Department of the Treasury Internal Revenue Service

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

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

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

OMB No. 1545-0047 2013 Open to Public Inspection

<u>A</u>		calendar year, or tax year beginning 4/01/13, and ending 03/31/	14	B 5 1				
B Check if applicable: C Name of organization National Association of Watch D Employer identification n								
	Address change	and Clock Collectors, Inc.						
	Name change	Doing Business As			<u>-2072465</u>			
Н	•	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number				
<u></u>	Initial return	514 Poplar Street		717	7-684-8261			
	Terminated	City or town, state or province, country, and ZIP or foreign postal code						
П	Amended return	Columbia PA 17512-2130		G Gross red	ceipts\$ 2,375,227			
		F Name and address of principal officer:	1	G 01033100				
L J	Application pending	J Steven Humphrey	H(a) Is this a gro	oup return for	subordinates Yes X No			
			H(b) Are all sub	ordinates inc	duded? Yes No			
		514 Poplar Street	1		. (see instructions)			
		Columbia PA 17512	-  " ""	attacri a list	. (300 1130 0030/13)			
<u></u>	Tax-exempt status:				_			
<u>J</u>	Website: V	ww.nawcc.org	H(c) Group exe					
K	Form of organization	n: Corporation Trust X Association Other ► L \	ear of formation: $oldsymbol{1}$	978	M State of legal domicile: PA			
_ <u>F</u>	Part I Su	ımmary						
		escribe the organization's mission or most significant activities:						
9	The	Organization seeks to encourage member and public	c interes	t in t	the study			
ā		ime and timekeeping via educational opportunitie						
Governance		ications, member and public events and access to			seum.			
8		is box if the organization discontinued its operations or disposed of more than						
<b>∞</b>		of voting manhous of the governing hady (Part VI. line 4 a)		2	12			
S					12			
≝		of independent voting members of the governing body (Part VI, line 1b)			32			
Activities		mber of individuals employed in calendar year 2013 (Part V, line 2a)						
ĕ		mber of volunteers (estimate if necessary)		6	74			
		related business revenue from Part VIII, column (C), line 12			28,158			
	b Net unre	lated business taxable income from Form 990-T, line 34		7b	-7,987			
			Prior Yea		Current Year			
Revenue	8 Contribu	tions and grants (Part VIII, line 1h)		.529	595,437			
		service revenue (Part VIII, line 2g)	1,641		1,635,818			
Š	10 investme	ent income (Part VIII, column (A), lines 3, 4, and 7d)		722	73,342			
Œ	11 Other re	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,574	30,540			
	12 Total rev	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,098	3,263	2,335,137			
	13 Grants a	nd similar amounts paid (Part IX, column (A), lines 1–3)			0			
	14 Benefits	paid to or for members (Part IX, column (A), line 4)			0			
Ś		other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,046	,281	1,041,223			
Expenses	16aProfession	onal fundraising fees /Part IX, column /A), line 11e)	· · · · · · · · · · · · · · · · · · ·		129,390			
喜	b Total fun	draising expenses (Part IX, column (D), line 25) ▶ 184,697						
ЩX	17 Other ex	penses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,151	947	1,178,879			
		penses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,198	228				
	I .	***************************************		,965	-14,355			
등	13 Revenue	eless expenses. Subtract line 18 from line 12	Beginning of Cur		End of Year			
Net Assets or	20 Total ass	sets (Part X, line 16)	8,284		8,245,416			
ASS	21 Total liab	silition (Part V. line 26)		790	429,656			
je je	22 Not see	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	7,805		7,815,760			
		tts or fund balances. Subtract line 21 from line 20	1,605	,,,,,,	7,813,700			
		gnature Block						
U tr	inder penaities of	perjury declare that I have examined this return, including accompanying schedules and stromplete. Deglaration of preparer (other than officer) is based on all information of which prep	atements, and to	the best of	my knowledge and belief, it			
	L N	officies began attorn of preparer (officer) is based on all information of which prep	arer rias arry kilo	wieuge.	144/11			
	-	The standing		14	117/14			
Sig	-   .	ignature/of officer		Date				
He	<b>      -</b>		tive Di	<u>recto</u>	r			
	<b> </b>	ype or print name and title						
		e preparer's name Preparer's signature	Date	Check	if PTIN			
Pai	d LAWREI	NCE R. REICH LAWRENCE R. REICH	10/29	/14 self-en	nployed P00073673			
Pre	parer Firm's na		Fi	rm's EIN	23-2327390			
Use	e Only	1500 Lititz Pike						
	Firm's ad		-	hone no.	717-393-2700			
Mar		ss this return with the preparer shown above? (see instructions)	Į P	ione no.	X Yes No			
	<u> </u>	so this feturn with the preparer shown above: (see instructions)			A les NO			

			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	ļ
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	ĺ		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
_	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a	1		
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		_X_
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
4.4	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
D	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	-	X
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	المدا		₩.
al	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
u	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			•
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	X
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	445		v
125	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		X
ıza	Schedule D. Parts XI and XII	40-	x	
ь	,	12a		
U	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	426		v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
14a	Did the organization maintain an office appleases as assals as to be a left of the Aleit of the	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	140		
_	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		- 4%
		15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	''		45
	assistance to 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, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	''		
•	Port VIII. Book 4s and 0s0 KIIVos II separated Och sald O. D. CII	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	┌╌┤		
-	IT ID A COLUMN TO THE COLUMN T	19		X
20a	Did the organization operate one or more beguited facilities? If the all a constant Cabadala II	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	$\neg \neg$	
	The state of the s			

-			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		X
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a	ļ	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	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	Ì		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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):			<b> </b>
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	١		
22	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
33	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			77
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	١		v
25-	or IV, and Part V, line 1	34		_ <u>X</u> _
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
Ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			I
26	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	24		v
27	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			v
38	Part VI	37		<u> </u>
30	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		<b>.</b>	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

Form 990 (2013) National Association of Watch 23-20
Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			. 🔲
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 55		<u> </u>	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and		•	
	reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 32			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			İ
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	ł		
	account)?	4a		X
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.	ı		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	ļ	X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>		
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?	<u>6a</u>		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
7	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7-		
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b	X	ļ
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1.0		
•	required to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	1.0		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Х
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		ļ	
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
. b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 999, Part VIII, line 12  40b	$\dashv$		
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter:	$\dashv$		
a				
b	Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources	$\dashv$		
_	against amounts due on resolved from the co.			
12a		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	140		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
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			
С	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

Section A. Governing Body and Management

-	Such A. Governing Body and Management					
1-	Enter the number of victing marshare of the new line had a title of the	ایا	10		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year  If there are material differences in voting rights among members of the governing body, or	1a	12	┨		
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
b	·	4.	10			
2	Enter the number of voting members included in line 1a, above, who are independent	1b	12	┪		
-	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?					٠,
3				2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct					- T
4	supervision of officers, directors, or trustees, or key employees to a management company or other person?			3		X
5	Did the organization make any significant changes to its governing documents since the prior Form 990 was	mea?		4		X
_	Did the organization become aware during the year of a significant diversion of the organization's assets?			5	v	X
6	Did the organization have members or stockholders?			6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			l _	7.5	
<b>L</b>	one or more members of the governing body?	<b></b>		7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			l		
	stockholders, or persons other than the governing body?			7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the	e year	by the follow		,,	
a	The governing body?	<i></i> .		8a	<u> </u>	
Ъ	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					
800	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	1 1		9		<u> </u>
<u> Sec</u>	tion B. Policies (This Section B requests information about policies not required by the	ınter	nai Reven	ue Co		
40.	Did the executive have lead should be a first or the state of the stat					No_
	Did the organization have local chapters, branches, or affiliates?			10a	X	
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			l	••	
44-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	X	
11a	5	filing t	he form?	11a	X	
b -22	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	<u>X</u>	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could giv	e rise t	o conflicts?	12b	X	
Ç	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			l l		
4.5	describe in Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approval by	_				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decisi	on?				
a	The organization's CEO, Executive Director, or top management official			15a	X	
D	Other officers or key employees of the organization			15b		<u> </u>
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
ьод	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			_		-
_	with a taxable entity during the year?			16a		<u> </u>
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			Ιİ		
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
800	organization's exempt status with respect to such arrangements?			16b		
	tion C. Disclosure	<b></b>				
17 10	List the states with which a copy of this Form 990 is required to be filed <b>PA, CA, CT, GA, MA, MS, NH</b> Section 5104 requires an according to the state of the st			K,OR	, TN	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section could be for public increased in the first section of the sec	n 501(	c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply.					
40	X Own website X Another's website X Upon request Other (explain in Schedule O)					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of i	nterest	policy, and			
20	financial 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 and record	s of th	е			
Α.	organization: ► Charles Auman, Controller 514 Poplar Street	_				
- 0.0	olumbia במול אוו	7	717	E 0	4 0	767

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for		c, unle icer ar	Pos heck ess pe	rson	than o is both or/trust	an	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(**2103348130)	organization and related organizations
(1) Thomas J. Barte										
Director	2.00	x			:			o	o	0
(2) Michael A. Demp	sey	_		ļ		H	-		U	
Director	3.00	х						0	0	0
(3) David Walter Du										
Director	3.00	x						0	o	0
(4) Philip C. Grego								<u> </u>		<u> </u>
<u> </u>	3.00									_
Director (5) David A. Lee	0.00	X	,					0	0	0
Treasurer	10.00	x						0	0	0
(6) M. J. Mintz										
Legal Counsel	2.00	х						0	0	0
(7) Ruth Overton	12.00									
Chair	0.00	х						o	0	o
(8) Jerry H. Thorns	berry									
Director	3.00 0.00	x						0	0	o
(9) Eugene R. Volk										
Vice-Chair	3.00 0.00	x						0	0	0
(10)Mary Ann Wahlne										
Secretary	3.00 0.00	x						o	0	0
(11) Chester L. Erks	trand									······································
Director	2.00 0.00	x						0	0	0
DAA										Form <b>990</b> (2013)

State   Stat	(A) Name and title	(B) Average hours per week (list any hours for	(de	o not o	Pos check ass pe	C) sition more	than dis both	one n an	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations (W-2/1099-MISC)		(F) Estima amoun othe	ted t of r ation	
Directox		related organizations below dotted	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		(W2 1033 MICO)		organiza and rela	ation ated	
Directox	(12)George F Goolsb	-												
Directox		4	x						0	0				0
Director   0.00   X     0   0     (4)	(13)Tim Orr	2 00												
Test   Test		0.00	x						0	0				0
13,285	(14)J. Steven Humph													
(15)  (16)  (17)  (18)  (19)  (19)  (19)  (19)  (19)  (19)  (19)  (10)  (10)  (11)  (11)  (11)  (11)  (11)  (12)  (13)  (14)  (15)  (16)  (17)  (18)  (19)  (19)  (19)  (10)  (10)  (11)  (11)  (11)  (12)  (13)  (14)  (15)  (16)  (17)  (17)  (18)  (19)  (19)  (10)  (10)  (10)  (11)  (11)  (11)  (12)  (13)  (13)  (13)  (14)  (15)  (16)  (17)  (17)  (18)  (19)  (10)	Executive Director				x				86,022	0		1	.3 , :	289
113   115	(15)													
113   115														
18	(16)										<del> </del>			
18						i								
the Sub-total   c Total from continuation sheets to Part VII, Section A   d Total (add lines 1b and 1c)   Sub-total   c Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization   No.    3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual   3	(17)			-										
the Sub-total   c Total from continuation sheets to Part VII, Section A   d Total (add lines 1b and 1c)   Sub-total   c Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization   No.    3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual   3														
1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization    3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 X  Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)    Name and business address   Compensation   Comp	(18)													
1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization    3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 X  Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)    Name and business address   Compensation   Comp		• • • • • • • • • • • • • • • • • • •												
Total from continuation sheets to Part VII, Section A.	(19)													
Total from continuation sheets to Part VII, Section A.		· · · · · · · · · · · · · · · · · · ·												
Total from continuation sheets to Part VII, Section A.	1b Sub-total			L		<u> </u>		<b>&gt;</b>	86,022			1	3.2	289
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶0  Total number of individual including but not limited to those listed above) who received more than \$100,000 in reportable compensation including and including an including and including an including and including an including an including and including an including and including an including an including an including an including an including and including an	c Total from continuation she	eets to Part VII	, Se	ction	۱A,			<b>&gt;</b>	•					
reportable compensation from the organization    3	2 Total number of individuals (iii	ncluding but no	t lim	ited	to th	ose	liste	<u>►</u> dab	ave) who received more t	han \$100.000 in		1	3,2	<u> 289</u>
Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual.  Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  Description of services  Total number of independent contractors (including but not limited to those listed above) who	reportable compensation from	n the organizati	on 🕨	0								- 1	Vec	No
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 X  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  Compensation  Compensation  Total number of independent contractors (including but not limited to those listed above) who	3 Did the organization list any f	ormer officer, o	direc	tor, c	or tru	ustee	e, ke	y en	nployee, or highest compe	ensated	[		163	
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 X  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  Description of services  Total number of independent contractors (including but not limited to those listed above) who	4 For any individual listed on lin	ne 1a, is the sur	m of	repo	rtab	le co	ompe	ensa	tion and other compensa-	tion from the	.,,.	3		<u> </u>
5 Did any person listed on line in a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who	organization and related orga	anizations great	er th	an \$	150	,000	? If "	Yes	" complete Schedule J fo	r such		4		х
Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (C)  Name and business address  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who	bid any person listed on line	Ta receive or a	ccru	e coi	mpe	nsat	ion ti	rom	any unrelated organization	n or individual				
compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation  Compensation  Compensation  Total number of independent contractors (including but not limited to those listed above) who			res	<u>, cc</u>	mpi	ete (	scne	aule	e J for such person			5		<u> </u>
Name and business address  Description of services  Compensation  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who	1 Complete this table for your fi	ive highest com	pen	sate	d inc	lepe	nder	nt co	entractors that received me	ore than \$100,000 of				
2 Total number of independent contractors (including but not limited to those listed above) who	Name and	(A) business address	COII	ibei i	Jane	11,10	1 1116	Cale			tax year	Cor	(C)	tion
2 Total number of independent contractors (including but not limited to those listed above) who													.,,	
2 Total number of independent contractors (including but not limited to those listed above) who														
2 Total number of independent contractors (including but not limited to those listed above) who														
2 Total number of independent contractors (including but not limited to those listed above) who											Ì			
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of company than from the contractors.		· · · · · · · · · · · · · · · · · · ·												
2 Total number of independent contractors (including but not limited to those listed above) who														
2 Total number of independent contractors (including but not limited to those listed above) who						_								
ICCCIVED HIGH A 100 CON OF COMBERSMON ROW WE CHANGED >	2 Total number of independent received more than \$100,000	contractors (inc	cludii	ng b	ut no	ot lin	nited	to the	hose listed above) who	0				

Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) Total revenue (B) Related or (C) Unrelated (D) Revenue exempt function business excluded from tax revenue under sections 512-514 Program Service Revenue Contributions, Gifts, Grant 1a Federated campaigns 1a **b** Membership dues 1b c Fundraising events ...... 1c d Related organizations ..... 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 595,437 1f \$ 1,856 Q Noncash contributions included in lines 1a-1f; h Total. Add lines 1a-1f 595,437 Busn. Code 51910d 1,141,766 1,141,766 2a Membership dues b MART income 140,262 140,262 611600 511120 105,113 105,113 C School tuition and fees 611600 d National Convention 61,722 61,722 e Museum admissions 611600 54,885 54,885 f All other program service revenue ...... 900099 132,070 103,912 28,158 1,635,818 g Total. Add lines 2a-2f ...... 3 Investment income (including dividends, interest, and other similar amounts) 73,342 73,342 Income from investment of tax-exempt bond proceed Royalties .... (i) Real (ii) Personal 6a Gross rents **b** Less: rental exps. c Rental inc. or (loss d Net rental income or (loss) Gross amount from (i) Securities sales of assets other than inventor Less: cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) ..... 8a Gross income from fundraising events Other Revenue (not including \$ ..... of contributions reported on line 1c). See Part IV, line 18 a **b** Less: direct expenses ...... c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 ..... a b Less: direct expenses ...... c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances \_\_\_\_\_ a 70,630 **b** Less: cost of goods sold ..... **b** 40,090 c Net income or (loss) from sales of inventory 30,540 30,540 Miscellaneous Revenue Busn, Code 11a b d All other revenue ..... e Total. Add lines 11a-11d Total revenue. See instructions. 2,335,137 1,638,200 28,158 73,342

Statement of Functional Expenses Part IX

Sec	tion 501(c)(3) and 501(c)(4) organizations must c Check if Schedule O contains a response	complete all columns. All	other organizations must	complete column (A).	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to governments and		expenses	general expenses	expenses
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,			· · · · · · · · · · · · · · · · · · ·	
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members	-			
5	Compensation of current officers, directors,				
	trustees, and key employees	86,022	38,710	38,710	8,602
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	728,882	410,986	305,094	12,802
8	Pension plan accruals and contributions (include			•	•
	section 401(k) and 403(b) employer contributions)	35,964	18,279	16,643	1,042
9	Other employee benefits	102,953	42,848	54,732	5,373
10	Payroll taxes	87,402	48,814	36,325	2,263
11	Fees for services (non-employees):		•	j	•
a	Management				
	Legal				
C	Accounting	19,100		19,100	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	129,390			129,390
f					
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule 0.)	82,560	65,204		17,356
12	Advertising and promotion	26,993	15,726	11,267	
13	Office expenses	153,631	83,876	62,733	7,022
14	Information technology	59,987		59,987	
15	Royalties				
16	Occupancy	181,408	133,257	48,151	
17	Travel	18,878	4,395	13,636	847
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	66,064	33,831	32,233	
20	Interest	499		499	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	257,418	239,768	17,650	
23	Insurance	28,068	9,000	19,068	
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.)				
a	Publications	198,726	198,726		
b	Library Purchases	47,318 37,979	47,318		
c	Workshop Expenses	37,979	37,979		
d	Employee Training	250	250		w
e	All other expenses	0 040 400	1 400 005	F0F 000	404 45-
25 26		2,349,492	1,428,967	735,828	184,697
20	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here ▶ if following SOP 98-2 (ASC 958-720)				
DAA	Tollowing dol 30-2 (A00 300-720)			<u> </u>	- 000

Part X	Balance	Shoot

	irt )	Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing	213,679	1	181,043
	2	Savings and temporary cash investments	406,163	2	707,695
	3	Pledges and grants receivable, net		3	183,625
	4	Accounts receivable, net	2,507	4	16,702
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			,
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and	ı .	1	
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
ţ		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
تخ	8	Inventories for sale or use	47,414	8	48,980
	9	Prepaid expenses and deferred charges	73,817	9	82,875
	10a	Land, buildings, and equipment: cost or	,		
		other basis. Complete Part VI of Schedule D 10a 10,598,556			
	b	Less: accumulated depreciation 10b 5,486,713	5,342,676	10c	5,111,843
	11	Investments—publicly traded securities	2,198,279	11	1,912,653
	12	Investments—other securities. See Part IV, line 11	,,	12	
.	13	Investments—program-related. See Part IV, line 11		13	
.	14	Intangible assets		14	·
.	15	Other assets. See Part IV, line 11		15	
.	16	Total assets. Add lines 1 through 15 (must equal line 34)	8,284,535	16	8,245,416
1.			225,807	17	199,092
.	18	Grants payable		18	
,	19	Deferred revenue	73,827	19	61,377
	20	Toy overwet band tisk!!!!!	,	20	
		Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
夏		diagnalified neverse Complete Book II of Oak at 1.4		22	
;  <del>ٽ</del>	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loops noughly to unrelated third neutice		24	
- 1	- · 25	Other liabilities (including federal income tax, payables to related third			***************************************
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	179,156	25	169,187
	26	Total liabilities. Add lines 17 through 25	478,790		429,656
_		Organizations that follow SFAS 117 (ASC 958), check here ▶X and	1,0,,50		127,000
Š		complete lines 27 through 29, and lines 33 and 34.			
튒	27		7,132,676	27	6,955,104
10		Temporarily restricted net assets	213,938		163,563
힏	29		459,131	29	697,093
죠ㅣ.		Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and	<del>400,101</del>	29	1000
5		complete lines 30 through 34.			
ets	30	Control at all and west and a start and a start as		20	
SS		Paid-in or capital surplus, or land, building, or equipment fund		30	
et /	31 32	Retained earnings, endowment, accumulated income, or other funds		$\overline{}$	
ž   į	32 33	Total net assets or fund halances	7,805,745	32	7,815,760
- 1	34	Total liabilities and not assets/fund balances			
	<del></del>	Total liabilities and net assets/fund balances	8,284,535	54	8,245,416

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Forn	990 (2013) National Association of Watch 23-2072465			Pa	ge <b>12</b>
Pa	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,3	35,	137
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,34	49,	492
3	Revenue less expenses. Subtract line 2 from line 1	3	-;	14,	355
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,80	05,	<del>745</del>
5	Net unrealized gains (losses) on investments	5			<del>370</del>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	7,8	15,	760
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				.
					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 O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or	, <b>.</b>			
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		ļ		
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	· · · · · · · · · · · · · · · · · · ·			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		ĺ		
	of the guidt review or compilation of its financial statements and a feature of an independent accounts at		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				1
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				[
	the Single Audit Act and OMB Circular A-133?		3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		····   Ju		<u> </u>

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required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. . . .

### 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 200 or Form 200 E7

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

National Association of Watch and Clock Collectors, Inc.

Employer Identification number 23-2072465

Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 |X| An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines, 11e through 11h. d Type III-Non-functionally integrated Type II c Type III-Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the a following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) h (i) Name of supported (III EIN (iv) is the organization (v) Did you notify (vi) Is the (iii) Type of organization (vii) Amount of monetary organization the organization in organization in col (described on lines 1-9 in col. (i) listed in your support col. (i) of your (i) organized in the above or IRC section governing document? US? support? (see instructions)) Yes Yes No No Yes Nο (A) (B) (C) (D)

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

Schedule A (Form 990 or 990-EZ) 2013

(E)

Total

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.")							
2	Tax revenues levied for the organization'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							
<b>4 5</b>	Total. Add lines 1 through 3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4.	-						
	tion B. Total Support		-				-	
Cale	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	-	, , , , , , , , , , , , , , , , , , , ,			, ,		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
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.)							
11	Total support. Add lines 7 through 10				<u> </u>	<u> </u>		
12	Gross receipts from related activities, etc	. (see instruction:	s)			L	12	
13	First five years. If the Form 990 is for the	e organization's f	irst, second, third	, fourth, or fifth ta	x year as a section	n 501(c)(3)		
	organization, check this box and stop he							<b>_</b>
	tion C. Computation of Public S							
14	Public support percentage for 2013 (line	6, calumn (f) divid	ded by line 11, co	lumn (f)) <sub></sub>			14	%
15	Public support percentage from 2012 Sch						15	%
16a					4 is 33 1/3% or m	ore, check thi	S	,
	box and stop here. The organization qua					· · · · · · · · · · · · · · · · · · ·		▶ □
b	33 1/3% support test—2012. If the orga	nization did not c	heck a box on line	e 13 or 16a, and I	ine 15 is 33 1/3%	or more,		<u>.</u> .
	check this box and <b>stop here</b> . The organ	ization qualifies a	as a publicly supp	orted organization	n			
17a								
	10% or more, and if the organization mee							
	Part IV how the organization meets the "f	acts-and-circums	tances" test. The	organization qua	lifies as a publicly	supported		_ ,
	organization							• • • • • • • • • • • • • • • • • • •
b	10%-facts-and-circumstances test—20							
	15 is 10% or more, and if the organization							
	Explain in Part IV how the organization m			-	,	•		
	supported organization							▶
8	Private foundation. If the organization d	id not check a bo	x on line 13, 16a,	16b, 17a, or 17b	, check this box a	nd see		
	instructions							<b>&gt;</b> L

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.)

	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.")	205,095	170,101	363,345	344,529	594,304	1,677,374
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	2,193,190	2,175,972	1,937,104	1,703,565	1,678,290	9,688,121
3	Gross receipts from activities that are not an unrelated trade or business under section 513	L					
4	Tax revenues levied for the organization'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	2,398,285	2,346,073	2,300,449	2,048,094	2,272,594	11,365,495
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	11,271	4,468	28,037	15,981	81,461	141,218
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						
	Add lines 7a and 7b	11,271	4,468	28,037	15,981	81,461	141,218
8	Public support (Subtract line 7c from line 6.)						11,224,277
	tion B. Total Support		-	•			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	2,398,285	2,346,073	2,300,449	2,048,094	2,272,594	11,365,495
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	36,230	50,246	80,885	83,722	73,342	324,425
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	36,230	50,246	80,885	83,722	73,342	324,425
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.)			į			
13	Total support. (Add lines 9, 10c, 11,		-				
	and 12.)	2,434,515	2,396,319	2,381,334	2,131,816	2,345,936	11,689,920
14	First five years. If the Form 990 is for the organization, check this box and stop he	ere _		fourth, or fifth tax			<b>.</b>
	tion C. Computation of Public S						
15	Public support percentage for 2013 (line	8, column (f) divide	ed by line 13, colu	ımn (f))		15	96.02%
16	Public support percentage from 2012 Sch					16	96.46%
	tion D. Computation of Investm	ent Income Po	ercentage			г т	
17	Investment income percentage for 2013	(line 10c, column (	f) divided by line	13, column (f))			3 %
18 10a	Investment income percentage from 201:						3 %
19a	33 1/3% support tests—2013. If the org						ندا ج
b	17 is not more than 33 1/3%, check this b 33 1/3% support tests—2012. If the org	anization did not c	heck a box on lin	e 14 or line 19a, a	and line 16 is more	e than 33 1/3%, a	nd X
	line 18 is not more than 33 1/3%, check t						<b>&gt;</b>
20	Private foundation. If the organization d	id not check a box	on line 14, 19a,	or 19b, check this	box and see inst	ructions	<b>&gt;</b>

Schedule A (F	orm 990 or 990-EZ	) 2013 <b>National</b>	Association	of Watch	23-2072465	Page 4
Part IV	Supplemental	Information. Prov	ide the explanations	s required by Part II, onal information. (Se	23 - 2072465 line 10; Part II, line 17a o e instructions)	or 17b; and
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### 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.

Open to Public

OMB No. 1545-0047

Name of the organization Employer identification number National Association of Watch and Clock Collectors, Inc. 23-2072465 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I 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 \_\_\_\_\_\_ Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year \_\_\_\_\_ 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? \_\_\_\_\_ Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified 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 Total number of conservation easements 2a Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X ..... 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X.

### (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance 600,954 622,155 618,818 551,083 458,249 **b** Contributions ..... 237,962 6,043 37,978 10,019 21,469 c Net investment earnings, gains, and losses 18,895 29,951 -16,819 63,632 74,758 d Grants or scholarships e Other expenditures for facilities and 20,857 programs 2,579 53,858 24,496 3,393 f Administrative expenses ..... g End of year balance 836,954 600,954 618,818 622,155 551,083

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ▶ 16.71 %
- b Permanent endowment ► 83.29 %
- c Temporarily restricted endowment ▶ \_\_\_\_\_%

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: No (i) unrelated organizations 3a(i) X (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

### Land, Buildings, and Equipment. Part VI

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (investment) (other) depreciation 1a Land \_\_\_\_\_\_ 53,800 53,800 **b** Buildings ..... 9,163,965 4,132,299 5,031,666 c Leasehold improvements ..... d Equipment 1,380,791 1,354,414 26,377 Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 5,111,843

Schedule D (Form 990) 2013

	Form 990) 2013 National Association	or water	23-20/2465	Page
Part VII	Investments—Other Securities.	4- F 000 D-4 N/	line 14h Con Farm 0	20 Bort V line 12
	Complete if the organization answered "Yes"			
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method o Cost or end-of-yea	
(1) Financial	d = at at		000000000000000000000000000000000000000	
	derivatives eld equity interests			
(3) Other	old equity filteresis			
(A)				
/E\				
<b>(C)</b>				,
/H)				
	nn (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 99	00, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method o	
			Cost or end-of-year	ar market value
(1)				
(2)				
(3)				
(4)				
(5)		<u> </u>		
(6)				
<u>(7)</u> (8)				
(9)				
	nn (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 99	90. Part X. line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
_(6)				
_(7)				
(8)				
(9)				
Part X	nn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.		<b>&gt;</b>	
ran A		to Form 000 Dort IV	line 11e ex 11f Coe E	arm 000 Dart V
	Complete if the organization answered "Yes" line 25.	to Form 990, Part IV,	line Tie of Til. See F	orm 990, Part A,
1.	(a) Description of liability	(b) Book value		
	income taxes	(b) Book vaide		
	ities payable	162,646		
	savings deposits	6,541		
(4)	3	0,511		
(5)				
(6)				
(7)				
(8)				
(9)				

169,187

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶

<sup>2.</sup> 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

Part III Line 1a and Part III Line 4:
The Organization's collections are made up of horological artifacts and
research materials of historical significance that are held for
educational, research and curatorial purposes. Each of the items is
preserved and cared for and activities verifying their existence and
assessing their condition are performed continuously. The collections are
subject to a policy that requires proceeds from their sales to be used to
acquire other items for the collection. As of March 31, 2014, the insurance
coverage in effect for items in the collection amounted to \$9,000,000.

Schedule D (F	orm 990) 2013 Nation	al Association ation (continued)	of Watch	23-2072465	Page 5
Part XIII	Supplemental Inform	ation (continued)			
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### **SCHEDULE G** (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

OMB No. 1545-0047 Open to Public

Inspection

Name of the organization

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. National Association of Watch and Clock Collectors

Employer identification number

23-2072465

Findsian Astrition Complete	itaba amamina	ali a la		wared "Van" to Fa	000 Dort IV	
Part I Fundraising Activities. Complete Form 990-EZ filers are not required	l to complete t	his p	<u>art.</u>			iine I <i>I</i> .
1 Indicate whether the organization raised funds throug	h any of the follow	ving ac	ctiviti	es. Check all that appl	y.	
a X Mail solicitations	e Solicitation	of no	n-go	vernment grants		
<b>b</b> Internet and email solicitations	f Solicitation	of gov	verni	ment grants		
c X Phone solicitations	g Special fur	ndraisii	ng e	vents		
d X In-person solicitations						
Did the organization have a written or oral agreement or key employees listed in Form 990, Part VII) or entit b If "Yes," list the ten highest paid individuals or entities compensated at least \$5,000 by the organization.	y in connection w	ith pro	fessi to ag	onal fundraising servi reements under which	ces? the fundraiser is to be (v) Amount paid to	(vi) Amount paid to
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custod contro contribu	oÍ of	(iv) Gross receipts from activity	(or retained by) fundraiser listed in col. (i)	(or retained by) organization
Alexander Haas		Yes	No			
1 Piedmont Place						
Atlanta GA 30305-1512	Fundraisir	1	Х	594,305	129,320	464,985
2						
3						
4			-			
5						
6						
7						
8						
9						
10						
Total			▶	594,305	129,320	464,985
3 List all states in which the organization is registered or registration or licensing. California, Connecticut, Geo Hampshire, New Jersey, New Yennsylvania, Tennessee, Was	rgia, Mas ork, Nor	ssac	chi	setts, Mis colina, Okl	sissippi, l	gon,

23-2072465

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported

more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col. (a) through col. (c)) (event type) (event type) (total number) Revenue 1 Gross receipts 2 Less: Contributions 3 Gross income (line 1 minus 4 Cash prizes 5 Noncash prizes ...... Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) .... Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming col. (a) through col. (c)) bingo/progressive bingo 1 Gross revenue 2 Cash prizes ..... Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes % 6 Volunteer labor Nο 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain:

Part II

Sche	dule G (Form 990 or 990-EZ) 2013	National	Association	of Watch	23-2072465	Page <b>3</b>		
11	Does the organization operate gamir					Yes No		
12	Is the organization a grantor, benefic	iary or trustee of a t						
	formed to administer charitable gami	-				Yes No		
13	Indicate the percentage of gaming a							
a					13a	%		
b	The organization's facility	• • • • • • • • • • • • • • • • • • • •			13b	%		
14	An outside facility  Enter the name and address of the p							
14	·	erson who prepares	s the organization's gamir	ng/special events book	s anu			
	records:							
	Name &							
	Name	,	· · · · · · · · · · · · · · · · · · ·					
	Address							
15a	Does the organization have a contra	ct with a third party	from whom the organizati	ion receives gaming				
	revenue?		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Yes No		
b	If "Yes," enter the amount of gaming	revenue received b	y the organization 🖊 📖		and the			
	amount of gaming revenue retained	by the third party 🕨	\$					
C	If "Yes," enter name and address of	the third party:						
	Name ▶							
				4				
	Address ▶							
	***************************************							
16	Gaming manager information:							
	ggba.to							
	Name ▶							
	Name ▶							
	Caming manager componention **							
	Gaming manager compensation ▶\$							
	Department of continue and ideal							
	Description of services provided >				,			
	Director/offices		1	_				
	Director/officer Em	iploy <del>ee</del>	Independent contracto	r				
4-	Manager and re-							
17	Mandatory distributions:							
а	Is the organization required under st			· ·				
_	retain the state gaming license?					Yes No		
b	Enter the amount of distributions req			er exempt organizations	; or			
	spent in the organization's own exen				<b>5</b> 1 1 (10)	17.		
Par								
	Part III, lines 9, 9b, 10			ble. Also complete	this part to provide a	any		
	additional information	(see instruction:	s).					
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		<del></del>			Schedule G (Form 990 c	- 000 E7\ 2042		
					Concant of Lenin 220 C	// JOU-LL LJ ZV IJ		

# SCHEDULE M (Form 990)

### **Noncash Contributions**

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

Attach to Form 990.

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

OMB No. 1545-0047

2013

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization National Association of Watch and Clock Collectors, Inc.

Employer identification number 23-2072465

(a) Check if applicable views contributions or items contributed views contribution amounts reported on Form 990, Part VIII, line 1g  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 — Partnership, LLC,	
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	
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	_
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	
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	_
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	
goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities — Publicly traded 10 Securities — Closely held stock	
6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities — Publicly traded 10 Securities — Closely held stock	
7 Boats and planes	
8 Intellectual property 9 Securities — Publicly traded 10 Securities — Closely held stock	
9 Securities — Publicly traded 10 Securities — Closely held stock	—
10 Securities — Closely held stock	_
	_
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 > (Watches ) X 1 1,856 Selling price, estimate	<u> </u>
26 Other ▶( )	_
27 Other ▶( )	_
28 Other ►( )	
29 Number of Forms 8283 received by the organization during the tax year for contributions for	
which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 0	
	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 28, that	<del></del>
it must hold for at least three years from the date of the initial contribution, and which is not required to be	
	X
b If "Yes," describe the arrangement in Part II.	<del>-</del>
31 Does the organization have a gift acceptance policy that requires the review of any non-standard	
contributions?  32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash	
contributions?  b If "Yes," describe in Part II.	
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,	
describe in Part II.	

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

# Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

**Open to Public** 

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990 or 990-EZ.

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

and Clock Collectors, Inc.

National Association of Watch

23-2072465

Form 990 - Additional Information The Organization's mission is to encourage and stimulate interest in the art and science of horology (study of time and timekeeping) for the benefit of the public and its members, in the following ways: promoting and providing public and vocational education in the arts and science of horology; sponsoring conventions, symposiums, and other events of horological interest; providing horological research opportunities through the collection and presentation of horological data material for posterity; promoting and providing the public display of horological artifacts of every kind and description and offering related lending, research and reference library facilities; cooperating with individuals, chapters and other institutions to stimulate genuine interest in the collection, conservation, interpretation and exhibition of time pieces and other horological items; sponsoring and supporting general, special interest and educational chapters of the corporation worldwide. Form 990, Part VI, Line 6 - Classes of Members or Stockholders The Organization has members. Form 990, Part VI, Line 7a - Election of Members and Their Rights Members elect 7 of the 12 board members. Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members Members must approve changes to the bylaws.

National Association of Watch	23-2072465
Form 990, Part VI, Line 11b - Organization's Pro	cess to Review Form 990
The Form 990 is forwarded to the full Board of D	irectors for review.
Form 990, Part VI, Line 12c - Enforcement of Con	flicts Policy
Board members must annually file a new conflict	of interest form to be
reviewed by the Chair and Executive Director each	h year.
Form 990, Part VI, Line 15a - Compensation Proce	ss for Top Official
The Director collects key salary information to	present to the Board of
Directors for informational purposes.	
Form 990, Part VI, Line 17 - Other States Where	Copy of Return is Filed
Washington	
Form 990, Part VI, Line 19 - Governing Documents	Disclosure Explanation
NAWCC makes its governing documents, conflict of	interest policy and
financial statements available to the public upo	on request and via the
Organization's website.	