yes," to line 5 aor 5b, did the organization file Form 8886-T?  6 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?  6 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization review a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?  7 If "Yes," did the organization notify the donor of the value of the goods or services provided?  8 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  7 If "Yes," indicate the number of Forms 2282 filed during the year  9 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  9 If the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required?  10 If the organization received a contribution of cars, boats, aniphanes, or other whiches, did the organization file a Form 1038-C?  11 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds.  12 Sponsoring organization make any taxable distributions under section 4986?  13 Section 501(c)(17) organizations. Enter:  14 Initiation fees and capital contribution to a donor, donor advisor, or related person?  15 Section 501(c)(17) organizations. Enter:  16 If Yes, "Initiation fees and capital contribution to a donor, donor advisor, or related person?  17 Did the organization in consection for the amount of tax-exempt c		See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accour	nts.			
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  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?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a 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?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  To 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?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  To Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  If "Yes," inclinates the number of Forms 8282 filed during the year  Did the organization receive any tunds, directly or indirectly, to pay premiums on a personal benefit contract?  To If "Yes," inclination, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  To If the organization received a contribution of qualified intellectual property, did the organization file Form 1988-C?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?  Did the organization make any taxable distributions organization, have excess business holdings at any time during the year?	5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		
6a   X   b   l'Yes, "did 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   l'Yes, "did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7   Organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  a   Did the organization notify the donor of the value of the goods or services provided?  b   l'Yes," did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  c   Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? Filed during the year   Zd    c   Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7   To   X    g   If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h   If the organization received a contribution of qualified intellectual property, did the organizations in a Form 1098-C    Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds.  a   Did the organization make any taxable distributions under section 4966?  9   Sponsoring organizations maintaining donor advised funds.  a   Did the organization make any taxable distributions under section 4966?  9   Section 501(c)(12) organizations. Enter:  a   Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12   Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  13   Section 4947(a)(1) non-exempt charitable trusts. Is t	b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?		5b		X
6a   X   b   l'Yes, "did 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   l'Yes, "did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7   Organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  a   Did the organization notify the donor of the value of the goods or services provided?  b   l'Yes," did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  c   Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? Filed during the year   Zd    c   Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7   To   X    g   If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h   If the organization received a contribution of qualified intellectual property, did the organizations in a Form 1098-C    Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds.  a   Did the organization make any taxable distributions under section 4966?  9   Sponsoring organizations maintaining donor advised funds.  a   Did the organization make any taxable distributions under section 4966?  9   Section 501(c)(12) organizations. Enter:  a   Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12   Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  13   Section 4947(a)(1) non-exempt charitable trusts. Is t	С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5с		
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a 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?  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 If Did the organization received a contribution of or any boats, airplanes, or other vehicles, did the organization file Form 8898 a required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Did the organization make any taxable distributions under section 4966?  9 Did the organization make any taxable distribution sunder section 4966?  9 Did the organization make any taxable distribution sunder section 4966?  9 Did the organization make any taxable distributions under section 4966?  9 Did the organization make any taxable distribution sunder section 4966?  9 Did the organization make any taxable distribution and advised funds.  10 Did the organization make any taxable distribution and advised funds.  11 Section 501(c)(7) organizations. Enter:  a Gross income from other sources (Do not net amounts due or paid to o							
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c). a 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? b If "Yes," indicate the rumber of Forms 8262 filed during the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8262 filed during the year					6a		Х
7 Organizations that may receive deductible contributions under section 170(c). a 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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f Did the organization with the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? f If the organization received a contribution of qualified intellectual property, did the organizations file a Form 1098-C? f If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? f If the organization make any taxable distribution sunder section 4966? g Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organizat	b						
7 Organizations that may receive deductible contributions under section 170(c). a 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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f Did the organization with the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? f If the organization received a contribution of qualified intellectual property, did the organizations file a Form 1098-C? f If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? f If the organization make any taxable distribution sunder section 4966? g Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organization make any taxable distributions under section 4966? g Did the organizat		were not tax deductible?			6b		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  f Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  Sponsoring organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  a 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  11a  b Gross income from members or shareholders  B Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12b  Section 501(c)(12) organizations. Enter:  a Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  11b  12c  Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b E	7						
to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  d If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7e	а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices p	rovided to the payor?	7a		
to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  72	b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
d if "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  9 Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13b If "Yes," enter the amount of reserves the organization is required to maintain by the states in which the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state?  Note. See the instructions f	С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as requ	uired			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  f If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  9a  b Cection 501(c)(7) organizations. Enter:  a 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  11a  Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  12b  If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b  If "Yes," enter the amount of reserves the organization in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information th		to file Form 8282?			7c		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  9 b Did the organization make a distribution to a donor, donor advisor, or related person?  9 b Did the organization make a distributions included on Part VIII, line 12  a 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  10 Did	d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  b Did the organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  9 Section 501(c)(7) organizations. Enter:  a 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  11a  12a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  12b  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?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  13b  1c Enter the amount of reserves on hand  1d Did the organization receive any payments for indoor tanning services during the tax year?  14a X  15b  16 If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontrac	t?	7e		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  b Did the organization make any taxable distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  a 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  in this consumer from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b  Section 501(c)(29) qualified nonprofit health insurance issuers.  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  14a Did the organization receive any payments for indoor tanning services during the tax year?  14a X  It is the requiritation in the payments of these payments? If "No," provide an explanation in Schedule O.  14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control	act?		7f		Х
Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Sponsoring organization make any taxable distributions under section 4966?  a Did the organization make a distribution to a donor, donor advisor, or related person?  9 b Did the organizations. Enter:  a 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  11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13a Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  13c  14a Did the organization receive any payments for indoor tanning services during the tax year?  14a X  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	g	If the organization received a contribution of qualified intellectual property, did the organization file Formation (in the organization of the organization) and the organization of the	orm 88	99 as required?	7g		
organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9  Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Did the organization make any taxable distributions under section 4966? 10  Section 501(c)(7) organizations. Enter: 10  Initiation fees and capital contributions included on Part VIII, line 12	h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation fil	e a Form 1098-C?	7h		
9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital on Part VIII, line 12 Initiation fees and capital Initiation fees and Initiation fees and capital	8						
a Did the organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  a 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  Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  c Enter the amount of reserves on hand  14a Did the organization receive any payments for indoor tanning services during the tax year?  14a X  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tim	e during the year?	8		
b Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  a 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  Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  c Enter the amount of reserves on hand  13c  14a X  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.  14b	9	, , ,					
10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12					9a		
a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders 11a 11b 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? 12a Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Note. See the instructions for additional information the organization must report on Schedule O. 13b 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 13c 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 5b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders 11a 1	10						
a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c  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. 14b	а						
a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 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. 14b			10b				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  c Enter the amount of reserves on hand  14a Did the organization receive any payments for indoor tanning services during the tax year?  14a X  15b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.  15c	11						
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?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  13c  14a X  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.  14b	а		11a				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 12 12b 12 12b 12 12b 12b 12b 12b 12	b						
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		, , , , , , , , , , , , , , , , , , , ,					
Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13c  14a				'	12a		
a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13c  14a			12b				
Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13c  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.  14b					46		
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  c Enter the amount of reserves on hand  13c  14a	а	-			13a		
organization is licensed to issue qualified health plans 13b 13c 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 15b 1f "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b							
c Enter the amount of reserves on hand 13c 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	b		ا یمرا				
14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         b       If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule 0       14b							
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b					44		v
						$\vdash$	
	D	if res, rias it filed a Form 720 to report these payments? If two, provide an explanation in Scheduli	<del>.</del>			990	(2012)

Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	10			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with any other				
	officer, director, trustee, or key employee?			2	X	
3	Did the organization delegate control over management duties customarily performed by or under the	e direct supervision				
	of officers, directors, or trustees, or key employees to a management company or other person? $\dots$			3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 was filed?		4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass	sets?		5		Х
6	Did the organization have members or stockholders?			6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	opoint one or				
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, $\mathbf{s}$					
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue Code.)				
			_		Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such control of the organization have written policies and procedures governing the activities of such control of the organization have written policies and procedures governing the activities of such control of the organization have written policies and procedures governing the activities of such control of the organization have written policies and procedures governing the activities of such control of the organization have written policies and procedures governing the activities of such control of the organization have written policies and procedures governing the activities of such control of the organization have written policies and procedures governing the activities of such control of the organization have been procedured by the organization of the org					
	and branches to ensure their operations are consistent with the organization's exempt purposes? $\ _{\cdot\cdot\cdot}$			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y before filing the fo	rm?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				37	
12a	* * * * * * * * * * * * * * * * * * * *			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y				v	
40	in Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	Λ	
15	Did the process for determining compensation of the following persons include a review and approve					
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			150	Х	
	The organization's CEO, Executive Director, or top management official			15a	X	
D	Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			15b	42	
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment with a				
·Ja				16a		Х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua			ioa		
J	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of evaluation of the organization of evaluation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of evaluation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of evaluation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of evaluation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of evaluation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of evaluation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of evaluation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of evaluation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of evaluation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of evaluation in joint venture arrangement of evaluation of evaluati					
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
<u> 17</u>	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 (or 1024 if applicable), 990, and 990-7	(Section 501(c)(3)s	onlv) a	vailab	le	
-	for public inspection. Indicate how you made these available. Check all that apply.	, = = . (5)(5)5	٠,, ٩	2.0		
		in Schedule O)				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co		cy. and	l finan	icial	
-	statements available to the public during the tax year.		,,			
20	State the name, physical address, and telephone number of the person who possesses the books a	nd records of the ord	ganizati	ion: 🕨	•	
	ROSS O'BRIEN - 877-446-9261		-	-		
		731				

## 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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

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

Compensation from the organizations below with line)   Fig.   F	(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
CHAIRMAN OF THE BOARD		(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizations	compensation from the organization and related
(2) REBECCA S. BEACH BOARD SECRETARY  (3) JONATHAN WILLIAMS (40.00)  EDO & PRESIDENT  (4) VANESSA LEWIS  BOARD MEMBER  (5) TOM EPPERSON BOARD MEMBER  (6) RADM G.E. GRECKOW, USN (RET.)  BOARD MEMBER  (7) DOUGLAS HERMAN BOARD MEMBER  (8) CRAIG JOHNSON BOARD MEMBER  (9) NATE JONES BOARD MEMBER  (10) PATRICK KOHLER BOARD MEMBER  (11) ROSS O'BRIEN TREASURER & CFO  (12) ROBERT KENT PAST PRESIDENT  (13) MICHAEL GETSCHER EXEC VP & COO  (14) DAVID CANFIELD  X X 2 21,000.  0. 0.  0.		10.00							0	0	0
Name	-	10.00	^						0.	0.	
Case		10.00	$\mathbf{x}$		x				21.000.	0.	0.
X		40.00									
BOARD MEMBER	CEO & PRESIDENT		x		Х				130,000.	0.	0.
Tom EPPERSON	(4) VANESSA LEWIS	10.00									
BOARD MEMBER	BOARD MEMBER		X						0.	0.	0.
Columb   C	(5) TOM EPPERSON	10.00									
BOARD MEMBER	BOARD MEMBER		Х						0.	0.	0.
Total Control Contro	(6) RADM G.E. GNECKOW, USN (RET.)	10.00									
BOARD MEMBER			Х						0.	0.	0.
10.00   10.00     10.00		10.00	1								
BOARD MEMBER   X			X						0.	0.	0.
10.00   NATE JONES   10.00		10.00	١							•	•
BOARD MEMBER		10.00	X						0.	0.	0.
10.00   10.0		10.00	ļ.,							0	0
BOARD MEMBER		10 00	X	-					0.	0.	0.
(11) ROSS O'BRIEN       10.00       X       60,045.       0.0.0         (12) ROBERT KENT       40.00       X       165,540.       0.0.0         PAST PRESIDENT       X       165,540.       0.0.0         (13) MICHAEL GETSCHER       40.00       X       112,935.       0.12,967.         (14) DAVID CANFIELD       40.00       X       112,935.       0.12,967.		10.00	₩.							^	0
TREASURER & CFO  (12) ROBERT KENT  PAST PRESIDENT  (13) MICHAEL GETSCHER  EXEC VP & COO  (14) DAVID CANFIELD  X 60,045.  0. 0.  165,540.  0. 0.  112,935.  0. 12,967.		10 00	^	-				-	0.	0.	0.
(12) ROBERT KENT       40.00         PAST PRESIDENT       X       165,540.       0.       0.         (13) MICHAEL GETSCHER       40.00       X       112,935.       0.       12,967.         EXEC VP & COO       40.00       X       112,935.       0.       12,967.		10.00	ł		v				60 045	n	0
PAST PRESIDENT X 165,540. 0. 0. (13) MICHAEL GETSCHER 40.00 X 112,935. 0. 12,967. (14) DAVID CANFIELD 40.00		40 00						┢	00,043.	0.	
(13) MICHAEL GETSCHER  EXEC VP & COO  (14) DAVID CANFIELD  40.00  X 112,935.  0. 12,967.		40.00	ł		x				165.540.	0.	0.
EXEC VP & COO		40.00							103/3101		
(14) DAVID CANFIELD 40.00			1				x		112.935.	0.	12.967.
		40.00									
	DIRECTOR OF IT						Х		111,310.	0.	19,689.
											_

Part VII Section A. Officers, Directors, True (A)  Name and title	(B) Average hours per week (list any	(do box office	not c	Pos heck ss pe	ition more rson		one h an	(D) Reportable compensation from the	(E) Reportable compensation from related		an	(F) stimate nount other	of
	hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organization (W-2/1099-MIS		fr org and	pensa om the anizat d relat anizati	e ion ed
_					_								
		<u> </u> 											
		_											
		_											
		<u> </u>											
1b Sub-total		<u>L</u>	<u>L</u>	<u> </u>		<u>L</u>	<u> </u>	600,830.		0.	3	2,6	
c Total from continuation sheets to Part V d Total (add lines 1b and 1c)							<b>▶</b>	600,830.		0.	3	2,6	0. 56.
<ul> <li>Total number of individuals (including but compensation from the organization</li> </ul>							no re	eceived more than \$100	0,000 of reportab	le		<b>V</b>	4
3 Did the organization list any <b>former</b> officer line 1a? If "Yes," complete Schedule J for								highest compensated e			3	Yes	No X
<ul> <li>For any individual listed on line 1a, is the s</li> <li>and related organizations greater than \$15</li> </ul>	um of reportab	le co	omp	ensa	ation	n and	d otl	her compensation from			4	X	
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," con	•				,			ed organization or indiv	idual for services		5		Х
Section B. Independent Contractors  1 Complete this table for your five highest co	 ompensated in	depe	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of con	npens	ation 1	from	
the organization. Report compensation for (A)	•				vith	or w	ithir	(B)			(0		
Name and business	address	NC	INC	<u> </u>				Description of s	ervices	C	ompe	nsatio	<u>n</u>
Total number of independent contractors (	including but n	ıot liı	mite	d to	tho	se lis	stec	d above) who received m	nore than				

Form 990 (2013) PACIFIC
Part VIII Statement of Revenue

		Check if Schedule O conta	ains a resnons	e or note to any lir	ne in this Part VIII			
		Oncok ii Odricadic O dolik	anio a respons	e or more to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
<u>st</u>	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues						
S, G	С	Fundraising events						
불교		Related organizations						
imi		Government grants (contributi						
i Sign	f	All other contributions, gifts, grant	ts, and					
를		similar amounts not included abov	/e <b>1f</b>	902,677.				
d d	g	Noncash contributions included in lines	1a-1f: \$	262,914.				
<u>8</u> 8	h	Total. Add lines 1a-1f		<u></u>	902,677.			
				Business Code				
<u>ic</u>		ADMISSIONS			2,812,376.	2,812,376.	0.710	
er <		COMMISSIONS		713990	301,404.	292,691.	8,713.	
n S		FILMING REVENUE		713990	176,659.		176,659.	
Re		SPECIAL EVENTS		713990	119,670.	05 400	119,670.	
Program Service Revenue		OTHER		713990	85,428.	85,428.		
۱ ۳		All other program service reve			2 405 527			
$\dashv$		Total. Add lines 2a-2f			3,495,537.			
	3	Investment income (including			397.			397.
		other similar amounts)			397.			397.
	4	Income from investment of tax						
	5	Royalties						
	<b>.</b>	Cuasa vanta	(i) Real	(ii) Personal	+			
		Gross rents			-			
		Less: rental expenses  Rental income or (loss)			_			
		Net rental income or (loss)						
		Gross amount from sales of	(i) Securities					
	ı a	assets other than inventory	(i) Securities	(ii) Oti lei	-			
	h	Less: cost or other basis			-			
		and sales expenses						
	c	Gain or (loss)			-			
		Net gain or (loss)		<u> </u>				
o l		Gross income from fundraising						
	-	including \$	•					
Other Revenu		contributions reported on line						
Ä.		Part IV, line 18		а				
ᆴ	b	Less: direct expenses		b				
١	С	Net income or (loss) from fund	Iraising events	<b>&gt;</b>				
	9 a	Gross income from gaming ac	tivities. See					
		Part IV, line 19		a				
	b	Less: direct expenses		b				
	С	Net income or (loss) from gam	ing activities	<u></u>				
	10 a	Gross sales of inventory, less						
		and allowances		a				
		Less: cost of goods sold		b				
ļ	С	Net income or (loss) from sales		<u></u>				
ļ		Miscellaneous Revenue	e	Business Code				
	11 a							
	b							
	С.							
		All other revenue						
	e 12	<b>Total.</b> Add lines 11a-11d <b>Total revenue.</b> See instructions.		<b></b>	<u>4 398 611</u>	3 190 /95	305 042	397.
332009 10-29-		Total Totoliuo. Ood Ilibii udiiUlib.		······	1-,000,011.	U , 1 J U , 1 J J •	J J J J J J J J J J J J J J J J J J J	Form <b>990</b> (2013)

#### Part IX | Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp				
	Check if Schedule O contains a respon	se or note to any line in	this Part IX	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	355,585.	97,500.	92,545.	165,540
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	Other salaries and wages	1,389,702.	1,310,046.	69,401.	10,255
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):				
''		83,333.		83,333.	
	Legal	13,817.	6,042.	7,775.	
		6,329.	0,0121	6,329.	
d	Accounting	0/3231		0/3231	
u e	D ( ' 1( 1 ' ' ' ' O D ' ' ' ' ' ' ' '	4,000.			4,000
f	Investment management fees	1,000.			1,000
q					
9	column (A) amount, list line 11g expenses on Sch 0.)	296,443.	263,904.	17,843.	14,696
12	Advertising and promotion	159,896.	159,896.	1770131	11,030
13		33,333.	20,702.	11,648.	983
	Office expenses	45,029.	43,815.	349.	865
14	Information technology	43,023.	45,015.	317.	003
15	Royalties				
16	Occupancy	58,718.	19,043.	39,597.	78
17	Travel	30,710.	17,043.	33,337.	7.0
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	13,801.	3,123.	10,266.	412
19	Conferences, conventions, and meetings	22,246.	3,143.	22,246.	414
20	Interest	44,440.		44,440.	
21	Payments to affiliates	480,660.	480,660.		
22	Depreciation, depletion, and amortization	64,714.	400,000.	64,714.	
23	Insurance	04,/14.		04,/14.	
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.) RENT, FUEL, UTILS	498,756.	438,080.	60,676.	
	MAINT, EQUIPMENT RENTAL	325,533.	316,370.	9,163.	
b	EVENTS EXPENSES	113,133.	113,133.	₹,103.	
C	ALL OTHER EXPENSES - MI	12,215.	10,613.	1,602.	
d		7,742.	7,742.	1,002.	
	All other expenses	3,984,985.	3,290,669.	497,487.	196,829
25	Total functional expenses. Add lines 1 through 24e	3,704,903.	3,430,009.	471,401.	130,049
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)				Form <b>990</b> (2013

Form 990 (2013)

Part X | Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to any	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			95,627.	1	243,760.
	2	Savings and temporary cash investments			27,274.	2	240,982
	3	Pledges and grants receivable, net			1,500,000.	3	1,007,000
	4	Accounts receivable, net		80,942.	4	62,753	
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensa					
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section	-	·			
		employers and sponsoring organizations of section					
S		employees' beneficiary organizations (see instr).				6	
Assets	7	Notes and loans receivable, net				7	
Αs	8	Inventories for sale or use				8	
	9					9	
	1	Land, buildings, and equipment: cost or other	I I			9	
	lua	basis. Complete Part VI of Schedule D	100	5.461.870.			
	b		10a	5,461,870.	4,576,632.	10c	4,760,786
	11	Investments publicly traded accurities	100		1/3/0/0320	11	177007700
	12	Investments - publicly traded securities				12	
	1				13		
	13	Investments - program-related. See Part IV, line					
	14	Intangible assets		237,311.	14 15	115,099	
	15	Other assets. See Part IV, line 11	6,517,786.	16	6,430,380		
	16	Total assets. Add lines 1 through 15 (must equ			1,560,097.		250,570
	17	Accounts payable and accrued expenses			1,300,037.	17	250,570
	18	Grants payable		18			
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
Liabilities	22	Loans and other payables to current and former					
Ē		key employees, highest compensated employee			000 034		900 000
Lia I		Complete Part II of Schedule L			809,834.	22	800,000
	23	Secured mortgages and notes payable to unrela			75,000.	23	733,243
	24	Unsecured notes and loans payable to unrelate			75,000.	24	133,243
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	s 17-24).	Complete Part X of	206 626		110 022
		Schedule D			306,636. 2,751,567.	25	118,832.
	26	Total liabilities. Add lines 17 through 25			2,731,307.	26	1,902,045
		Organizations that follow SFAS 117 (ASC 958		here   A and			
Ses		complete lines 27 through 29, and lines 33 an			2 266 210		2 401 640
<u>a</u> n	27	Unrestricted net assets			2,266,219.	27	3,491,649, 1,036,086,
Ва	28	Temporarily restricted net assets			1,300,000.	28	1,030,000
pur	29					29	
Ę		Organizations that do not follow SFAS 117 (A	SC 958)	, check here ▶□□			
S OI		and complete lines 30 through 34.					
set	30	Capital stock or trust principal, or current funds				30	
As	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in			2 766 212	32	<b>1</b>
_	33	Total net assets or fund balances			3,766,219.	33	4,527,735
	34	Total liabilities and net assets/fund balances			6,517,786.	34	6,430,380. Form <b>990</b> (2013)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)		<u>4,39</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,98		
3	Revenue less expenses. Subtract line 2 from line 1	3			26.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,76	6,2	<u> 19.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6	34	7,8	90.
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	4,52	7,7	35.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit			
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

#### **SCHEDULE A**

(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.

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection **Employer identification number** 

OMB No. 1545-0047

			BATTLESHIP						2	6-3934	742	
Part I	Reason	for Public Char	<b>ity Status</b> (All organiz	ations mu	st complet	te this part	t.) See inst	ructions.				
The organ  1	A church, co A school des A hospital or	nvention of churches cribed in <b>section 17</b> a cooperative hospi search organization	because it is: (For lines 1 s, or association of church (O(b)(1)(A)(ii). (Attach Sotal service organization operated in conjunction	ches desc hedule E.) described	ribed in <b>se</b> in <b>section</b>	ection 170	(b)(1)(A)(i) (A)(iii).		<b>i).</b> Enter	the hospita	l's nam	ne,
5	An organizati section 170 A federal, state An organizati section 170( A community An organizati activities relatincome and use section An organizati more publicly describes the alimitation of the organizati supporting of Since August (i) A person the gove (ii) A family (iii) A 35% of	ton operated for the (b)(1)(A)(iv). (Complete, or local government on that normally rectable) (1)(A)(vi). (Complete of trust described in some of the tone of the	ent or governmental unit eives a substantial part of the Part II.)  section 170(b)(1)(A)(vi). (eives: (1) more than 33 1 motions - subject to certal axable income (less sections) e Part III.)  perated exclusively to test organization and complete organization and complete organization is not than one or more publicly then determination from this box  organization accepted are injectly controls, either alients.	t described of its supp (Complete 1/3% of its ain exceptition 511 taust for public benefit on 509(a)(ete lines 1 ype III - Function Function 1 y supported the IRS that any gift or cone or togor (ii) above	d in section and Part II.) support from a support from support from such and (in x) from but it is safety. Such and it is a support from section ally a directly out organized at it is a Tymontribution ether with support from the support from th	on 170(b)(1) government rom contri 2) no more sinesses a See section rom 509(a)(2) n 11h. integrated or indirectly ations described repel, Type n from any persons of	butions, me than 33 facquired beneficions of, 2). See second by one or cribed in second beneficions of the following the following the following the second beneficions of the following the second beneficions of the following the following the following the second beneficions of the following the following the following the second beneficions and the second beneficions a	nembershi i/3% of its y the orga i). or to carr ction 509(i i Typ r more discection 508 e III  owing pers in (ii) and (	p fees, as support anization by out the all - No qualified $\Theta(a)(1)$ or sons?	and gross re t from gross after June 3 e purposes of neck the box on-functional persons oth r section 509	oceipts invest 30, 197 of one that the that her that 9(a)(2).	from tment 75. or
. ,	of supported anization	(ii) EIN	(described on lines 1-9 above or IRC section	(iv) Is the d in col. (i) lis governing Yes	sted in your document?	organizat	ion in col.	(vi) Is organizatio (i) organiz U.S <b>Yes</b>	ed in the	<b>(vii)</b> Amoun sup	t of mo	netary
Total												

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

Schedule A (Form 990 or 990-EZ) 2013

332021 09-25-13

#### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	15,250.	20,283.	342,567.	5,426,704.	1,250,567.	7,055,371.
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						
4	Total. Add lines 1 through 3	15,250.	20,283.	342,567.	5,426,704.	1,250,567.	7,055,371.
	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)						482,736.
6	Public support. Subtract line 5 from line 4.						6,572,635.
	ction B. Total Support						
_	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	15,250.	20,283.	342,567.	5,426,704.	1,250,567.	7,055,371.
	Gross income from interest,			-		, ,	
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources				623.	397.	1,020.
9	Net income from unrelated business						· · · · · · · · · · · · · · · · · · ·
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)		230.	-206.			24.
11	Total support. Add lines 7 through 10						7,056,415.
	Gross receipts from related activities,	etc. (see instruction	nns)			12 2	,709,529 <b>.</b>
	<b>First five years.</b> If the Form 990 is for						, ,
	organization, check this box and <b>stop</b>				•		
Sec	ction C. Computation of Publi		rcentage				······································
	Public support percentage for 2013 (I			olumn (f))		14	93.14 %
	Public support percentage from 2012					15	%
	33 1/3% support test - 2013. If the o					nore, check this bo	
	stop here. The organization qualifies	•		•		•	
b	33 1/3% support test - 2012. If the o						
	and stop here. The organization quali	•		•		•	
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac	ū					•
	meets the "facts-and-circumstances"		•	-	•	•	
h	10% -facts-and-circumstances test						
~	more, and if the organization meets the	•				•	
	organization meets the "facts-and-circ						
18	Private foundation. If the organization						
	The organization in the organization	GIG HOL GHOOK A	20X 011 III 0 10, 100	<u>α, .ου,α, οι 17υ</u>		dule A (Form 990	

Schedule A (Form 990 or 990-EZ) 2013

#### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support	now, prodec com	proto r art my				
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>1</b> Gifts, grants, contributions, and		, , , , , , , , , , , , , , , , , , ,	, ,	` '		.,
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and						
3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6		, , , , , , , , , , , , , , , , , , ,	, ,	, ,		.,
<b>10a</b> Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b, whether or not the business is						
regularly carried on						
12 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV.)						
14 First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax vear as a sectic	on 501(c)(3) organiz	ation.
check this box and <b>stop here</b>	•		•	•		
Section C. Computation of Publi	c Support Pe	rcentage				
15 Public support percentage for 2013 (li	ne 8, column (f) d	livided by line 13, o	column (f))		15	%
16 Public support percentage from 2012	Schedule A, Part	III, line 15			16	%
Section D. Computation of Inves	tment Incom	e Percentage				
17 Investment income percentage for 20	13 (line 10c, colur	mn (f) divided by lir	ne 13, column (f))		17	%
18 Investment income percentage from 2	:012 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2013. If the					33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box ar	nd <b>stop here.</b> The	e organization qual	ifies as a publicly	supported organiz	ation	▶□
b 33 1/3% support tests - 2012. If the	organization did r	not check a box or	line 14 or line 19	a, and line 16 is mo	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, chec	ck this box and <b>s</b>	<b>top here.</b> The orga	anization qualifies	as a publicly supp	orted organization	
20 Private foundation. If the organization	า did not check a	box on line 14, 19	a, or 19b, check t	his box and see in:	structions	<u> </u>

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

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

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

2013
Open to Public Inspection

Name of the organization

PACIFIC BATTLESHIP CENTER

Employer identification number 26 – 3934742

Par	t I Organizations Maintaining Donor Advised	Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.	-	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writ	ting that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's ex		
6	Did the organization inform all grantees, donors, and donor advi		
	for charitable purposes and not for the benefit of the donor or d		
Par			
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or edu	`	storically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	d conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			•
С	Number of conservation easements on a certified historic struct		
d	Number of conservation easements included in (c) acquired after		- I
	listed in the National Register		l l
3	Number of conservation easements modified, transferred, release	sed, extinguished, or terminated by the	e organization during the tax
	year►		
4	Number of states where property subject to conservation easer	ment is located ▶	
5	Does the organization have a written policy regarding the period	dic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it has	olds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, an	d enforcing conservation easements of	luring the year >
7	Amount of expenses incurred in monitoring, inspecting, and enf	forcing conservation easements during	g the year ▶ \$
8	Does each conservation easement reported on line 2(d) above s	satisfy the requirements of section 170	0(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	easements in its revenue and expense	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	n's financial statements that describes	the organization's accounting for
	conservation easements.		
Par	t III Organizations Maintaining Collections of A	Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" to Form 99	0, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC	958), not to report in its revenue stater	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibit	ition, education, or research in furthera	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes	s these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC	958), to report in its revenue statemen	t and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, educ	cation, or research in furtherance of pu	blic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treasures	ures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under SFAS 116 $$		
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

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

Schedule D (Form 990) 2013

Sche	dule D (Form 990) 2013 PACIFIC	BATTLESHI	P CE	NTER			2	6-39	3474	2 P	age 2
	t III Organizations Maintaining (	Collections of A	rt, His	torical Tr	easures, e	or Othe					
3	Using the organization's acquisition, access	sion, and other record	s, chec	k any of the	following tha	at are a si	gnificant u	se of its	collectio	n iten	าร
	(check all that apply):										
а	Public exhibition	d	Ш	Loan or exc	hange progra	ams					
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's of	collections and explain	n how tl	hey further t	he organizati	ion's exen	npt purpos	se in Par	t XIII.		
5	During the year, did the organization solicit	or receive donations	of art, h	istorical trea	sures, or oth	er similar	assets				
	to be sold to raise funds rather than to be m	naintained as part of t	he orga	nization's co	ollection?				Yes		☐ No
Pai	t IV Escrow and Custodial Arrar	<b>ngements.</b> Comple	ete if the	e organizatio	n answered	"Yes" to F	orm 990,	Part IV,	line 9, or		
	reported an amount on Form 990, Pa	art X, line 21.									
1a	Is the organization an agent, trustee, custoo	dian or other intermed	liary for	contribution	ns or other as	sets not	included		_		
	on Form 990, Part X?							🗀	Yes		No
b	If "Yes," explain the arrangement in Part XIII										
									Amour	ıt	
С	Beginning balance						1c				
d	Additions during the year										
	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on F								Yes		No
	If "Yes," explain the arrangement in Part XIII									. $\square$	
Pai							<b>)</b> .				
	·	(a) Current year	(b) F	Prior year	(c) Two yea	rs back (	d) Three ye	ars back	(e) Fou	r years	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cu		e (line 1	a. column (a	a)) held as:	·					
	Board designated or quasi-endowment	,	%	<b>J</b> , (	"						
b	Permanent endowment	<del></del> %	_								
С	Temporarily restricted endowment ▶	<del></del> %									
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%.									
За	Are there endowment funds not in the poss		ation th	at are held a	ınd administe	ered for th	ne organiza	ation			
	by:	3					J			Yes	No
	(i) unrelated organizations								3a(i)		
b	If "Yes" to 3a(ii), are the related organization								3b		
4	Describe in Part XIII the intended uses of th										
Pai	t VI Land, Buildings, and Equipr										
	Complete if the organization answere		, Part I\	/, line 11a. S	See Form 990	, Part X. li	ine 10.				
	Description of property	(a) Cost or o		i e	or other		cumulated		(d) Boo	k valu	ie
	2000p.i.o. proporty	basis (investr		1 ' '	(other)		reciation		(=, 550		-
1a	Land	,									
	Buildings										
	Lessehold improvements			3 91	9.906.	5	45.44	9.	3 37	4.4	57.

Schedule D (Form 990) 2013

155,635.

1,386,329.

4,760,786.

e Other.

d Equipment

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

1,541,964.

Part VII Investments - Other Securities
---

Complete if the organization answered "Yes" to Form 990, Part IV, line 11 th. See Form 990, Part IX, line 12.  (g) Method of valuation: Cost or end-of-year market value  (g) Method of valuation: Cost or end-of-year market value  (g) Closely-held equity interests  (g) Other  (A)  (ii)  (iii)  (ii	Part VII Investments - Other		5 000 D 1 N		D 1771 40	
(1) Financial derivatives (2) Colosely held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (F) (G) (F) (G) (G) (F) (G) (G) (F) (G) (G) (F) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G						d-of-vear market value
	(A) = 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		(b) Book value	(b) Motriod of	valdation: Coot of City	a or your market value
(3) Other (A) (B) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C						
(A) (B) (C) (C) (D) (D) (E) (F) (F) (G) (H) (G) (F) (G) (F) (G) (F) (G) (F) (G) (F) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G						
(B)						
(C) (C) (E) (F) (F) (F) (G) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F						
(E) (F) (G) (H) Total. (Col. (b) must equal form 990, Part X, col. (B) line 12.) ▶  Part VIII   Investments - Program Related.  Complete if the organization answered *Yes* to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment (b) Book value (c) Method of valuation: Cost or end of year market value (d) (e) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g						
(E) (F) (G) (H) (F) (F) (G) (F) (G) (F) (G) (F) (G) (G) (G) (G) (G) (G) (G) (H) (G) (G) (H) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G						
(F) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C						
(G) (H) (H) (Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶    Part VIII   Investments - Program Related.   Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment (b) Book value (c) Method of valuation: Cost or end of year market value (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g						
Total. (Col. (b) must equal Form 990, Part X, col. (8) line 12.)   Total. (Col. (b) must equal Form 990, Part X, col. (8) line 12.)						
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)   Part VIII   Investments - Program Related.   Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.   (a) Description of investment   (b) Book value   (c) Method of valuation: Cost or end-of-year market value   (1)						
Part VIII   Investments - Program Related.		X. col. (B) line 12.)				
Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g						
(a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (6) (7) (8) (9) (9) (1) (1) must equal Form 990, Part X, col. (8) line 13.) Part IX Other Assets.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (9) (1) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability (b) Book value (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS (1) Book value (2) (3) (4) (5) (6) (6) (7) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9		=	o Form 990 Part IV	line 11c. See Form 990	Part X line 13	
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶  Part IX Other Assets.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (9) (7) (8) (9) (9) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS (3) (4) (4) (5) (6) (7) (8) (9)						d-of-year market value
(2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (2) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (2) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (2) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (2) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (2) (3) (4) (5) (6) (7) (6) (7) (8) (9) (9) (1) (1) (2) (3) (4) (5) (6) (7) (6) (7) (8) (9) (9) (1) (1) (2) (3) (4) (4) (5) (6) (7) (6) (7) (8) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (6) (7) (6) (6) (7) (7) (8) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (6) (7) (6) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (6) (6) (7) (6) (9) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (6) (6) (7) (6) (9) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (6) (6) (7) (6) (6) (7) (8) (9) (9) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (6) (6) (7) (6) (6) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9			. ,			,
(3) (4) (5) (6) (7) (8) (9)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶  Part IX Other Assets.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part 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 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS 118,832. (3) (4) (4) (5) (6) (7) (7) (8) (9)						
(4) (5) (6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)    Part XZ Other Assets.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Collumn (b) must equal Form 990, Part X, col. (B) line 15.)    Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS 118 , 832. (3) (4) (4) (5) (6) (6) (7) (7) (8) (9)						
(5) (6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶    Part IX   Other Assets.   Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part 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 15)   ▶   Part X   Other Liabilities.   Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability   (b) Book value   (1) Federal income taxes   2 CAPITAL LEASE OBLIGATIONS   118,832. (3) (4) (5) (6) (7) (8) (9)						
(6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶  Part IX Other Assets.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9) Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS 118,832. (3) (4) (5) (6) (7) (8) (9) (9)						
(7) (8) (9)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶    Part IX						
(8) (9)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶    Part IX   Other Assets.   Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.    (a) Description   (b) Book value						
(9)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶  Part IX Other Assets.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part 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 15.) ▶  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes  (2) CAPITAL LEASE OBLIGATIONS 118,832.  (3)  (4)  (5)  (6)  (7)  (8)  (9)						
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)						
Part IX		X col (B) line 13 )				
Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part 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 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS 118,832. (3) (4) (5) (6) (7) (8) (9)		74, 0011 (B) 11110 101)				
(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 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS 118,832. (3) (4) (5) (6) (7) (8) (9)		tion answered "Yes" t	o Form 990. Part IV	line 11d. See Form 990.	Part X. line 15.	
(1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS 118,832. (3) (4) (5) (6) (7) (8) (9)				,	Taren, mio 10.	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS 118, 832. (3) (4) (5) (6) (7) (8) (9)	(1)					
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS 118,832. (3) (4) (5) (6) (7) (8) (9)						
(4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS 118,832. (3) (4) (5) (6) (7) (8) (9)						
(5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS 118,832. (3) (4) (5) (6) (7) (8) (9)	•					
(6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS 118,832.  (3) (4) (5) (6) (7) (8) (9)						
(7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS 118,832. (3) (4) (5) (6) (7) (8) (9)						
(8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS 118,832. (3) (4) (5) (6) (7) (8) (9)						
(9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS 118,832.  (3) (4) (5) (6) (7) (8) (9)	•					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS 118,832.  (3) (4) (5) (6) (7) (8) (9)						
Part X Other Liabilities.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes  (2) CAPITAL LEASE OBLIGATIONS 118,832.  (3) (4) (5) (6) (7) (8) (9)		90. Part X. col. (B) line	15.)		•	
Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS 118,832.  (3) (4) (5) (6) (7) (8) (9)			- /			
1. (a) Description of liability (b) Book value  (1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS (3) (4) (5) (6) (7) (8) (9)	Complete if the organiza	tion answered "Yes" t	o Form 990, Part IV	, line 11e or 11f. See Forr	n 990, Part X, line 25	
(1) Federal income taxes (2) CAPITAL LEASE OBLIGATIONS 118,832. (3) (4) (5) (6) (7) (8) (9)	(1)		,		, ,	
(2) CAPITAL LEASE OBLIGATIONS 118,832. (3) (4) (5) (6) (7) (8) (9)		<u> </u>			-	
(3) (4) (5) (6) (7) (8) (9)		BLIGATIONS		118,832.		
(4) (5) (6) (7) (8) (9)				<u>, , , , , , , , , , , , , , , , , , , </u>	-	
(5) (6) (7) (8) (9)	·				-	
(6) (7) (8) (9)	•					
(7) (8) (9)	·					
(8) (9)	<u>-</u>					
(9)						
		90, Part X, col. (B) line	25.)	118,832.		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2013

332053 09-25-13

Par	Reconciliation of Revenue per Audited Financial S		Revenue per H	eturn	l <b>.</b>
	Complete if the organization answered "Yes" to Form 990, Part IV,				1 716 E01
1	Total revenue, gains, and other support per audited financial statements			1	4,746,501.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1			
а	Net unrealized gains on investments		247 000	-	
b	Donated services and use of facilities		347,890.	-	
C	Recoveries of prior year grants			-	
d	Other (Describe in Part XIII.)				247 000
е	Add lines 2a through 2d			2e	347,890.
3	Subtract line 2e from line 1			3	4,398,611.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.1			
а	Investment expenses not included on Form 990, Part VIII, line 7b			-	
b	Other (Describe in Part XIII.)				0
_	Add lines 4a and 4b			4c	0.
5 <b>D</b> 21	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1 rt XII Reconciliation of Expenses per Audited Financial S	Statomonte Witl	h Evnonsos nor	5 Potu	4,398,611.
Pai			ii Experises per	netu	111.
	Complete if the organization answered "Yes" to Form 990, Part IV,			1	3,984,985.
1	Total expenses and losses per audited financial statements			1	3,304,303.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	ا م ا			
а	Donated services and use of facilities			-	
b	Prior year adjustments			-	
C	Other losses			-	
d	Other (Describe in Part XIII.)			-	٥
е	Add lines 2a through 2d			2e	3,984,985.
3	Subtract line 2e from line 1			3	3,304,303.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1			
	Investment expenses not included on Form 990, Part VIII, line 7b			-	
b	Other (Describe in Part XIII.)	•		4.	0.
	Add lines <b>4a</b> and <b>4b</b> Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line			4c	3,984,985.
	rt XIII Supplemental Information.	: 10.)		5	3,304,303.
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an	d 1: Dort IV lines 1h	and the Dort V. line	1: Dort	V line 2: Dort VI
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide			4, Fait	Λ, III le 2, Fait Λi,
III IES	20 and 45, and Part XII, lines 20 and 45. Also complete this part to provide	any additional infor	nation.		
PAF	RT X, LINE 2:				
EXI	PLANATION: TAXPAYER HAS EVALUATED THE	FINANCIAL	STATEMENT	IMP	ACT OF TAX
====					
POS	SITIONS TAKEN OR EXPECTED TO BE TAKEN	IN ITS TAX	RETURNS.	TA	XPAYER HAS
ALS	SO REVIEWED ITS POSITIONS FOR ALL OPEN	YEARS AND	HAS DETER	MIN	ED THAT NO
			<del>-</del>		
PRO	OVISION FOR INCOME TAXES IS REQUIRED.				

PAC10\_\_1

#### **SCHEDULE J** (Form 990)

#### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

Internal Revenue Service

PACIFIC BATTLESHIP CENTER

**Employer identification number** 26-3934742

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		_X_
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			37
	The organization?	5a		$\frac{x}{x}$
b	Any related organization?	5b		A
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			v
	The organization?	6a		<u> </u>
b	Any related organization?	6b		
_	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	_		v
_	not described in lines 5 and 6? If "Yes," describe in Part III	7		_X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			v
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2013

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Deficits	(B)(()-(U)	in prior Form 990
(1) ROBERT KENT (i)	165,540.	0.	0.	0.	0.	165,540.	0.
PAST PRESIDENT (ii		0.	0.	0.	0.	0.	0.
(i)							
(ii							
(i)							
(ii							
(i)							
(ii							
(i)							
(ii							
(0)							
(ii							
(i)							
(ii							
(i)							
(ii							
(6)							
(ii							
(i)							
(ii							
(i) (ii							
(i)							
(i)							
(i)							
(ii							
(i)							
(;i							
(i)							
(ii							
(i)							
(ii							

#### **SCHEDULE L**

Department of the Treasury

Internal Revenue Service

#### **Transactions With Interested Persons**

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

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

OMB No. 1545-0047

Open To Public Inspection

Name of the organization

(Form 990 or 990-EZ)

DACTETO BATTERUTO CENTED

Employer identification number

P	ACTETC	BAT.	LTESHT	P C	ENT.	EK			46	-39	34/	4 4		
Part I Excess Bene	fit Transa	ctions	(section 50	01(c)(3	) and s	ection 501(c)(4) org	anizations	only).	•					
Complete if the c	organization a	nswered	d "Yes" on	Form 9	990, Pa	art IV, line 25a or 25b	o, or Form	990-EZ, P	art V,	line 40	Db.			
1 (a) Name of disqualified p	(		onship bet			ified	) Descript	ion of tron	oootio			(d)	Corre	cted?
(a) Name of disqualified p	erson	per	rson and o	rganiza	ation	,,	;) Descript	ion of traf	isactio	)[ ]		Y	es	No
												4		
2 Enter the amount of tax i	-	-		-		•								
										<b>S</b>				
3 Enter the amount of tax,	if any, on line	2, above	e, reimburs	sea by	tne org	ganization				<b>&gt;</b> \$				
Part II Loans to and	l/or From	Interes	sted Per	sons	_									
						, Part V, line 38a or I	Form 990	Dart IV lir	ne 26.	or if th	ne oraș	nizati	on	
reported an amo						, i ait v, iii c ooa oi i	01111 000,	i aitiv, iii	10 20,	01 11 11	ic orga	ai iiZati	011	
(a) Name of	(b) Relations		Purpose	(d) Lo	an to or	(e) Original	(f) Balar	nce due	(g)	ln .	(h) Ap by bo	proved	(i) V	/ritten
interested person	with organizat		of loan		n the zation?	principal amount	(-,		defa		comm	aru or nittee?	agree	ment?
				То	From				Yes	No	Yes	No	Yes	No
JEFF LAMBERTI	CHAIRM	AN		Х		300,000.		,000.		Х	Х		Х	
RIVERSIDE PARTN	BOARD I	ME		Х		500,000.	500	,000.		Х	X		Х	
				<u> </u>							-			
Total	<u> </u>	ı		<u> </u>		<b>&gt;</b> \$	800	,000.						<u> </u>
Part III   Grants or As	sistance E	Benefit	ing Inte	reste	d Per	rsons.		,						
Complete if the c			•											
(a) Name of interested p			elationship			(c) Amount of		(d) Type	of		(e	) Purp	ose o	f
,			rested pers			assistance		assistan			•	assist		
		tl	he organiza	ation	[									
						·								

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

Schedule L (Form 990 or 990-EZ) 2013

SEE PART V FOR CONTINUATIONS

Part IV Business Transactions Involving Interested Persons.								
Part		<u> </u>	21 00					
	(a) Name of interested person	ered "Yes" on Form 990, Part IV, line 28a, 26  (b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	òrgani	aring of zation's nues?		
JEFF	LAMBERTI	CHAIRMAN	15,208.	FORGIVEN IN	Yes	No X		
Part	<b>—</b> ···	responses to questions on Schedule L (see	instructions).					
SCHE		ANS TO AND FROM INTERE		· ·				
, ,			JIED IERDON	<b>.</b>				
(A)	NAME OF PERSON: JEFF	FLAMBERTI						
(B)	RELATIONSHIP WITH OF	RGANIZATION: CHAIRMAN	OF THE BOAR	.D				
(A)	NAME OF PERSON: RIVE	ERSIDE PARTNERS						
(B)	RELATIONSHIP WITH OF	RGANIZATION: BOARD MEM	BERS R. BEA	.CH & J. LAM	BERT	'I		
EACH	OWN 50% OF RIVERSII	DE.						
	T. DADM TW DISCTNESS	S TRANSACTIONS INVOLVI	NC TNTEDECT	FD DEDGONG.				
			NG INIERESI	ED FERSONS.				
	NAME OF PERSON: JEFF							
(D)	DESCRIPTION OF TRANS	SACTION: FORGIVEN INTE	REST ON LOA	N TO THE				
ORGA	ANIZATION							

PAC10\_\_1

#### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990 Employer identification number

Name of the organization

	PACIFIC BATT	LESHIP	CENTER		26-3	393474	2
Pai	t I Types of Property				•		
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermining	ınts
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded						
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or						
	trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ► (CAPITALIZED E)	X	2	262,914.			
26	Other • ()						
27	Other ( )						
28	Other ( )						
29	Number of Forms 8283 received by the organi	ization durin	g the tax year for o	contributions			
	for which the organization completed Form 82	283, Part IV,	Donee Acknowled	gement 29			
						Ye	s No
30a	During the year, did the organization receive b	y contribution	on any property re	ported in Part I, lines 1 - 28, tl	nat it must hold for		
	at least three years from the date of the initial	contribution	, and which is not	required to be used for exem	pt purposes for		
	the entire holding period?					30a	X
b	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance	policy that r	equires the review	of any non-standard contribu	ıtions?	31	X
32a	Does the organization hire or use third parties	or related or	ganizations to sol	icit, process, or sell noncash			
	contributions?					32a	X
b	If "Yes," describe in Part II.						
33	If the organization did not report an amount in	column (c) t	or a type of prope	rty for which column (a) is ch	ecked,		
	describes to Death II						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2013)

332142 09-03-13

#### **SCHEDULE 0** (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.

OMB No. 1545-0047

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

Open to Public Inspection

Name of the organization

PACIFIC BATTLESHIP CENTER

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

**Employer identification number** 26-3934742

PRESERVATION AND INTERPRETATION OF THE BATTLESHIP IOWA, TO EDUCATE THE PUBLIC ON THE ACCOMPLISHMENTS AND SACRIFICES OF AMERICAN PATRIOTS, AND TO ENGAGE OUR GUESTS IN UNIQUE AND EXCITING WAYS THAT BRING THE SHIP TO LIFE BY CONNECTING THE PAST WITH THE FUTURE.

FORM 990, PART VI, SECTION A, LINE 2:

EXPLANATION: ORGANIZATION DIRECTORS JEFFERY M. LAMBERTI AND REBECCA BEACH ARE OWNERS OF RIVERSIDE PARTNERS WHO PROVIDED CONSULTING, LEGAL, FUNDRAISING, AND EVENT SERVICES TO THE ORGANIZATION. THE SERVICES PROVIDED BY RIVERSIDE PARTNERS WERE PROVIDED PRIOR TO JEFF LAMBERTI AND REBECCA BEACH JOINING THE BOARD.

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: THE 990 IS REVIEWED BY THE CEO, THE CFO, AND THE AUDIT COMMITTEE. IT MAY ALSO BE REVIEWED BY BOARD MEMBERS, AS NEEDED, BASED ON THEIR AREA OF EXPERTISE.

FORM 990, PART VI, SECTION B, LINE 12C:

EXPLANATION: COI REPORTS ARE SUBMITTED ANNUALLY AND REVIEWED BY THE CFO, WHO REPORTS ALL VARIANCES OR ISSUES TO THE CHAIRMAN, SECRETARY, AUDIT COMMITTEE CHAIR, AND CEO.

FORM 990, PART VI, SECTION B, LINE 15:

EXPLANATION: THE BOARD SETS CEO'S SALARY; THE CEO SETS OTHER OFFICERS' AND KEY EMPLOYEES' SALARIES.

33

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

Schedule O (Form 990 or 990-EZ) (2013)

PACIFIC BATTLESHIP CENTER	26-3934742
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC	VIA OUR WEBSITE,
WWW.PACIFICBATTLESHIP.COM.	
FORM 990, PART XII, LINE 2C:	
EXPLANATION: THE AUDIT COMMITTEE OF THE BOARD OF DIRECTOR	RS OVERSEES THE
AUDIT AND SELECTION OF THE AUDITOR. THE RECOMMENDATION	OF THE AUDIT
COMMITTEE IS RATIFIED BY A VOTE OF THE ENTIRE BOARD.	

Form <b>990-T</b>	E	xempt Organization Bus	sine	ss Income T	ax Returr	۱	OMB No. 1545-0687
		(and proxy tax und		,			0040
	For cal	endar year 2013 or other tax year beginning		, and ending		_ ·	2013
Department of the Treasury Internal Revenue Service	<b></b>	► Information about Form 990-T and its instruction not enter SSN numbers on this form as it may	be mad	de public if your organiz	ov/form990t. ation is a 501(c)(3)	. 5	Open to Public Inspection for 501(c)(3) Organizations Only
A Check box if address changed	i	Name of organization ( Check box if name c	hanged	and see instructions.)		(Emplo	yer identification number byees' trust, see ctions.)
B Exempt under section	Print	PACIFIC BATTLESHIP CEN	TER			2	6-3934742
X 501(c)(3)	or	Number, street, and room or suite no. If a P.O. box	k, see in	structions.			ited business activity codes istructions.)
408(e)220(e	) Type	250 SOUTH HARBOR BLVD,	BEI	RTH 87			·,
408A530(a	)	City or town, state or province, country, and ZIP o	r foreigr	n postal code			
529(a)		SAN PEDRO, CA 90731				713	990
C Book value of all assets at end of year 6,430,380.		exemption number (See instructions.)	<u> </u>				
		organization type X 501(c) corporation		501(c) trust	401(a) trust		Other trust
		3 -		STATEMENT 1		1,,	
		oration a subsidiary in an affiliated group or a parer	nt-subsi	diary controlled group?	▶ L	Ye:	s X No
		ifying number of the parent corporation. ROSS O'BRIEN		Tolonho	one number $ ightharpoonup 8$	77_	116-0261
		de or Business Income		(A) Income	(B) Expenses		(C) Net
1a Gross receipts or sa		ie or Business moonie		(ri) incomo	(2) 2хроноос		(0) 1101
<b>b</b> Less returns and all		<b>c</b> Balance	1c				
		A, line 7)	2				
3 Gross profit. Subtra			3				
		h Form 8949 and Schedule D)	4a				
		art II, line 17) (attach Form 4797)	4b				
c Capital loss deduction	on for trus	its	4c				
5 Income (loss) from	partnersh	ips and S corporations (attach statement)	5				
6 Rent income (Sched	dule C) .		6				
		ne (Schedule E)	7				
	-	nd rents from controlled organizations (Sch. F)	8				
		on 501(c)(7), (9), or (17) organization (Schedule G)					
		me (Schedule I)	10				
11 Advertising income	(Schedule	J)	11	205 042			205 040
		s; attach schedule.) STATEMENT 2	12	305,042.			305,042.
13 Total. Combine line Part II Deducti	es 3 throu	gh 12t Taken Elsewhere (See instructions fo	13	305,042.			305,042.
		utions, deductions must be directly connected			s income )		
		rectors, and trustees (Schedule K)			<u>-</u>	14	18,050.
		ectors, and trustees (Scriedule K)				15	109,319.
						16	103,313.
						17	
						18	
						19	
20 Charitable contribu	itions (See	e instructions for limitation rules.)				20	
		562)					
		Schedule A and elsewhere on return				22b	13,415.
						23	
24 Contributions to de	eferred co	mpensation plans				24	
<b>25</b> Employee benefit p	rograms					25	
26 Excess exempt exp	enses (So	chedule I)				26	
27 Excess readership	costs (Scl	hedule J)		ODD ODD		27	110 056
		edule)				28	110,056.
		es 14 through 28				29 30	250,840. 54,202.
		come before net operating loss deduction. Subtraction (limited to the amount on line 30)				31	1,802.
<ul><li>31 Net operating loss</li><li>32 Unrelated business</li></ul>	นธนนบแบบ tayahla ir	ncome before specific deduction. Subtract line 31 fr	om line	30	Drillia 4	32	52,400.
		$\gamma$ \$1,000, but see instructions for exceptions.)				33	1,000.
		income. Subtract line 33 from line 32. If line 33 is				"	=,000.
			-	· ·		34	51,400.
		Reduction Act Notice, see instructions.					Form <b>990-T</b> (2013)

Form 990-1	Г (2013	PACIFIC BAT	TLESH	IP CENTER	?			26-393	34742	Page
Part I	II .	Tax Computation								
35	Orga	nizations Taxable as Corpora	tions. See ir	structions for tax (	computation.					
	Cont	rolled group members (sectior	s 1561 and	1563) check here	▶ ☐ See i	nstructions and	l:			
а	Enter	your share of the \$50,000, \$2	5,000, and S	9,925,000 taxable	income bracket	ts (in that order	):			
	(1)	\$	(2)  \$		(3)	\$				
b		organization's share of: (1) A						<del>_</del>		
		Additional 3% tax (not more tha						_		
С		me tax on the amount on line 3							35c	7,850
36	Trus	ts Taxable at Trust Rates. See	instructions	for tax computation	on. Income tax o	on the amount o	n line 3	34 from:		
		Tax rate schedule or		•					36	
37		y tax. See instructions							37	
38		native minimum tax							38	
39	Total	I. Add lines 37 and 38 to line 3	5c or 36 wh	ichever annlies					39	7,850
_		Tax and Payments	JC 01 30, WII	ichever applies .					00	7,030
		gn tax credit (corporations atta	oh Form 11	10: truoto attach Ec	orm 1116)		40a			
							40a 40b		-	
U	Cana	r credits (see instructions)	0000						-	
		ral business credit. Attach For								
		it for prior year minimum tax (a							<del> </del>	
		I credits. Add lines 40a throug							40e	7 050
41	Subti	ract line 40e from line 39						1	41	7,850
42		r taxes. Check if from: Fo							42	
43	Tota	I tax. Add lines 41 and 42							43	7,850
		nents: A 2012 overpayment cr					44a			
		s estimated tax payments					44b			
		deposited with Form 8868					44c			
		gn organizations: Tax paid or v					44d			
		up withholding (see instruction					44e			
f	Cred	it for small employer health ins	urance pren				44f			
g	Othe	r credits and payments:		Form 2439						
		Form 4136		Other		Total ▶	44g			
45	Tota	l payments. Add lines 44a thro	ugh 44g						45	
46	Estin	nated tax penalty (see instruction	ons). Check	if Form 2220 is atta	ached 🕨 🔙	]			46	181
47		due. If line 45 is less than the t							47	8,031
48		payment. If line 45 is larger th							48	
49		the amount of line 48 you war						Refunded	49	
Part \		Statements Regardii				Informatio	n (se			
		ne during the 2013 calendar ye							count (bank.	Yes N
	-	, or other) in a foreign country	,	· ·		Ü		,	, ,	
		. If YES, enter the name of the					пороп	orrorgii Daiiii aiia i ii		X
2 Duri	ng the	tax year, did the organization receive instructions for other forms the organization	a distribution	from, or was it the gra	antor of, or transfer	or to, a foreign trus	st?			$ \frac{1}{x}$
		amount of tax-exempt interest								
		A - Cost of Goods S				► N/A				
		at beginning of year	1	THEEHOU OF HIVE					6	
	chase		2		_	<b>goods sold.</b> Su				
			3		-	e 5. Enter here			7	
		bor	4a		-					Voc. N
		section 263A costs (att. schedule)			-	ules of section		•		Yes N
		ts (attach schedule)	4b		-	· · ·	-	I for resale) apply to		
5 Tot		d lines 1 through 4bnder penalties of perjury, I declare the	5	ined this return inclu				e and to the best of my kno		of it is true
Sign	CC	orrect, and complete. Declaration of	preparer (other	than taxpayer) is base	ed on all informatio	n of which prepare	er has an	y knowledge.	wiedge and belie	n, it is true,
Here				1	<b>.</b>				•	ss this return with
11616		Signature of officer		Doto		rreasur	EK/(		ne preparer show	- `—
		1		Date		tle			structions)?	Yes N
		Print/Type preparer's name		Preparer's sig	gnature	Date	е		if PTIN	
Paid							,	self- employed		45005
Prepa	rer	JAN A. ROSATI	~ ~		ROSATI		/14			47985
	\ I	Firm's name MACIA	S GIN	r & O.COJ	NNELL LI	¬Ъ		Firm's FIN ▶	- 68-0	300457

Form **990-T** (2013)

916-928-4600

Phone no.

3000 S STREET, SUITE 300

CA 95816

Firm's address ► SACRAMENTO,

Schedule C - Rent Income	(From Real	Proper	ty and	l Personal	Propert	y Lease	d With Real P	rope	rty)(see instructions)
1. Description of property									
(1)									
(2)									
(3)									
(4)									
		ed or accrue					2/a\Daduations dira	otly oon	nected with the income in
(a) From personal property (if the prent for personal property is mo 10% but not more than 509	re than	<b>(b)</b> Fi	rent for pe	nd personal proper ersonal property ex t is based on profit	ceeds 50% c	entage or if	columns 2(a	) and 2(	b) (attach schedule)
(1)									
(2)									
_(3)									
(4)						_			
Total	0.	Total				0.	(h) Tatal daduations		
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, columns	ın (A)	▶				0.	(b) Total deductions Enter here and on page Part I, line 6, column (B)		0.
Schedule E - Unrelated De	bt-Financed	Incom	<b>e</b> (see i	nstructions)					
				2. Gross inc	come from		<ol> <li>Deductions directly to debt-fin</li> </ol>		
1. Description of debt-	financed property			or allocable financed p	e to debt-	(a) s	Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)
(1)									
(2)									
(3)									
(4)									
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted ba allocable to nced propert n schedule)		6. Column by colu			7. Gross income reportable (column 2 x column 6)		8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)					%	5			
(2)					%	5			
(3)					%	·			
(4)					%	5			
							ter here and on page 1, art I, line 7, column (A).		Enter here and on page 1, Part I, line 7, column (B).
Totals						▶		0.	0.
Total dividends-received deductions i	ncluded in columr	18	····		·····				0.
Schedule F - Interest, Ann	uities, Royal	ties, an					nizations (see in	struc	tions)
1. Name of controlled organization	<b>2</b> Employer ide	entification		3. urelated income	Ĭ	4. of specified	5. Part of column 4 included in the conduction to graphical in the conduction to graph of the conduction of the conducti	that is	6. Deductions directly connected with income
	numl	per	(loss) (s	see instructions)	paym	ents made	organization's gross	income	in column 5
(1)									
(2)									
(3)									
(4)									
Nonexempt Controlled Organization	าร								
7. Taxable Income 8.	Net unrelated incom (see instructions		<b>9.</b> Tot	tal of specified pay made	ments	in the conti	olumn 9 that is included olling organization's oss income	11.	Deductions directly connected with income in column 10
(1)					<u> </u>				
(2)									
(3)									
(4)									
						Enter here a	lumns 5 and 10. and on page 1, Part I, 8, column (A).	Ent	Add columns 6 and 11. er here and on page 1, Part I, line 8, column (B).
Totals							0.		0.
1 V tu 10							<b>.</b>	l	0.

323721 12-12-13

Schedule G - Investment (see inst			Section (	501(c)(7	7), (9), or (17) O	rganiza	tion		<u> </u>	_
<b>1</b> . Des	cription o	of income			2. Amount of income	directly	ductions connected schedule)		Set-asides tach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)						,	· ·			,
(2)										
(3)										
								-		
(4)					Enter here and on page 1,					Enter here and on page 1
					Part I, line 9, column (A).					Part I, line 9, column (B).
Totals				▶	0.					0.
Schedule I - Exploited (see instr		-	/ Income	, Other	Than Advertis	ing Inco	ome			
		_	<b>3.</b> Expe		4. Net income (loss)	_				7. Excess exempt
1. Description of exploited activity	i	2. Gross elated business ncome from de or business	directly cor with produ of unrela business in	nected uction ated	from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	from ac is not u	s income tivity that unrelated s income		Expenses tributable to column 5	expenses (column 6 minus column 5, but not more than column 4).
(1)										
(2)	1									
(3)	1									
	1									
(4)	Ent	er here and on	Enter here	and on						Enter here and
	р	age 1, Part I, le 10, col. (A).	page 1, F line 10, co	Part I, ol. (B).						on page 1, Part II, line 26.
Totals	<u> </u>	0.		0.						0.
Schedule J - Advertis										
Part I Income From	Perio	odicals Rep	orted on	a Con	solidated Basis	•				
1. Name of periodical		<b>2.</b> Gross advertising income		Direct sing costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compucols. 5 through 7.	5. C	irculation icome	6.	Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)										
(2)										
(3)					_					
(4)										
(+)										
Totals (carry to Part II, line (5)) .			0.	0						0.
Part II Income From				a Sepa	arate Basis <sub>(For</sub>	each perio	odical liste	d in Pa	art II, fill in	
columns 2 through	า 7 on a	a line-by-line ba	asis.)							
1. Name of periodical		2. Gross advertising income		Direct sing costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compucols. 5 through 7.		irculation icome	6.	Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)										
(2)										
(3)										
(4)										
			0.	0						0.
Totals from Part I		Enter here and		ere and on	4				-	Enter here and
Tatala Dort II /linco 1 E)		page 1, Part I, line 11, col. (A)	page	1, Part I, 1, col. (B).						on page 1, Part II, line 27.
Totals, Part II (lines 1-5)	·····									0.
Schedule K - Comper	เรลแบ	ii oi oilice	is, Direct	1015, ai	iu iiustees (see	ristructio	3. Perce	nt of		
	Name				2. Title		time devo	ted to		ensation attributable elated business
(1) JONATHAN WILI	JIAM	S		CEO	& PRES		100.	00%		16,250.
(2) ROSS O'BRIEN					SURER & CF	0	25.	00%		1,800.
(3)								%		,
								%		
(4)	Dort II	ino 1/		<u> </u>			<u> </u>	/0		18,050.
Total. Enter here and on page 1,	rait II, I	IIIC 14						<b>P</b>		10,000.

323731 12-12-13

# Form 4626 Department of the Treasury Internal Revenue Service

#### **Alternative Minimum Tax - Corporations**

Attach to the corporation's tax return.

▶ Information about Form 4626 and its separate instructions is at www.irs.gov/form4626.

OMB No. 1545-0175

	PACIFIC BATTLESHIP CENTER			26-3934742
	Note: See the instructions to find out if the corporation is a small corporation exempt			
	from the alternative minimum tax (AMT) under section 55(e).			
1	Taxable income or (loss) before net operating loss deduction		1	53,202.
2	Adjustments and preferences:			33,7232
	Depreciation of post-1986 property		2a	
	Amortization of certified pollution control facilities		2b	
	Amortization of mining exploration and development costs		2c	
d	Amortization of circulation expenditures (personal holding companies only)		2d	
е	Adjusted gain or loss		2e	
f	Long-term contracts		2f	
g	Merchant marine capital construction funds		2g	
h	Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only)		2h	
i	Tax shelter farm activities (personal service corporations only)		2i	
j	Passive activities (closely held corporations and personal service corporations only)		2j	
k	Loss limitations		2k	
- 1	Depletion		21	
m	Tax-exempt interest income from specified private activity bonds		2m	
n	Intangible drilling costs		2n	
0	Other adjustments and preferences		20	
3	Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 20		3	53,202.
4	Adjusted current earnings (ACE) adjustment:			
	ACE from line 10 of the ACE worksheet in the instructions	4a 53,202.		
b	Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a			
	negative amount (see instructions)			
	Multiply line 4b by 75% (.75). Enter the result as a positive amount	4c		
d	Enter the excess, if any, of the corporation's total increases in AMTI from prior			
	year ACE adjustments over its total reductions in AMTI from prior year ACE			
	adjustments (see instructions). Note: You must enter an amount on line 4d			
	(even if line 4b is positive)	4d		
е	ACE adjustment.	)		
	If line 4b is zero or more, enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the amount from line 4c      If line 4b is less than years enter the years enter th		4.	^
_	• If line 4b is less than zero, enter the <b>smaller</b> of line 4c or line 4d as a negative amount	J	4e	53,202.
5	Combine lines 3 and 4e. If zero or less, stop here; the corporation does not owe any AMT	CUVUENU E	5 6	1,802.
6	Alternative tax net operating loss deduction (see instructions)  Alternative minimum taxable income. Subtract line 6 from line 5. If the corporation held a	STATEMENT 5	0	1,002.
7	· · · · · · · · · · · · · · · · · · ·		7	51,400.
8	Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on I		,	31,400.
	Subtract \$150,000 from line 7 (if completing this line for a member of a controlled	inic 00).		
a	group, see instructions). If zero or less, enter -0-	8a   0.		
h	Multiply line 8a by 25% (.25)	8b 0.		
c	Exemption. Subtract line 8b from \$40,000 (if completing this line for a member of a control			
·	group, see instructions). If zero or less, enter -0-		8c	40,000.
9	Subtract line 8c from line 7. If zero or less, enter -0-		9	11,400.
10	Multiply line 9 by 20% (.20)		10	2,280.
11	Alternative minimum tax foreign tax credit (AMTFTC) (see instructions)		11	, , , , , , , , , , , , , , , , , , ,
12	Tentative minimum tax. Subtract line 11 from line 10		12	2,280.
13	Regular tax liability before applying all credits except the foreign tax credit		13	7,850.
14	Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0 Enter here			
	Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return	n	14	0.
JWA	For Paperwork Reduction Act Notice, see separate instructions.			Form <b>4626</b> (2013)

A	Adjusted Current Earning  See ACE Worksheet II			
Pre-adjustment AMTI. Enter the amount from I	ine 3 of Form 4626		1	53,202.
2 ACE depreciation adjustment:			·····	
ANAT I 'I'		2a		
<b>b</b> ACE depreciation:				
(1) Post-1993 property	2b(1)			
(2) Post-1989, pre-1994 property				
(3) Pre-1990 MACRS property				
(4) Pre-1990 original ACRS property				
(5) Property described in sections				
168(f)(1) through (4)	2b(5)			
(6) Other property				
(7) Total ACE depreciation. Add lines 2b(1)		2b(7)		
c ACE depreciation adjustment. Subtract line 2b(	- , ,		2c	
3 Inclusion in ACE of items included in earnings				
		3a		
c All other distributions from life insurance contr	acts (including surrenders)	3c		
d Inside buildup of undistributed income in life in	surance contracts	3d		
e Other items (see Regulations sections 1.56(g)-	1(c)(6)(iii) through (ix)			
for a partial list)		3e		
f Total increase to ACE from inclusion in ACE of	items included in E&P. Add lines 3a tl	hrough 3e	3f	
4 Disallowance of items not deductible from E&F				
a Certain dividends received		4a		
<b>b</b> Dividends paid on certain preferred stock of pu				
under section 247		4b		
c Dividends paid to an ESOP that are deductible	under section 404(k)	4c		
<b>d</b> Nonpatronage dividends that are paid and ded	uctible under section			
1382(c)		4d		
e Other items (see Regulations sections 1.56(g)-	1(d)(3)(i) and (ii) for a			
partial list)		4e		
f Total increase to ACE because of disallowance	of items not deductible from E&P. Ad	d lines 4a through 4e	4f	
5 Other adjustments based on rules for figuring I	E&P:	1 1		
		5a		
<b>b</b> Circulation expenditures				
<b>c</b> Organizational expenditures		5c		
		5d		
f Total other E&P adjustments. Combine lines 5a				
6 Disallowance of loss on exchange of debt pool				
7 Acquisition expenses of life insurance compan				
9 Basis adjustments in determining gain or loss			9	
O Adjusted current earnings. Combine lines 1, 2	c, 3f, 4f, and 5f through 9. Enter the r	esult here and on line 4a of		F2 000
Form 4626			10	53,202.

FORM 990-T		ORGANIZATION'S : BUSINESS ACTIVIT	PRIMARY UNRELATED Y	STATEMENT	1
SPECIAL EVEN	NTS, FILMING, AND	COMMISSIONS REV	ENUE		
TO FORM 990-7	Γ, PAGE 1				
FORM 990-T		OTHER INCOME		STATEMENT	2
DESCRIPTION				AMOUNT	
SPECIAL EVENT FILMING REVEN COMMISSION RE	NUE			119,67 176,65 8,71	59.
TOTAL TO FORM	1 990-T, PAGE 1,	LINE 12		305,04	12.
FORM 990-T		OTHER DEDUCTION	ONS	STATEMENT	3
DESCRIPTION				AMOUNT	
OUTSIDE SERVI OPERATION MAN UTILITIES HOUSEKEEPING RENT INSURANCE SPECIAL EVENT ADVERTISING	NAGEMENT			61,99 24,69 10,29 2,90 1,93 2,18 1,54	55. 93. 93. 33. 36.
TOTAL TO FORM	1 990-T, PAGE 1,	LINE 28		110,05	56.
FORM 990-T	NET	OPERATING LOSS D	EDUCTION	STATEMENT	4
TAX YEAR I	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR	
12/31/12	1,802.	0.	1,802.	1,802	2.

FORM 4626	ALTERNATI	VE MINIMUM TAX NO	L DEDUCTION	STATEMENT	5
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING		
12/31/12	1,802.	0.	1,802.		
AMT NOL CA	RRYOVER AVAILABLE T	HIS YEAR	1,802.		

#### Form **2220**

Underpayment of Estimated Tax by Corporations

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the

Attach to the corporation's tax return.

FORM 990-T

OMB No. 1545-0142

Department of the Treasury Internal Revenue Service

► Information about Form 2220 and its separate instructions is at www.irs.gov/form2220.

2013

Name

PACIFIC BATTLESHIP CENTER

Employer identification number 26 – 3934742

corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38 on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220. **Required Annual Payment** Part I 7,850. 1 Total tax (see instructions) 1 2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 **b** Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method 2b **c** Credit for federal tax paid on fuels (see instructions) 2c d Total. Add lines 2a through 2c 2d 3 Subtract line 2d from line 1, If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty 7,850. 3 Enter the tax shown on the corporation's 2012 income tax return (see instructions). Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 4 5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, 7,850. enter the amount from line 3 Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty (see instructions). 6 The corporation is using the adjusted seasonal installment method. 7 The corporation is using the annualized income installment method. The corporation is a "large corporation" figuring its first required installment based on the prior year's tax. Part III | Figuring the Underpayment (c) (d) (a) (b) Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Ùse 5th month), 6th, 9th, and 12th months of the 04/15/13 06/15/13 09/15/13 12/15/13 corporation's táx year 9 10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, 1,963. 1,962. 1,963. 1,962. 10 enter 25% of line 5 above in each column. 11 Estimated tax paid or credited for each period (see instructions). For column (a) only, enter the amount from line 11 on line 15 11 Complete lines 12 through 18 of one column before going to the next column. 12 Enter amount, if any, from line 18 of the preceding column 12 Add lines 11 and 12 13 14 1,963. 3,925. 5,888. Add amounts on lines 16 and 17 of the preceding column 0. 15 Subtract line 14 from line 13. If zero or less, enter -0-15 If the amount on line 15 is zero, subtract line 13 from line 1,963. 3,925 14. Otherwise, enter -0-16 **Underpayment.** If line 15 is less than or equal to line 10. subtract line 15 from line 10. Then go to line 12 of the next 1,963 1,962 1,963 1,962. column. Otherwise, go to line 18 17

For Paperwork Reduction Act Notice, see separate instructions.

**Overpayment.** If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column

Form 2220 (2013)

JWA

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Form 2220 (2013)

#### Part IV Figuring the Penalty

			(a)	(b)	(c)			(d)
9	Enter the date of payment or the 15th day of the 3rd month							
	after the close of the tax year, whichever is earlier (see							
	instructions). (Form 990-PF and Form 990-T filers: Use 5th	١						
_	month instead of 3rd month.)	19						
0	Number of days from due date of installment on line 9 to the	l						
	date shown on line 19	20						
1	Number of days on line 20 after 4/15/2013 and before 7/1/2013	21						
2	Underpayment on line 17 x Number of days on line 21 x 3%	22	\$	\$	\$		\$	
	Number of days on line 20 after 06/30/2013 and before 10/1/2013	23						
4	Underpayment on line 17 x Number of days on line 23 x 3%	24	\$	\$	\$		\$	
	365		·		·			
5	Number of days on line 20 after 9/30/2013 and before 1/1/2014	25						
6	Underpayment on line 17 x Number of days on line 25 x 3%	26	\$	\$	\$		\$	
7	Number of days on line 20 after 12/31/2013 and before 4/1/2014	27	SEE	ATTACHED W	ORKSHEET			
8	Underpayment on line 17 x Number of days on line 27 x 3%	28	\$	\$	\$		\$	
9	Number of days on line 20 after 3/31/2014 and before 7/1/2014	29						
0	Underpayment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$		\$	
1	Number of days on line 20 after 6/30/2014 and before 10/01/2014	31						
2	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$	\$		\$	
3	Number of days on line 20 after 9/30/2014 and before 1/1/2015	33						
4	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$		\$	
5	Number of days on line 20 after 12/31/2014 and before 2/16/2015	35						
6	Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$	\$		\$	
7	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$		\$	
,	Penalty. Add columns (a) through (d) of line 37. Enter the tot	tal h	ere and on Form 1120; lii	ne 33;				
	or the comparable line for other income tax returns					38	lφ	18

<sup>\*</sup> Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

JWA Form **2220** (2013)

## FORM 990-T UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

lame(s)				Identifying Nu	mber
PACIFIC BAT	TLESHIP CENT	rer .		26-393	34742
(A)	(B)	(C) Adjusted	(D)	(E)	(F)
*Date	Amount	Balance Due	Number Days Balance Due	Daily Penalty Rate	Penalty
		-0-			
04/15/13	1,963.	1,963.	61	.000082192	10
06/15/13	1,962.	3,925.	92	.000082192	3
09/15/13	1,963.	5,888.	91	.000082192	4.
12/15/13	1,962.	7,850.	151	.000082192	9'
nalty Due (Sum of Colun	nn F).				18

<sup>\*</sup> Date of estimated tax payment, withholding credit date or installment due date.

312511