### TAX RETURN FILING INSTRUCTIONS

FORM 990

# FOR THE YEAR ENDING

MARCH 31, 2020

#### PREPARED FOR:

NATIONAL ASSOCIATION OF WATCH AND CLOCK COLLECTORS, INC. 514 POPLAR STREET COLUMBIA, PA 17512-2130

#### PREPARED BY:

RKL LLP 3501 CONCORD ROAD, PO BOX 21439 YORK, PA 17402

#### AMOUNT DUE OR REFUND:

NOT APPLICABLE

#### MAKE CHECK PAYABLE TO:

NOT APPLICABLE

#### MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:

#### RETURN MUST BE MAILED ON OR BEFORE:

#### SPECIAL INSTRUCTIONS:

THIS COPY OF THE RETURN IS PROVIDED ONLY FOR PUBLIC DISCLOSURE PURPOSES. ANY CONFIDENTIAL INFORMATION REGARDING LARGE DONORS HAS BEEN REMOVED.

WE RECOMMEND THAT YOU SEND THE ENCLOSED FORM TO THE TAXING AUTHORITIES BY CERTIFIED MAIL WITH A REQUEST FOR A RETURN RECEIPT. PLEASE RETAIN THE RECEIPT AS PROOF OF TIMELY FILING.

PLEASE SIGN, DATE, AND RETAIN FOR YOUR RECORDS.

#### \*\* PUBLIC DISCLOSURE COPY \*\*

# **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

(Rev. January 2020) Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public.

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

ax year beginning APR 1 2019 and ending MAR 31

Open to Public Inspection

Marianananananananananananananananananana	CH FIRE	2013 Calendar year, or tax year beginning APA I, 2017 and en	CHIES T.T		***************************************
B c	Check if pplicable Addrest chang	NATIONAL ASSOCIATION OF WATCH AND CLOCK		D Employer identifica	ation number
<u></u>	¬ Name			22 207246	E
L	_]chang ⊤Initial	<del>Januaria de la companie de la compa</del>		23-207246	ng manganganganganganganganganganganganganga
L	_]return ∏Fiṇal	Number and street (or P.O. box if mail is not delivered to street address)  Ro  514 POPLAR STREET	om/suite	E Telephone number 717-684-8	261
L	اreturn. termin				3,760,043.
Γ	ated ∏Ameno	City or town, state or province, country, and ZIP or foreign postal code  COLUMBIA, PA 17512-2130		G Gross receipts \$	
	_ return   Applic   tion		*****************	H(a) Is this a group ret	
L	tiòn pendir	SAME AS C ABOVE		for subordinates?	
H "T	-			H(b) Are all subordinates incl	bases and - bases and
		empt status: X 501(c)(3) 501(c) ( )	527	·	st. (see instructions)
	einen en	organization; Corporation Trust X Association Other	L Voor	H(c) Group exemption	State of legal domicile; PA
	irt I	Summary	IL Year (	orionnation, 10/0 M	State of legal domicile, EA
in a constant		Briefly describe the organization's mission or most significant activities: THE OR	GANT	ZATTON SEEKS	TO
ce Ce		ENCOURAGE MEMBER AND PUBLIC INTEREST IN THI			
8		Check this box if the organization discontinued its operations or disposed	ana kana kana kana kana kana kana kana		KARING KA
/er					12
é	8	Number of voting members of the governing body (Part VI, line 1a)  Number of independent voting members of the governing body (Part VI, line 1b)			<u>1</u> 2
ంద		Total number of individuals employed in calendar year 2019 (Part V, line 2a)		monimulpus	34
Activities & Governance				amonombos	
2		Total number of volunteers (estimate if necessary)			18,484.
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			10,404.
**************	D	Net unrelated business taxable income from Form 990-T, line 39		navariani anti-anti-anti-anti-anti-anti-anti-anti-	
9		Onestalla di anno and annota (Onesta) (III line adda)		Prior Year 1,345,123.	Current Year 1,823,321.
	1	Contributions and grants (Part VIII, line 1h)		490,482.	485,979.
Revenue		Program service revenue (Part VIII, line 2g)	greenzez	205,334.	125,142.
Rey	9	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	8		
	8	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	J	64,905.	53,639.
***********		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,105,844.	2,488,081.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)			
	8	Benefits paid to or for members (Part IX, column (A), line 4)	gressorius	0.	<u> </u>
S)	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,065,378.	939,143.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		. 0	
Ž	b	Total fundraising expenses (Part IX, column (D), line 25)   108,415	carana guenaran	anning the second se	
ш	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	8	1,330,300.	1,232,264.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,395,678.	2,171,407.
***********		Revenue less expenses. Subtract line 18 from line 12		-289,834.	316,674.
Net Assets or Fund Balances			Beg	ginning of Current Year	End of Year
sete	20	Total assets (Part X, line 16)		7,695,307.	7,480,345.
t As	21	Total liabilities (Part X, line 26)		490,620.	445,534.
		Net assets or fund balances. Subtract line 21 from line 20	<b>.</b>	7,204,687.	7,034,811.
november of	ırt II	Signature Block	************	***	
		lties of perjury, I declare that I have examined this return, including accompanying schedules an			nowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which	preparer	has any knowledge.	
		Olymphys. A officer			onnominament 51
Sigr	1	Signature of officer		Date	
Her	е	CHRIS MILLER, TREASURER		***************************************	***************************************
*********	akanahanahanahan	Type or print name and title	mononononymon	0.000,000,000,000,000,000,000,000,000,0	OFFICE OF THE PROPERTY OF THE
		Print/Type preparer's name Preparer's signature		Date Check if	PTIN
Paid		DOUGLAS L. BERMAN, CPA DOUGLAS L. BERMAN	<u>, Cli</u>	0/30/20 self-employed	P01269555
Prep	arer	Firm's name 🕟 RKL LLP	*******************************	Firm's EIN 🛌 2	3-2108173
Use	Only	Firm's address 3501 CONCORD ROAD, PO BOX 21439			
***************************************	***************************************	YORK, PA 17402	***************************************	Phone no. <b>71</b> 7	-843-3804
May	the If	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

Pai	rt III   Statement of Program Service Accomplishments	
NATIONAL PROPERTY.	Check if Schedule O contains a response or note to any line in this Part III	iniciais iniciais iniciais ann ann an 1800 ann
1	Briefly describe the organization's mission:	
		IN THE
	STUDY OF TIME AND TIMEKEEPING VIA EDUCATIONAL OPPORTUNITIES, SP	ECIAL
	PUBLICATIONS, MEMBER AND PUBLIC EVENTS AND ACCESS TO THE	
	LIBRARY/MUSEUM.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	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.	barrand a second
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	exnenses
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total ex	•
	revenue, if any, for each program service reported.	periodo, aria
4a	1 400 000	492,321.)
*8 ca	(Code: ) (Expenses \$ 1,429,355 including grants of \$ U · ) (Revenue \$ THE ORGANIZATION SEEKS TO ENHANCE THE EDUCATION OF THE HISTORIC.	totorotorotorotorotorotorotorotorotorot
	SCIENTIFIC IMPORTANCES OF CLOCKS AND WATCHES TO THE GENERAL PUB	***************************************
	ITS 11,018 MEMBERS THROUGH PUBLICATIONS AND PROGRAMS, INCLUDING	INDICATE POR PORTO POR PORTO POR PORTO POR PORTO POR PORTO PORTO POR PORTO POR PORTO PORTO PORTO PORTO PORTO P
		L.S. commencement and a second and a s
	MUSEUM AND LIBRARY, AS WELL AS THE AVAILABILITY TO STUDY THE	
	CONSTRUCTION AND REPAIR OF CLOCKS AND WATCHES AT EDUCATIONAL PR	OGRAMD.
		010701070107010701070107010701070107010
		CHOTOLOGICA CARACTERISTORIO ESCACIONO CONTRACTORIO CONTRACTORIO DE CONTRACTORI
		***************************************
		CALONOLOGICA CONTRACTOR CONTRACTO
		0167667676767676767676767676767676767676
		401010101010101010101010101010101010101
NATIONAL PROPERTY.		***************************************
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
		10101101011010101010101010101010101010
		***************************************
		MATANA KANDA K
		2000-000-000-000-000-000-000-000-000-00
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$	
	Total 19 9 and 19 9 a	anaranaranaranaranaranaranaranaranarana
		***************************************
		1910-1910-1919-1919-1919-1919-1919-1919
		istorotororotorotorotorotorotorotorotorot
		\$
	Other was a series of Occasilla and Other late O	THE RELEASE REPORT OF THE PROPERTY OF THE PROP
4d	Other program services (Describe on Schedule O.)	
nananananan P	(Expenses \$ including grants of \$ ) (Revenue \$	umbranenenenen
4e	Total program service expenses ► 1,429,355.	- 000
		Form <b>990</b> (2019)

Form 990 (2019) COLLECTORS, INC.
Part IV Checklist of Required Schedules

		quenennen	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	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, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	ненинания	<u> </u>
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	MOROKOKOKOKOK	LX.
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			X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		44.50	
	Schedule D, Part III	8	_X_	panananan
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			**
	If "Yes," complete Schedule D, Part IV	9	************	X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		44	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	<u> </u>	
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,		44	
	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	MINISTER SERVICES	<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	nomenomenom	<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			3.7
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u> </u>
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			X
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	_11f_	MODERNIO REPORTER	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
128	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40	Х	
	Schedule D, Parts XI and XII	12a		
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	401		7.7
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	**********	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States?	13	464040404040404	X
14a b		14a	**************	www.comm
8.7	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		Х
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	H-883	MODERN STREET	an or
10	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		acanananan	monionom
	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	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	***************************************	nensonososos	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	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,"	uunistinni	***************	HOLOROLORIS
	complete Schedule G, Part III	19		Х
20a		20a	HOLOHOMOMOMOM M	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	***************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
		-menenennen		

Page 3

23-2072465 Form 990 (2019) Page 4 Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on X Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 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 X 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete X 24a Schedule K. If "No," go to line 25a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a X b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete X 25b Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current 26 or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II X 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III ....... X Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L. Part IV X b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? # 28c "Yes," complete Schedule L, Part IV X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 X contributions? If "Yes," complete Schedule M 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and X X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? X 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 X and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? X Note: All Form 990 filers are required to complete Schedule O 38 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 25 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No 2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements. 34 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? X 2b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? X За b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O X 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X **4a b** If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X 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 6b 7 Organizations that may receive deductible contributions under section 170(c). X 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? 78 X b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X 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? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f f N/ If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? N/ h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. N/Aa Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A 9b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12
N/A b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders N/A 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 Section 501(c)(29) qualified nonprofit health insurance issuers. N/Aa 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 Enter the amount of reserves on hand X 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 on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or X excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

If "Yes," complete Form 4720, Schedule O.

Form 990 (2019)

COLLECTORS, INC.

23-2072465

Page 6

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 on Schedule O. See instructions.

Section A. Governing Body and Management    Post   No.   Post   No.		Check if Schedule O contains a response or note to any line in this Part VI			X
the start the number of widing members of the governing body, of the serior of the law year.  If there are neighbor discrete the number of using right aurung members of the governing body, of the growning body body body body body body body body	Sec				
the fine are marbrial differences in vetting rights among nemetars of the governing body, or if the governing body.  be Children for number of voting members included on line 1a, above, who are independent  continued from the property of			~~~~	Yes	No
the reare maturial differences in vetting rights among members of the governing body, or if the governing body delegated neveral utility to an excustive committee, optain an steplearderst but 1.2 but 1.2 bit any officer, director, fuscise, or key employee for all the control of the regular control of the regular control delegate control over management duties customarily periformed by or under the direct supervision of officers, clinector, fuscises, or key employee?  3 Did the organization redesignate control over management duties customarily periformed by or under the direct supervision of officers, clinectors, increase, or key employees to a management company or other person?  4 Did the organization make any significant changes to its governing documents since the prior Form 500 was filled?  5 Did the organization have members or stockholders?  6 Did the organization have members as tockholders?  7 Did the organization have members as tockholders?  8 Did the organization have members as tockholders?  8 Did the organization have members as tockholders?  9 Did the organization have members as tockholders?  9 Did the organization have members as tockholders?  10 Did the organization tocknown on the organization reserved to (or subject to approve by) members, atockholders, or persons other than the governing body?  9 Did the organization contemporationally decument the meetings held or written actions undertaken during the year by the following:  10 Did the organization organization the organization reserved to (or subject to approved by) members, atockholders, or persons other than the governing body?  10 Experimental to organization to the organization organizatio	1a	Enter the number of voting members of the governing body at the end of the tax year 12			
be Chief the number of voting presentes as interesting committee as similar committee, applies in Schedule C.  Did any officor, director, trustees, or key employee have a family relationship or a business relationship with any other officers, director, trustees, or key employees to a management duties outstomarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management duties outstomarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?  3					
2					
2	b	10			
Diet the organization diseage to entrol own management duffies customarily performed by or under the direct supervision of officers, directors, functees, or key employees to a management company or other person?  Diet the organization make any significant changes to its governing documents since the prior Form 990 was filled?  Diet the organization have members or stockholders?  Diet the organization have members or stockholders, or other persons who had the power to elegitate or appoint one or more members of the governing body?  Diet the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  A visually of the organization have members of the organization reserved to for subject to approval by) members, stockholders, or persons other than the governing body?  Bithe any officer, director, function, or sey employee listed in Part VII, Section A, who cannot be reached at the programization and the provides the names and addresses on Schodules O.  Bis three any officer, director, function, or key employee listed in Part VII, Section A, who cannot be reached at the programization and the provides the names and addresses on Schodules O.  Bis Diet organization have local chapters, branches, or affiliates?  Diet the organization have been been policies and procedures governing the activities of such chapters, affiliates.  Diet have appreciated in have local chapters, branches, or affiliates?  Diet have appreciated to the process, if any, used by the organization's example by the formatic by th	2	, , , , , , , , , , , , , , , , , , ,	q		
Souther prepartization delegate control own management dutiles customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?  4 Dut the organization become every during the year of a significant changes to its governing documents since the prior Form 990 was filed?  5 Did the organization become every during the year of a significant diversion of the organization's assists?  5 Did the organization have members as tockholders, or other persons who had the power to elect or appoint one or more members of the organization remembers or the powering body?  5 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  6 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  8 Did the organization configuration configuration reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  8 Did the organization configuration configuration or the persons of the them the governing body?  9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization and the persons of the p	3334	# and the standard to the standard and t	2		l x
or officers, directors, frustees, or key employees to a management operating obcurrents since the prior Form 900 was filled?  4	3			***************	
4   X 5   Did the organization become aware during the year of a significant changes to its governing documents since the prior Form 990 was filled? 5   Did the organization become aware during the year of a significant diversion of the organization's assets? 6   X   7   Did the organization have members or stockholders? 7   Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more remainers of the governing body? 5   Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5   Did the organization contemporations by december to the organization contemporation of the organization contemporation by the following: 5   Did the organization contemporation by the organization of the organization have local chapters, branches, or affiliates? 5   Section B. Policies (mis. Specific B. Parches, branches, or affiliates? 5   Oil the organization have local chapters, branches, or affiliates? 5   Oil the organization have organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 5   Oil the organization provided a complete copy of this form 990 to all members of its governing body before filling the form? 5   Did the organization have a written organization of the organization's exempt purposes? 5   Oil the organization organization organization organization organization organization organization organiza			3		x
5 Did the organization become aware during the year of a significant diversion of the organization's assets?  6 Did the organization have members or stockholders?  7 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  5 Are any governance docisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  8 Did the organization contemporaseusly document the medius; held or written actions undertaken during the year by the following:  8 The governing body?  9 Is there are officer, director, trustee, or key employee listed of Part VIII, Soction A, who cannot be reached at the organization's mailling address? If "Yes," organization about problems not required to the Internal Revenue Code.)  8 Section B. Policies — This Socion B expenses information about policies not required by the Internal Revenue Code.)  9 If "Yes," In the Internal Revenue Code is an organization have been proposed in the organization's exampt purposes?  10 Did the organization have local chapters, branches, or affiliates?  10 Did the organization have local chapters, branches, or affiliates?  11 Has the organization provided a complete copy of this Form 990 to all members of its governing body before Illing the form?  12 Did the organization have a written policies and procedures governing the activities of such chapters, affiliation, and branches to ensure their operations are consistent with the organization's exampt purposes?  12 Did the organization have a written ordifict of interest policy? If "No." go to line 13  13 December of the organization have a written ordifict of interest policy? If "No." go to line 13  14 Did the organization have a written whistlebiower policy?  15 Did the progenization have a written whistlebiower policy?  16 Did the organization have a written whistlebiower policy?  17 Did the progenization have a written whistlebiower policy?  18 Did the organi	А		men and a server	*****************	<u>Onenenenenenen</u>
6 Did the organization have members or stockholders?  7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  5 A server governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  8 Did the organization contemporaneously document the meelings held or written actions undertaken during the year by the following:  8 The governing body?  8 Lach committee with suthority to act on behalf of the governing body?  9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If Yes, * provide the names and addresses on Schedule O.  8 Section B. Policies (f): Section B sequests information about opticies not resulting by the Internal Revenue Code.)  10a Did the organization have local chapters, branches, or affiliates?  10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's example purposes?  11a Has the organization have a written policies or provide a security of the form governing body before filing the form?  11b Werr officers, director, or trustees, and key employees required the disclose annually interests that could give rise to conflicts?  12b Werr officers, directors, or trustees, and key employees required the disclose annually interests that could give rise to conflicts?  12c X  13b Old the organization have a written ordicitor and enforce compliance with the policy? If "Yes," describe in Schedule O have this was done.  13c Did the organization have a written ordicitor and enforce compliance with the policy? If "Yes," describe in Schedule O have the wast done.  15c Did the organization have a written ordicitor or provided the provided the provided the provided the provided the provided the prov	-		anning and	NO DE PORTO	generalen meneralen
Table the organization have members, stockholders, or other persons who had the power to elect or appoint one or members of the governing body?  A rea my covernance decisions of the organization reserved to (or subject to approval by) members, stockholders, or proven persons other then the governing body?  B Did the organization centemperaneously document the meetings held or written actions undertaken during the year by the following:  B Did the organization provided the meetings held or written actions undertaken during the year by the following:  B Did the organization that the meetings held or written actions undertaken during the year by the following:  B Did the organization from the provided the neames and addresses on Schadule 0  Section B. Policies (Phis, Section B requests information about onlicios not mautimal by the Internet Revenue Cade):  Vers   No.    Type   No.    Typ			menson	X	
more members of the governing body?  b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  8 Did the organization centemporaneously document the meetings held or written actions undertaken during the year by the following:  8 The governing body?  9 Is there any officer, director, frustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization from smilling address? If Yes, **poxide the narraes and addressess on Schedule O  9 Is there any officer, director, frustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization have local chapters, or key officers and addressess on Schedule O  10 Id the organization have local chapters, branches, or affiliates?  10 If Yes, **did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization in exempt purposes?  10 If Yes, **did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization in exempt purposes?  10 If Yes, **did the organization have a written conflict of interest policy?  11 If It is the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?  12 Did the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?  12 Did the organization regularly and consistently monitor and enforce compliance with the policy? If Yes, **describe in Schedule O Dove this was done  13 Did the organization have a written observed to disolase annually interests that could give rise to conflicts?  14 If Yes **To be the organization have a written observed to disolate a review and approval by independent persons, comparability data, and contemporaneous	-	•		norononononono	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  8 Did the organization centerprenaeusly document the mestings hald or written actions undertaken during the year by the following:  8 The governing body?  9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O  9 X  Section B. Policies (This Section B requests information should policies not required by the Internal Revenue Code.)  10a Did the organization have local chapters, branches, or affiliates?  10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  11a Has the organization provided a complete copy of this Form 980 to all members of its governing body before filling the form?  12b Describe in Schedule O the process, if any, used by the organization to review this Form 990 to all members of its governing body before filling the form?  12c Did the organization have a written conflict of interest policy? If "No," go to line 13  12c Did the organization have a written whistleblower policy?  13c Did the organization have a written whistleblower policy?  13d Did the organization have a written whistleblower policy?  15d Did the process far any used by the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  15d Did the organization have a written decision of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  15d Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	2 5.2		79	X	
Because other than the governing body?  8 Did the organization contemporanously document the meetings held or written actions underfaken during the year by the following:  8 The governing body?  9 Is there any officer, director, frustee, or key employee fisted in Part VII, Section A, who cannot be reached at the organization's mailing address?	h		* 52	anananananananan anananananananan	
By Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  a The governing body?  b Each committee with authority to act on behalf of the governing body?  st there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O  section B. Policies (This Saction B requests information shout policies not required by the Internal Revenue Code)  Total Did the organization have local chapters, branches, or affiliates?  b if "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  10b X I I Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?  b Describe in Schedule O the process, if any, used by the organization to review this Form 990.  12a Did the organization have a written conflict of interest policy? If "No," go to line 13  b Were officiers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  12b X I Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O Into this was done  12c Did the organization have a written whisteblower policy?  13d Did the organization have a written whisteblower policy?  14d X I Did the organization have a written whisteblower policy?  15d Did the organization feet, and contemporaneous substantiation of the deliberation and decision?  15d Did the organization feet, and contemporaneous usualisation in the deliberation and decision?  15d Did the organization feet, and contemporaneous usualisation in the deliberation and decision?  15d Did the organization invest in, contribute assets to, or participate in a joint ventu	I.J		7h	x	
a The governing body? b Each committee with authority to act on behalf of the governing body? b Is there ary officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the crganization's mailing address? If "Yes," provide the names and addresses on Schedule O  Section B. Policies (This Section B Requests information about policies not required by the Internal Revenue Code.)  Yes No  10a Did the organization have local chapters, branches, or affiliates?  10a Did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?  11a Did the organization have a written conflict of interest policy? If "No.," got to line 13  12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  13 Did the organization have a written orditic of interest policy?  14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comperability data, and contemporaneous substantiation of the deliberation and decision?  15a The organization have a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements. Schedule O (see instructions).  15b Using the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  16a Did the organization invest in, contribute assets to, or participate	Ω			on or	
b Each committee with authority to act on behalf of the governing body?  9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.  Section B. Policies This Section B requests information about policies not required by the Internal Flavenue Code.)  Yes No 10a Did the organization have local chapters, branches, or affiliates?  10a Did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?  11a Z	-		0.0	w	
settlements of the energy officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailting address? If "Yes," invoide the names and addresses on Schedule O.  Settlements of the organization have local chapters, branches, or affiliates?  1010 bid the organization have local chapters, branches, or affiliates?  1011 bid the organization have local chapters, branches, or affiliates?  1012 bid the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  1012 bid the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  1013 bid the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  1014 bid the organization between a written or or list of interest policy? If "No," go to line 13  1015 bid the organization requilarly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  1016 bid the organization have a written or written whistleblower policy?  1017 bid the organization have a written or written whistleblower policy?  1018 bid the organization have a written or the following persons include a review and approval by independent persons. comparability data, and contemporaneous substantiation of the deliberation and decision?  1015 bid the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a texable entity during the year?  1016 bid the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a texable entity during the year?  1018 bid the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a texable entity during the year?  1019 bid the organization invest in, contrib	ea la	Each committee with authority to get an habelf of the governing body?	ment of the second	ut sereses tereses to te	
Section B. Policies (This Section B requests information about policies not required by the Internet Revenue Code.)    Page   No.	0		OD.	neuroneuron neuroneuron	
Section B. Policies This Section B regulation have local chapters, branches, or affiliates?    10	9		0		x
Note	Sec			***************************************	1 43
10	***************************************	tion B. Folloies (This Section B requests information about bolicies not required by the Internal Revenue Code.)	***************************************	Vaa	TNA
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  124	100	Did the organization have local chanters, branches, or affiliates?	T-10a		LIVO
and branches to ensure their operations are consistent with the organization's exempt purposes?  11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  12a Did the organization have a written conflict of interest policy? If "No," go to line 13  12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  12b Using the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.  12c Id the organization have a written whistleblower policy?  13 Did the organization have a written whistleblower policy?  14 Did the organization have a written document retention and destruction policy?  15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  15a The organization's CEO, Executive Director, or top management official  15a The organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  15d Id the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  15d If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in piont venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  15e Section C. Disclosure  17e List the states with which a copy of this Form 990 is required to be filed PCA, CO, CT, GA, MA, MS, NC, NH, NJ, NY, OK, OR, OR, OR, OR, OR, OR, OR, OR, OR, OR			100	nenotonononono	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?  b Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13  b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  12c	8.0		10h	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.    Did the organization have a written conflict of interest policy?	110		MANAGE AND ASSESSED	necessaries est	
12a   12a   12b	h				
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?    Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done   12c	12a		12a	Х	
bid the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  12c	_		anner anner ann	unionistatorolom	
13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 16 The organization's CEO, Executive Director, or top management official 16 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 18 The system of the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  19 Section C. Disclosure  Section 6.104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  20 Section 6.104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available to public during the tax year.  21 Section 6.104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available to public inspection. Indicate how you made these available. Check all that apply.  22 Section 6.104 requires and results in the public during the tax year.				menonononono	
Did the organization have a written whistleblower policy?		·	120	X	
Did the organization have a written document retention and destruction policy?  15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  15 The organization's CEO, Executive Director, or top management official 15 X  15 Other officers or key employees of the organization 15b, describe the process in Schedule O (see instructions).  16 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  16 Did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  16 Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed CA, CO, CT, GA, MA, MS, NC, NH, NJ, NY, OK, OR  18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  20 State the name, address, and telephone number of the person who possesses the organization's books and records TENNIFER BYERS, CONTROLLER - 717-684-8261	13		I	unional national and	
Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization invertive and personal p			www.	unionistatorolom	
persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization is cell or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's  The organization follow a written policy or procedure requiring the organization's  The organization follow a written policy or procedure requiring the organization's  The organization follow a written policy or participate in a joint venture or similar arrangement with a  The organization follow a written policy or participate in a joint venture or similar arrangement with a  The organization invest in, contribute a xx  The organization follow a written policy and tax abeliance or participate in a joint venture or similar arrangement with a  The organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a  The organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a  The organization invest i			1-7	obs olis mennenenenenen	
The organization's CEO, Executive Director, or top management official  by Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  by If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filled ▶CA, CO, CT, GA, MA, MS, NC, NH, NJ, NY, OK, OR  Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  □ Wown website ■ X Another's website ■ X Upon request □ Other (explain on Schedule O)  19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  20 State the name, address, and telephone number of the person who possesses the organization's books and records □ JENNIFER BYERS, CONTROLLER - 717-684-8261	10				
b Other officers or key employees of the organization if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  16a X  16a X  16a X  16a X  16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  16b Impair of the participation of the participation of the person who possesses the organization to evaluate its participation of the person who possesses the organization's exempt of the person who possesses the organization's exempt of the person who possesses the organization's exempt of the person who possesses the organization's books and records of the participation of the person who possesses the organization's books and records of the person who possesses the organization's books and records of the participation of the person who possesses the organization's books and records of the person who possesses the organization's books and records of the person who possesses the organization's books and records of the person who possesses the organization's books and records of the person who possesses the organization's books and records of the person who possesses the organization's books and records of the person who possesses the organization's books and records of the person who possesses the organization's books and records of the person who possesses the organization's books and records of the person who possesses the			450	w	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ▶CA,CO,CT,GA,MA,MS,NC,NH,NJ,NY,OK,OR  Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  X Own website X Another's website X Upon request Other (explain on Schedule O)  Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  State the name, address, and telephone number of the person who possesses the organization's books and records ↓  JENNIFER BYERS, CONTROLLER - 717-684-8261				ой дь шинининин	x
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  If a list the states with which a copy of this Form 990 is required to be filed ▶CA, CO, CT, GA, MA, MS, NC, NH, NJ, NY, OK, OR  Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  X Own website X Another's website X Upon request Other (explain on Schedule O)  Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  State the name, address, and telephone number of the person who possesses the organization's books and records ▼ JENNIFER BYERS, CONTROLLER - 717-684-8261	E.J		اللاد	MADELLE	4.3
taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed CA, CO, CT, GA, MA, MS, NC, NH, NJ, NY, OK, OR  18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  X Own website X Another's website X Upon request Other (explain on Schedule O)  19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  20 State the name, address, and telephone number of the person who possesses the organization's books and records  JENNIFER BYERS, CONTROLLER - 717-684-8261	10-				
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed ▶CA, CO, CT, GA, MA, MS, NC, NH, NJ, NY, OK, OR  18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  X Own website X Another's website X Upon request Other (explain on Schedule O)  19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶  JENNIFER BYERS, CONTROLLER - 717-684-8261	1081		160		x
in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's  exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed CA, CO, CT, GA, MA, MS, NC, NH, NJ, NY, OK, OR  18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  X Own website X Another's website X Upon request Other (explain on Schedule O)  19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  20 State the name, address, and telephone number of the person who possesses the organization's books and records  JENNIFER BYERS, CONTROLLER - 717-684-8261	u_		108	***************************************	- 4.7
exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed CA, CO, CT, GA, MA, MS, NC, NH, NJ, NY, OK, OR  18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  X Own website X Another's website X Upon request Other (explain on Schedule O)  19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  20 State the name, address, and telephone number of the person who possesses the organization's books and records  JENNIFER BYERS, CONTROLLER - 717-684-8261	D				
Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed ▶CA, CO, CT, GA, MA, MS, NC, NH, NJ, NY, OK, OR  18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  X Own website X Another's website X Upon request Other (explain on Schedule O)  19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶ JENNIFER BYERS, CONTROLLER - 717-684-8261			404		
List the states with which a copy of this Form 990 is required to be filed ▶CA, CO, CT, GA, MA, MS, NC, NH, NJ, NY, OK, OR  Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  X Own website X Another's website X Upon request Other (explain on Schedule O)  Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  State the name, address, and telephone number of the person who possesses the organization's books and records ▶ JENNIFER BYERS, CONTROLLER - 717-684-8261	Sac		IOD	KOLO KOLO KOLO KOLO	
Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  X Own website X Another's website X Upon request Other (explain on Schedule O)  Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  State the name, address, and telephone number of the person who possesses the organization's books and records JENNIFER BYERS, CONTROLLER - 717-684-8261	CHARLON CHARLON		NV	OK	OR
for public inspection. Indicate how you made these available. Check all that apply.  X Own website X Another's website X Upon request Other (explain on Schedule O)  Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  State the name, address, and telephone number of the person who possesses the organization's books and records  JENNIFER BYERS, CONTROLLER - 717-684-8261					
<ul> <li>X Own website X Another's website X Upon request Other (explain on Schedule O)</li> <li>Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.</li> <li>State the name, address, and telephone number of the person who possesses the organization's books and records JENNIFER BYERS, CONTROLLER - 717-684-8261</li> </ul>			, Orliy)	avana	210
<ul> <li>Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.</li> <li>State the name, address, and telephone number of the person who possesses the organization's books and records JENNIFER BYERS, CONTROLLER - 717-684-8261</li> </ul>		harmonia, harmonia, harmonia,			
statements available to the public during the tax year.  20 State the name, address, and telephone number of the person who possesses the organization's books and records  JENNIFER BYERS, CONTROLLER - 717-684-8261	10	()	lfinen	leir	
20 State the name, address, and telephone number of the person who possesses the organization's books and records  JENNIFER BYERS, CONTROLLER - 717-684-8261	137		miank	лси	
JENNIFER BYERS, CONTROLLER - 717-684-8261	20				
	20		101616161616161616161	401.7101.0101.0101.010	(01/01/01/01/01/01/01/01/01/01/01/01/01/0
		514 POPLAR STREET, COLUMBIA, PA 17512-2130	lorestotes testes testes testes te	**************************************	to Kolo Kilo Kolo Kolo Kilo

#### Form 990 (2019)

COLLECTORS, INC.

23-2072465

Page 7

# 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.

See instructions for the order in which to list the persons above.

Check this box if neither the organization ne	or any related	orga	niza	tion	con	nper	sate	ed any current officer, d	irector, or trustee.	yrennennennennennennennennen
(A)	(B)	(C)				(D)	(E)	(F)		
Name and title	Average	Position (do not check more than on		one	Reportable	Reportable	Estimated			
	hours per	box	box, unless person is both an officer and a director/trustee)			s both	n an	compensation	compensation	amount of
	week	-	Cerai	luau	recid	n/uus	(ee)	from	from related	other
	(list any	recto						the	organizations	compensation from the
	hours for related	9 Or d	991			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
	organizations	ruste	ltrus		88/	шреп		(VV 2/ 1000 IVIIOO)		and related
	below	ndividual trustee or director	nstitutional trustee	ber.	Кеу етрюуее	ost co oyee	- B			organizations
	line)	ivibri	Instit	Officer	Key e	Highest compensated employee	Former			-
(1) RICHARD NEWMAN	50.00									
CHAIR		<u> X</u>		X	,,,,,,,,,,,		, manananan	<u></u>	0.	0
(2) LEROY BAKER	12.00									
VICE-CHAIR	Variation and the second and the sec	<u>X</u>		X				<u></u>	0.	0.
(3) JAMES HOLLOWAY (UNTIL 5/19)	10.00									
VICE-CHAIR	_	X		X	,,,,,,,,,,		,,,,,,,,,,,,,	<u></u>	0.	<u> </u>
(4) RHETT LUCKE	12.00									
SECRETARY	***************************************	<u>X</u>		X			nennen	<u> </u>	0.	0.
(5) CHRIS MILLER	4.00									
TREASURER	***************************************	<u>X</u>		X	,,,,,,,,,,		monomon	<b></b> 0.	0.	0.
(6) THOMAS A. COMPTON	32.00									
DIRECTOR	***************************************	<u>X</u>					nennen	<u> </u>	0.	0.
(7) JAMES T. DUTTON	15.00									
DIRECTOR	postero antico de la constante	LX.					,,,,,,,,,,,	<u> </u>	0.	0.
(8) JOHN COTE	24.00									
DIRECTOR		<u>X</u>					queneros	0.	0.	0.
(9) ROBERT GARY	6.00								_	_
DIRECTOR		<u>LX</u>					,,,,,,,,,,,,,	<u> </u>	0.	0.
(10) ROBERT BURTON (START 12/19)	60.00	l								
DIRECTOR		<u>X</u>					mensens	0.	0.	<u> </u>
(11) JAMES C. PRICE	6.00	l						_	_	_
DIRECTOR		X					,,,,,,,,,,,,,	<u> </u>	<b></b> 0.	0
(12) PHILIP E. MORRIS	20.00	١.,							_	_
DIRECTOR		X	durana				an a	0.	<u> </u>	0.
(13) TIM ORR	2.00	.,							_	_
DIRECTOR		X					manan	<u> </u>	0.	0.
(14) DONNA KALINKIEWICZ (UNTIL 11/19	2.00	\ \ \ \ \ \ \						_	_	_
DIRECTOR		ĮX.						<b>.</b>	ļ	0.
(15) THOMAS J. BARTELS (UNTIL 5/19	2.00	l.,						_	_	_
DIRECTOR		X			,,,,,,,,,,,		, mononono	0.	0.	<u> </u>
(16) CARROL W. WOLFE (UNTIL 5/19)	2.00	x						_		
(17) PHILIP C. GREGORY (UNTIL 5/19)	1 2 00	宀						0.	0.	<u></u>
DIRECTOR	2.00	x						0.	0.	
DIRECTOR	I	LA	L	<u></u>	L	L	L	V •	U.	0.

COLLECTORS, INC.

Part VII Section A. Officers, Directors, Trus	tees, Key Emi	oloy	ees,	anc	Hi	ghes	st C	ompensated Employee	s (continued)	TO A STATE A S	graansaanaan	*****	0.000.000.000.000.000.000.000.000.000.000.000
(A)	(B)	(C)						(D)	(E)			(F)	
Name and title	Average	(do	not c	Position not check more than one			one	Reportable	Reportable	э	Es	stimate	ed
	hours per	box	, unle	ss per	rson i	is both	h an	compensation	on	ar	nount		
	week (list any	www.	Cerai	lu a u	116010	717 ti ti ti ti	Tee)	from	from relate			other	
	hours for	ndividual trustee or director						the organization	organizatior (W-2/1099-MI			npensa rom th	
	related	8 0 7 0	166			sated		(W-2/1099-MISC)	(***2/1099*1011	30)		anizat	
	organizations	truste	al trus		88,	шреп		(VV 2/ 1000 NIIOO)			`	d relat	
	below	duai	nstitutional trustee	200	кеу етрюуве	Highest compensated employee	18					anizati	
	line)	Indiv	Instit	Officer	Key e	High empl	Former						
(18) DAVID A. LEE (UNTIL 5/19)	2.00												
DIRECTOR		LX.						0.	***************************************	0.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*****	0.
(19) THOMAS WILCOX (UNTIL 12/19)	40.00												
EXECUTIVE DIRECTOR		X	January		ļ		que en	104,644.	******************************	0.		9	21.
	******************************												
		ļ	Januaran						*************************************				01.701070707.70107
	******************************												
	<b>,</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Janear	quantan					******************************	**********		en alakan da karaban	1010101010101010101010
		ļ	January						were reconstructed as a second construction of the second construction of t	***************************************		unnanananan	
		ļ	Janana					us <sub>quinos or </sub>	***************************************	NOVONINO NOVONO NOVO	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	NASOKONONONONON	Maria de Parto Forto Forto Fo
	***************************************												
			o processon	mannan					************************************	*************		watersterester	MODERANDERS
	***************************************												
				unnen		,,,,,,,,,	Janes en	***************************************	*************************************	*****	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	KARANANANA	and a second second
	***************************************												
	•	l	<u> </u>	ļ	L	l	<u></u>	4 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	percentalista (oli stato percentalista (oli stato percent		***************************************		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
1b Subtotal							<b>&gt;</b>	104,644.	110000000000000000000000000000000000000	0.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<u>21.</u>
c Total from continuation sheets to Part VI							<b>&gt;</b>	104 644	Printerenteraleren bereiterakeriakeriakeriakeriakeriakeriakeri	0 <b>.</b> 0 <b>.</b>			$\frac{0.}{21.}$
d Total (add lines 1b and 1c)		- marine marine						104,644.		nnannannand			
2 Total number of individuals (including but n	ot iimitea to th	IOSO	liste	ar ar	oove	) wn	io re	eceived more than \$100,	UUU of reportable	9			1
compensation from the organization		enementation i	******	and the second	******					samanananan		Yes	No
3 Did the organization list any former officer,	director truct	00 1	/ CO / /	mm	01/0	a ar	· bio	that asmonastad amn	0,100 00	ſ	,	100	1.20
											3		x
line 1a? If "Yes," complete Schedule J for s.  4 For any individual listed on line 1a, is the su											<u> </u>		1-43
and related organizations greater than \$150											а		х
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes," com					,			9			5		х
Section B. Independent Contractors		Z.S.L	2125	distrib	7613	. Haladaman				***************************************	L	Lannan	<u></u>
Complete this table for your five highest co.	mpensated inc	depe	nde	nt co	ontra	acto	rs th	nat received more than \$	100,000 of com	pensa	tion fro	om	YOTOKO KOKOKO KOKOKO
the organization. Report compensation for	•												
(A)	01.010101010101010101010101010101010101			eritarenen				(B)		question and a second	((	C)	VOLORODO NO ROBOTO DO
Name and business	address	N	ONE	7				Description of s	ervices	C		nsatio	n
			***********	0101010101010	***********	************					10161616161616161616	CORRECTION	***********
					~~~								
-													
				enere never	*****	(01.01.01.01.01.01.01			01.000.000.000.000.000.000.000.000.000.	quenemente	*************	unanananananan	************
***************************************				enerenenen	*********	en anno no no no no		<i>реневания положения на положения</i>	**************************************		ionenenenenenenene	ranseronoraner	aurenananananan
										700000000000000000000000000000000000000			
	01010101010101010101010101010101010101			enerenenen	*********	101010101010101			34.54.54.54.54.54.54.54.54.54.54.54.54.54	<u> </u>			***************************************
2 Total number of independent contractors (in	-	ot lir	nited	d to			ted	above) who received me	ore than				
\$100,000 of compensation from the organiz	zation ⊳				(					ļ			

23-2072465 Page 9

Check if Schedule O contains a response or note to any line in this Part VIII (B) Related or exempt Unrelated Revenue excluded Total revenue from tax under function revenue business revenue sections 512 - 514 , Gifts, Grants nilar Amounts 1 a Federated campaigns 1a 1b 888,381 **b** Membership dues c Fundraising events 10 d Related organizations 1d Contributions, Cand Other Simil 11,294. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 923,646 similar amounts not included above 1f 214,375. Noncash contributions included in lines 1a-1f 1,823,321. h Total. Add lines 1a-1f **Business Code** 2 a NATIONAL CONVENTION 272,444, 272,444, 611600 Program Service b MART INCOME 519100 99,880 99,880, MUSEUM ADMISSIONS 511120 46,426 46,426. TUITION & FEES 611600 32,815. 32,815. ADVERTISING INCOME 541800 18,484. 18,484, 900099 15,930 15,930. f All other program service revenue 485,979, g Total. Add lines 2a-2f Investment income (including dividends, interest, and 110,142. 110,142. other similar amounts) 4 Income from investment of tax-exempt bond proceeds Wp-5 Royalties ..... (i) Real (ii) Personal 12,730 6 a Gross rents 6a 9,648. 6b b Less: rental expenses ... 3,082. c Rental income or (loss) 6c 3,082, 3,082. Ma d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of 1,254,924. assets other than inventory b Less: cost or other basis 1,239,924. Other Revenue and sales expenses c Gain or (loss) 15,000. 7c 15,000. 15,000. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9b **b** Less: direct expenses c Net income or (loss) from gaming activities Min. 10 a Gross sales of inventory, less returns and allowances 47,216 22,390. b Less: cost of goods sold 24,826. 24,826. c Net income or (loss) from sales of inventory **Business Code** Miscellaneous 11 a MISCELLANEOUS INCOME 900099 13,796 13,796. 900099 CELEBRATION INCOME 11,935 11,935. b d All other revenue ..... 25,731, Total. Add lines 11a-11d 2,488,081. 492,321. 18,484. 153,955. Total revenue. See instructions 12

23-2072465 Page 10

Form 990 (2019) COLLECTORS, INC.
Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comple Check if Schedule O contains a respons	***************************************	0K40K40MK40K40K40K40K40K40K40K40K40K40K40K40K40K	nplete column (A).	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	e or note to any line in t (A) Total expenses	nis Part IX  (B)  Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members	***************************************	***************************************		
5	Compensation of current officers, directors,	105 074	E7 610	20 401	0 72/
	trustees, and key employees	105,874.	57,649.	39,491.	8,734.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
1999	persons described in section 4958(c)(3)(B)	677,647.	260 120	757 OF1	55,668.
7	Other salaries and wages		369,128.	252,851.	
8	Pension plan accruals and contributions (include	16,756.	8,430.	6,321.	2,005.
0	section 401(k) and 403(b) employer contributions)	79,421.	47,248.	25,068.	7,105.
9	Other employee benefits	59,445.	32,653.	21,951.	4,841.
10	Payroll taxes Fees for services (nonemployees):			waxaanaanaanaanaanaanaanaanaanaanaanaanaa	2,041.
11	Management				
a b	1	***************************************		narrarrarrarrarrarrarrarrarrarrarrarrarr	
	LegalAccounting	13,692.	***************************************	13,692.	
		umumumuminin ihai ihai kananin ihai ihai ihai ihai ihai ihai iha		mananananananananananananananananananan	
0	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	16,247.	**************************************	16,247.	
q		annonnennennen siinen kenten siinen siin	reneralisekoran erastariaren erastariak erastariak erastariak erastariak erastariak erastariak erastariak erast	unannananananananananananananananananan	4000 ENDERGIO ENDIO (ENDERGIO ENDERGIO ENDERGIO ENDIO (ENDIO (END
29	column (A) amount, list line 11g expenses on Sch O.)	113,526.	37,466.	66,177.	9,883.
12	Advertising and promotion	15,791.	15,791.	ennennennennennennennennennennennennenn	erarenamenteramenteramenteramenteramenteramenteramenteramenteramenteramenteramenteramenteramenteramenteramente
13	Office expenses	199,103.	117,655.	77,483.	3,965.
14	Information technology	11,262.	navensuusensuurensuusensuudensuusensuurensuuden	11,262.	***************************************
15	Royalties				
16	Occupancy	113,272.	93,317.	18,665.	1,290.
17	Travel	36,097.	8,563.	27,307.	227.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	198,708.	198,682.	26.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	279,058.	275,435.	3,623.	
23	Insurance	38,398.	7,965.	30,433.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	BULLETIN PRINTING	98,228.	98,228.	animannan mananan manan ma Manan	AND HAND HAND HAND HAND HAND HAND HAND H
b	MART PRINTING	26,613.	26,613.	uurusen kassa k	401040410404040404040404040404040404040
C	MISCELLANEOUS EXPENSE	20,876.	907.	14,551.	5,418.
d	DUES AND SUBSCRIPTIONS	17,854.	9,009.	8,489.	356.
	All other expenses	33,539.	24,616.	unennennennennennennennennennennenhennenn	8,923.
25	Total functional expenses. Add lines 1 through 24e	2,171,407.	1,429,355.	633,637.	108,415.
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)				

Pai	rt X	Balance Sheet		101010101010101010101	
**************************************		Check if Schedule O contains a response or note to any line in this Part X			
***************************************			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	31,798.	1	8,273.
	2	Savings and temporary cash investments	72,294.	2	86,428.
	3	Pledges and grants receivable, net	291,380.	3	328,640.
	4	Accounts receivable, net	28,046.	4	28,220.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
20	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	53,144.	8	54,095.
Ä	9	Prepaid expenses and deferred charges	76,070.	9	48,486.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 11,094,869.			
	b	Less: accumulated depreciation 10b 7,057,340.	4,211,472.	10c	4,037,529.
	11	Investments - publicly traded securities	2,931,103.	11	2,888,674.
	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	na n
enenenenen	16	Total assets. Add lines 1 through 15 (must equal line 33)	7,695,307.	16	7,480,345.
	17	Accounts payable and accrued expenses	253,330.	_17_	159,430.
	18	Grants payable	reneraliseteleteleteleteleteleteleteleteletelete	18	
	19	Deferred revenue	57,638.	19	115,888.
	20	Tax-exempt bond liabilities		_20_	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
9	22	Loans and other payables to any current or former officer, director,			
Labitties		trustee, key employee, creator or founder, substantial contributor, or 35%			
<u>.</u>		controlled entity or family member of any of these persons	arabatan ar	_22_	<b>N</b> ECESCO DE CONTRACTO DE CONTR
escodi	23	Secured mortgages and notes payable to unrelated third parties	KANDA CADA SANDA SAN	23	***************************************
	24	Unsecured notes and loans payable to unrelated third parties	uerokrekierokrekisterikerokrekisterikerokrekisterikerokrekisterikerokrekisterikerok	_24_	antennantantantantantantantantantantantantan
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	170 652		170 216
		of Schedule D	179,652. 490,620.	25	170,216. 445,534.
**************************************	26	Total liabilities. Add lines 17 through 25	430,020.	26	********
ø		Organizations that follow FASB ASC 958, check here X			
30	07	and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions	5,604,506.	27	5,162,242.
<u></u>	27 28	96	1,600,181.	<u>-2</u> 4 28	1,872,569.
<u>.</u>	20	Net assets with donor restrictions  Organizations that do not follow FASB ASC 958, check here			
£		and complete lines 29 through 33.			
ò	29	Capital stock or trust principal, or current funds		29	
<u>\$</u>	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ş	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	7,204,687.	32	7,034,811.
lion	33	Total liabilities and net assets/fund balances	7,695,307.	33	7,480,345.
		TOTAL HAVING AND HOLDOODS/TAIN DURANOS		لــــــــــــــــــــــــــــــــــــــ	

# NATIONAL ASSOCIATION OF WATCH AND CLOCK

Form 990 (2019) COLLECTORS ,
Part XI Reconciliation of Net Assets

COLLECTORS, INC. 23-2072465 Page 12 of Net Assets

ra	TEXT Reconciliation of Net Assets				
**********	Check if Schedule O contains a response or note to any line in this Part XI			inininininanana	X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,48		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,17	erosoriioserosores	atorotorotorotor
3	Revenue less expenses. Subtract line 2 from line 1	3		<u>6,6</u>	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7,20	4,6	87.
5	Net unrealized gains (losses) on investments	5	-29	9,6	96.
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 on Schedule O)	9	-18	6,8	54.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	7,03	4,8	11.
Pa	rt XII Financial Statements and Reporting				en annon anno
	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	Э.			
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				
	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	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate		-		
	consolidated basis, or both:	,			
	X Separate basis Consolidated basis Both consolidated and separate basis				
С		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 on Sche		···		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing				
	Act and OMB Circular A-133?	_	За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		- manifestinal	***************************************	un non monte non a
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

#### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

NATIONAL ASSOCIATION OF WATCH AND CLOCK

OMB No. 1545-0047

2019

Open to Public Inspection

Employer identification number

COLLECTORS 23-2072465 INC. Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 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.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions)) Total

23-2072465 Page 2

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.) Section A. Public Support (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (or fiscal year beginning in) 🕨 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 4 Total. Add lines 1 through 3 5 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. Section B. Total Support (b) 2016 Calendar year (or fiscal year beginning in) (a) 2015 (c) 2017 (d) 2018 (e) 2019 (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 VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) 14 % 15 Public support percentage from 2018 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2019

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support	now, produce comp	TOTO T CITE II.					
Cale	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	(d) 2018	<b>(e)</b> 2019	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	344,323.	1279912.	1648625.	1345123.	1643321.	6261304.	
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the	1.600001	064 002	407 204	F F 7 4 C 0	F-1 A F-1-1	4027207	
	organization's tax-exempt purpose	1602981.	864,802.	48/,324.	557,469.		4027287.	
	Gross receipts from activities that are not an unrelated trade or business under section 513	***************************************		***************************************	22,983.	25,731.	48,714.	
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	1947304.	2144714.	2135949.	1925575.	2183763.	10337305.	
7 e	Armounts included on lines 1, 2, and 3 received from disqualified persons	29,441.	55,823.	45,337.	65,486.	263,638.	459,725.	
lb	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.	
C	Add lines 7a and 7b	29,441.	55,823.	45,337.	65,486.	263,638.		
	Public support. (Subtract line 7c from line 6.)						9877580.	
Sec	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) 📂	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
9	Amounts from line 6	1947304.	2144714.	2135949.	1925575.	2183763.	10337305.	
10 <i>a</i>	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	89,097.	99,184.	117,036.	135,702.	122,872.	563,891.	
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses acquired after June 30, 1975							
C	Add lines 10a and 10b	89,097.	99,184.	117,036.	135,702.	122,872.	563,891.	
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 VI.)							
13	Total support. (Add lines 9, 10c, 11, and 12.)	2036401.	2243898.	2252985.	2061277.	2306635.	10901196.	
14	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	501(c)(3) organiza	ation,	
**********	check this box and stop here							
Sec	ction C. Computation of Publi	c Support Per	centage	0001010101010101010101010101010101010101		garana ana ang katana ana ana ana ana ana ana ana ana an	ananananananananananananananananananan	
	Public support percentage for 2019 (I	, , , , , , , , , , , , , , , , , , , ,	,	column (f))		15	90.61 %	
	Public support percentage from 2018					16	92.91 %	
500	ction D. Computation of Inves	********************************	MOTOR REPORT AND REPORT OF THE POST OF THE			yaran maganaran manaran	sa 4 sal	
17	guaranatyraanaanaanaanaanaanaanaanaanaanaanaanaan							
18	Investment income percentage from					18	4.73	
19 <i>a</i>	33 1/3% support tests - 2019. If the						<b>*</b>	
b	more than 33 1/3%, check this box ar 33 1/3% support tests - 2018. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%, a	nd	
	line 18 is not more than 33 1/3%, che		•	•		-		
20	Private foundation. If the organization	n did not check a l	oox on line 14, 19a	a, or 19b, check th	is box and see inst	ructions	<b>&gt;</b>	

#### 23-2072465 Page 4

### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		quescriones	queenanana
ı		Yes	No
	1		
			***************************************
	2		
	3a		***************************************
	3b		
			***************************************
	3c		
	4a		
	4b		
			***************************************
	4c		
	5a		
	5b	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***********
	5c		***************************************
	6		
			***************************************
	7		***************************************
	88		***************************************
	9a		
	9b		*****************
	9c		
	10a		
	10b		***************************************
m 9	90 or 99	10-EZ)	2019

	rt IV   Supporting Organizations (continued)			
Luciania	r July 1 - Samuel 1 - Committee		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		100	
а.				
•42	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b	den en e	January
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a. b. or c. provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations	hoovinistion	bennementen	loumunemennu
WASHING PRINCIPLES		iotoresorenesorenesore	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
-	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
***********	supervised, or controlled the supporting organization.	2	<u> </u>	
Sec	tion C. Type II Supporting Organizations		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
enormonomonomon effe	the supported organization(s).	L1	l	
Sec	tion D. All Type III Supporting Organizations	reservation de la constante de	yaanaanaan	ymanaanaana
		r	Yes	<u>No</u>
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	_		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
2	the organization maintained a close and continuous working relationship with the supported organization(s).  By reason of the relationship described in (2), did the organization's supported organizations have a	2		
3	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations	houseviluseum	description	Bonnousenses
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	u		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	).	
2	Activities Test. Answer (a) and (b) below.	***************************************	Yes	No
3	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	<u> 2a</u>		***************************************
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
•	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	<u></u>		
9.7	of its supported organizations? If "Yes." describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

### NATIONAL ASSOCIATION OF WATCH AND CLOCK

Schedule A (Form 990 or 990-EZ) 2019 COLLECTORS, INC.

23-2072465 Page 6

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Organ	izations	amannan manan m
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970 (explain in F	Part VI). See instructions. Al
*************	other Type III non-functionally integrated supporting organizations must co	mplete Se	ctions A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
************	maintenance of property held for production of income (see instructions)	6		
_7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
************	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		<b>,,,,,</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
www.commons.com	factors (explain in detail in Part VI):		NOTORIO DE PORTO DE	
2	Acquisition indebtedness applicable to non-exempt-use assets			an marana manana ma
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
SACRES AND	see instructions).	4		and quaranteen contract contra
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		and queen an arrangement and arrangement and arrangement and arrangement and arrangement and arrangement and a
6	Multiply line 5 by .035.	6		
	Recoveries of prior-year distributions		KATAN TANDA TA	
88	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
_1_	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		wymananananananananananananananananananan
5	Income tax imposed in prior year	5		ua que en
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
***************	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionall	y integrate	ed Type III supporting orga	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2019

Par	t V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	inizations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer			
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	S	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which th	ne organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
		(ĭ)	(ii)	(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
*******	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
3	From 2014			
b_	From 2015			
C_	From 2016			
d_	From 2017			
е	From 2018	musika kalika kalik		
f_	Total of lines 3a through e			
<u>g</u>	Applied to underdistributions of prior years			garanten en e
h	Applied to 2019 distributable amount	paranen ana mananana ana mananana ana mananana ana		
i	Carryover from 2014 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
*******	line 7: \$			
3	Applied to underdistributions of prior years			<i></i>
b	Applied to 2019 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if	-		-
	any. Subtract lines 3g and 4a from line 2. For result greater			
*******	than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
************	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
NACASIA KAKA	and 4c.			
8	Breakdown of line 7:			
<u>a</u>	Excess from 2015			
b	Excess from 2016			
C	Excess from 2017			
d	Excess from 2018			
е	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

### NATIONAL ASSOCIATION OF WATCH AND CLOCK

Schedule A	(Form 990 or 990-EZ) 201	19 COLLECTORS,	INC.	23-2072465 Page 8
Part VI	Supplemental Info Part IV, Section A, lines line 1; Part IV, Section D	<b>rmation.</b> Provide the e 1, 2, 3b, 3c, 4b, 4c, 5a, 6 ), lines 2 and 3; Part IV, S	explanations required by Part II, line 10; i. 9a, 9b, 9c, 11a, 11b, and 11c; Part IV.	Part II, line 17a or 17b; Part III, line 12; Section B, lines 1 and 2; Part IV, Section C, art V, line 1; Part V, Section B, line 1e; Part V,
***************************************	(000 11311 00110113.)			
***************************************				
nukandakadakadakadakadakadakadaka				
***************************************				
*****************************				
*******************************				
NANTANANANANANANANANANANANANANANANANANA				
**************************************				
*****************************				
**************************************				
*******************************				
***************************************				
*******************************				
************************************				
******************************				
************************************				
NATIONAL PROPERTY OF THE PROPE				

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

2010

OMB No. 1545-0047

Name of the organization

NATIONAL ASSOCIATION OF WATCH AND CLOCK COLLECTORS, INC.

Employer identification number

23-2072465

Organization type (check one):						
Filers of:		Section:				
Form 99	0 or 990-EZ	X 501(c)( 3 ) (enter number) organization				
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
		527 political organization				
Form 99	0-PF	501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
		covered by the <b>General Rule</b> or a <b>Special Rule.</b> 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General	Rule					
X	. **	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special	Rules					
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year				
	**	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to				

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

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Employer identification number

23-2072465

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

	to the transfer of the transfe		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$15,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 204,497.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>11,199.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$11,294.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

23-2072465

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

	, , , , , , , , , , , , , , , , , , , ,	,	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
*7		\$ <u>100,010.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ 25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$ 25,050.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1.1		\$ <u>11,266.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

23-2072465

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
13		\$5,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
14		\$5,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
15		\$ <u>180,000.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
16		\$10,000.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

23-2072465

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

No. (b) FMV (or estimate) (sae instructions.)    No. (c)   Part		real control of the c		
WELTE MODEL #2 ORCHESTRION CA 1910,   100 PLAYER ROLLS	from		FMV (or estimate)	
(a) No. (b) (c) FMV (or estimate) (d) Date received  [a] No. (c) (b) FMV (or estimate) (see instructions.)  [a] No. (c) (b) FMV (or estimate) (see instructions.)  [a] No. (c) (d) Date received  [a] No. (c) FMV (or estimate) (see instructions.)  [a] No. (c) FMV (or estimate) (see instructions.)  [a] No. (c) (b) FMV (or estimate) (see instructions.)  [a] No. (c) (b) FMV (or estimate) (see instructions.)  [b] Date received  [c] See instructions.)  [a] No. (c) (b) FMV (or estimate) (see instructions.)  [a] No. (c) FMV (or estimate) (see instructions.)  [a] No. (c) FMV (or estimate) (see instructions.)  [b] Date received  [c] FMV (or estimate) (see instructions.)  [d] Date received  [e] FMV (or estimate) (see instructions.)				
No. from Description of noncash property given    MOROLOGICAL BOOKS			\$ 180,000.	11/25/19
S	No. from	Description of noncash property given	FMV (or estimate)	
(a) No. from Description of noncash property given See instructions. (d) Date received Pert I (c) FMV (or estimate) (See instructions.) (e) Date received FMV (or estimate) (c) FMV (or estimate) (d) Date received Pert I (c) FMV (or estimate) (See instructions.) (d) Date received FMV (or estimate) (See instructions.) (e) Date received FMV (or estimate) (See instructions.) (d) Date received FMV (or estimate) (d) Date received FMV (or estimate) (d) Date received FMV (or estimate) (see instructions.) (d) Date received FMV (or estimate) (See instructions.) (e) Date received FMV (or estimate) (See instructions.) (d) Date received FMV (or estimate) (See instructions.) (e) Date received FMV (or estimate) (See instructions.)	16	HOROLOGICAL BOOKS		
No. from Description of noncash property given See instructions. Description of noncash property given See instructions. Description of noncash property given See instructions. See instructions. Description of noncash property given See instructions. See instructi			\$ 10,000.	03/31/20
(a) No. from Description of noncash property given See instructions.)  (b) FMV (or estimate) (See instructions.)  (a) No. from Description of noncash property given See instructions.)  (b) FMV (or estimate) (See instructions.)  (d) Date received Date received See instructions.)	No. from		FMV (or estimate)	
(a) No. from Description of noncash property given See instructions.)  (b) FMV (or estimate) (See instructions.)  (a) No. from Description of noncash property given See instructions.)  (b) FMV (or estimate) (See instructions.)  (d) Date received Date received See instructions.)	NATIONAL PROPERTY OF THE PROPE			
No. from Part I  (a) No. from Description of noncash property given   FMV (or estimate) (See instructions.)   Date received    (a) No. from Part I   Description of noncash property given   FMV (or estimate) (See instructions.)    (b) FMV (or estimate) (See instructions.)   Date received    (a) No. from Description of noncash property given   FMV (or estimate) (See instructions.)    (b) FMV (or estimate) (See instructions.)    (c) FMV (or estimate) (See instructions.)    (d) Date received    (a) No. from Description of noncash property given    (b) FMV (or estimate) (See instructions.)    (c) FMV (or estimate) (See instructions.)    (d) Date received    (d) Date received    (e) FMV (or estimate) (See instructions.)    (f) Date received    (f) FMV (or estimate) (See instructions.)    (g) FMV (or estimate) (See instruction			\$	***************************************
(a) No. from Part I  (a) Description of noncash property given Part I  (b) FMV (or estimate) (See instructions.)  (a) See instructions.)  (b) FMV (or estimate) (See instructions.)  (c) FMV (or estimate) (d) Date received  (d) Date received  (d) Date received  (e) FMV (or estimate) (See instructions.)	No. from	· ·	FMV (or estimate)	
(a) No. from Part I  (a) Description of noncash property given Part I  (b) FMV (or estimate) (See instructions.)  (a) See instructions.)  (b) FMV (or estimate) (See instructions.)  (c) FMV (or estimate) (d) Date received  (d) Date received  (d) Date received  (e) FMV (or estimate) (See instructions.)				
No. from Part I  (b) FMV (or estimate) (See instructions.)  (a) No. from Part I  (b) FMV (or estimate) (See instructions.)  (c) FMV (or estimate) (See instructions.)  (d) Date received  (d) Date received  (d) Date received  (e) FMV (or estimate) (See instructions.)			\$	WARRANG AND
(a) No. from Part I  Description of noncash property given (See instructions.)  \$	No. from		FMV (or estimate)	
(a) No. from Part I  See instructions.)  (b) FMV (or estimate) (See instructions.)  See instructions.)				
No. from Description of noncash property given Part I See instructions.)  (b) FMV (or estimate) (See instructions.)  (c) FMV (or estimate) (See instructions.)			\$	WORKSON CONTROL OF THE PROPERTY OF THE PROPERT
	No. from		FMV (or estimate)	
				***************************************
923453 11-06-19 Schedule B (Form 990, 990-EZ, or 990-PF) (2019				

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Page 4 Name of organization Employer identification number NATIONAL ASSOCIATION OF WATCH AND CLOCK COLLECTORS, INC. 23-2072465 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

NATIONAL ASSOCIATION OF WATCH AND CLOCK COLLECTORS, INC.

Employer identification number 23-2072465

Pai	organizations Maintaining Donor Advised Forganization answered "Yes" on Form 990, Part IV, line 6		or Accounts. Complete if the
ORTHOLOGICA (CARACTER)	organization answered 165 on Form 850, Part IV, III0 C	. <b>(a)</b> Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writ	ting that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's exc	clusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advi	isors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor or do	onor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pai	rt II Conservation Easements. Complete if the organ	nization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	(check all that apply).	
	Preservation of land for public use (for example, recreation	n or education) Preservation o	of a historically important land area
	Protection of natural habitat	Preservation o	of a certified 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 Yea
a	Total number of conservation easements		2a
b			***************************************
C	Number of conservation easements on a certified historic struct		
d	Number of conservation easements included in (c) acquired after		1 1
	listed in the National Register		
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 easers		и
5	Does the organization have a written policy regarding the period		F
	violations, and enforcement of the conservation easements it ho		
6	Staff and volunteer hours devoted to monitoring, inspecting, har	ndling of violations, and enforcing con	servation easements during the year
_	***************************************		
7	Amount of expenses incurred in monitoring, inspecting, handling	g of violations, and enforcing conserva	ation easements during the year
_	<b>\$</b>		(A. ) (A.) (M)
8	Does each conservation easement reported on line 2(d) above s		Instrument Instrument
9	In Part XIII, describe how the organization reports conservation	•	
	balance sheet, and include, if applicable, the text of the footnote	e to the organization's financial statem	ients that describes the
Dai	organization's accounting for conservation easements.  rt III   Organizations Maintaining Collections of A	rt Historical Treasures or O	ther Similar Assets
oranaman a ena	Complete if the organization answered "Yes" on Form 99		
	If the organization elected, as permitted under FASB ASC 958, I		and halanca shoot works
8 62	of art, historical treasures, or other similar assets held for public	•	
	service, provide in Part XIII the text of the footnote to its financia		•
b	If the organization elected, as permitted under FASB ASC 958,1		
8.7	art, historical treasures, or other similar assets held for public ex	•	
	•	dibition, education, or research in furt	rierance of public service,
	provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1		<b>\$</b>
			h a
2	If the organization received or held works of art, historical treasu	urae or other cimilar accets for financia	
2	the following amounts required to be reported under FASB ASC		αι θαιτι, μισνιάθ
~		**	<b>▶</b> \$
a	Revenue included on Form 990, Part VIII, line 1  Assets included in Form 990, Part X		
E.)	Moode included in form 330, fall A		V

<u> Pai</u>	irt III   Organizations Maintaining	Collections of Art	, Historical Tre	asures, or O	ther Simila	ır Assets	(continue	<u>ad)</u>
3	Using the organization's acquisition, access	sion, and other records	s, check any of the f	ollowing that ma	ke significant	use of its		
	collection items (check all that apply):							
а	X Public exhibition	d	X Loan or exc	hange program				
b	X Scholarly research	е	Other					***************************************
C	X Preservation for future generations							
4	Provide a description of the organization's	collections and explain	how they further th	e organization's	exempt purpo	ose in Part	XIII.	
5	During the year, did the organization solicit	or receive donations o	of art, historical treas	ures, or other sir	milar assets			
***************************************	to be sold to raise funds rather than to be r						Yes	No
Pai	rt IV Escrow and Custodial Arra	<b>ngements.</b> Comple	ete if the organizatio	n answered "Yes	" on Form 99	0, Part IV,	line 9, or	
and the second	reported an amount on Form 990, P	art X, line 21.	10101018110101010111111111111111111111	00000000000000000000000000000000000000			101011010101010101010101010101010101	91.01.01.01.01.01.01.01.01.01.01.01.01.01
1a	ls the organization an agent, trustee, custo	dian or other intermedi	ary for contributions	or other assets	not included			
	on Form 990, Part X?						Yes	No
b	If "Yes," explain the arrangement in Part XI	I and complete the foll	lowing table:		<i>guarananana</i>	HYHOLOROLOROLOROLOROLOROLOROL	9.000.000.000.000.000.000.000.000.000.0	4010401040404040404040404040
					**********		Amount	*****************************
C	Beginning balance				1c			****************
d	Additions during the year				1d	Mario e de la composição	9.000.000.000.000.000.000.000.000.000.0	4010401040404040404040404040
е	Distributions during the year				1e	denomento en entre e	9.000.000.000.000.000.000.000.000.000.0	4010401040404040404040404040
f	Ending balance				<u>l 1f</u>	J.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
2a	Did the organization include an amount on	Form 990, Part X, line	21, for escrow or cu	stodial account l	liability?		Yes	No
	If "Yes," explain the arrangement in Part XI							
Pai	rt V Endowment Funds. Complete	if the organization an	swered "Yes" on Fo	rm 990, Part IV, I	line 10.	***********************	garantana manana ma	and and an articles of the second
		(a) Current year	(b) Prior year	(c) Two years ba	ick <b>(d)</b> Three	years back	(e) Four ye	ars back
1a	Beginning of year balance	2,174,141.	2,210,123.	1,981,79	·	948,330.	i pronononononononononononono	59,377.
b	Contributions	272,190.	72,109,	103,25	72. 1,	015,925.	quesososososososososososos	86,615.
C	9,9,,	-76,943.	84,064.	175,99	97.	23,640.		31,180.
d	Grants or scholarships	0.	***************************************			40101.16181616161.16181616161616161616		**********************
e	Other expenditures for facilities							
	and programs	9	181,861,	50,93	36.	6,105.		28,842.
f	Administrative expenses		10,294.		orania and province and a second	(0)(0)(0)(0)(0)(0)(0)(0)(0)(0)(0)(0)(0)(		alonekokenokenekokenokenoken
g			2,174,141.	2,210,12	23, 1,	981,790.	9.	48,330.
2	Provide the estimated percentage of the cu		(line 1g, column (a)	) held as:				
а			%					
b		www.common.com						
C		CONTR						
	The percentages on lines 2a, 2b, and 2c sh	•						
За	Are there endowment funds not in the poss	ession of the organiza	tion that are held ar	ıd administered f	or the organiz	ration		······································
	by:							es No
	(i) Unrelated organizations						3a(i)	X
	(ii) Related organizations						3a(ii)	LX
	9						3b	unundunununun
4 Dai	Describe in Part XIII the intended uses of the land, Buildings, and Equip		wment funds.					
LEGI	energenennen		D 10/10 44 0	E 000 B	LV P 40			
and the second	Complete if the organization answer	annanany mananananananananananana	inamanan manakan manaka	ensember menter menter militarione.				
	Description of property	(a) Cost or o basis (investm	1 '	, i	<b>(c)</b> Accumulat depreciation	l l	(d) Book v	alue :
enerenenenenen	l d	annonal anananananànananana	<i>เลงกลงเหล่งเลงเลง</i> ปุ่นและเกลงเลงเลงเลงเลงเลงเลงเลงเล	3,800 <b>.</b>	dehiediarioi	1		0 0 0
			takarakarakakakakakakakil phakakakakakakakakakakakakakakakakakakak	rotoretõterotoretorotorotoretoretorolorõjuoretorolorol	5,611,0	Fa	3,825,	800.
b	· · · · · · · · · · · · · · · · · · ·							. U / 1/2 ·
C				7,502.	1,446,2	21	101	221.
d	1 1	1		6,834.	i., ttt V, Li	V		834.
	Other		ennannanankhannanananananana.	annan ann an ann an an an an an an an an			4,037,	
lota	al. Add lines 1a through 1e. <i>(Column (d) must</i>	equal Form 990, Part	x, column (B), line 1	<u> 19. )</u>				

23-2072465 Page 3

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	<b>(b)</b> Book value	(c) Method of valuation: Cost or end-c	of-year market value
(1) Financial derivatives	***************************************		
(2) Closely held equity interests			
(3) Other			014014101410141010101014101010101010101
(A) (B)			
(C)			
(D)	paramenta de la compositiva de la comp		ONEODO PERO PERO PERO PERO PERO PERO PERO PER
(E)			
(F)			
(G)			
(H)	peroperationales and an analysis and an analysi		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		<u> </u>	
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line (b) Book value	11c. See Form 990, Part X, line 13.  (c) Method of valuation: Cost or end-co	face on me and other above
(a) Description of investment	(b) book value	(c) Method of Valuation. Cost of end-c	r-year market value
(1)			
(2)	palenteren era		(e) 0.00 (e
(3) (4)			
(5)			
(6)	passes and a second		talaksia keralaksia kalaista k
(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"	CONTRACTOR	11d. See Form 990, Part X, line 15.	(h) Daaksalua
	Description		(b) Book value
(1)			
(2)			
(4)		···	
(5)	and a state of the		aranorani ranorani eranorani eranorani eranorani eranorani eranorani eranorani eranorani eranorani eranorani e
(6)			
(7)			
(8)			
(9)	00000000000000000000000000000000000000		
Total. (Column (b) must equal Form 990. Part X, col. (B) line	15.)	<b>&gt;</b>	
Part X Other Liabilities.			
Complete if the organization answered "Yes"  (a) Description of liability	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	(b) Book value
			(D) DOOK Value
(1) Federal income taxes (2) CHARITABLE GIFT ANNUITY OF	RT.TCAMTON		166,751.
(3) CHAPTER DEPOSITS	ad dad da Zd b de de da de de Zd de d consensamentementementementementementementement		3,465.
(4)		····	
(5)	aniska kantana		in en
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line		raininininininininininininininininininin	170,216.
2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footnote to	the organization's financial statements tha	t reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2019

3 2,268,922.  4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)  Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.  Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b  4c 39,159.	Part XI Reconciliation of Revenue per Audited Finar		i Revenue per Re	turn.	
2 Amounts included on line 1 but not on Form 980, Part VII, line 12:  a Naturnstating gains (Season on investments)  b Donated services and use of facilities  processors of prior year gents  d Other (Describe in Part XIII)  a Ad lines 2s through 82  3 2, 268, 922.  3 2, 268, 922.  4 Amounts included on Form 980, Part VIII, line 12: but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b  b Other (Describe in Part XIII)  b Other (Describe in Part XIII)  c Add lines 4 and 4b  5 Total revenue, Add lines 3 and 4c (This must count Form 990, Part I, line 12).  Campelson if the organization answered Yes' on Form 990, Part I, line 12.  Campelson if the organization answered Yes' on Form 990, Part I, line 12.  1 Total separence and beause per addited lineval abstraments  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  2 Amounts included on line 1 but not on Form 990, Part IX, line 26:  a Other Idescribe in Part XIII)  b Pierr year adjustments  c Other Idescribe in Part XIII.  b Add lines 2s through 80  3 3 2, 132, 248.  4 A 0711.  b Pierr year adjustments  c Other (Describe in Part XIII)  a Add lines 2s through 80  5 Total expenses, Add lines 3 and 4c (This must count Form 990, Part IX, line 25:  a Investment expenses not included on Form 990, Part IX, line 25:  a Protection of Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part IX, line 25:  b Other (Describe in Part XIII)  c Add lines 4c through 80  5 Total expenses, Add lines 3 and 4c (This must count Form 990, Part IX, line 25:  b Other (Describe in Part XIII)  c Add lines 4c shrough 80  5 Total expenses, Add lines 3 and 4c (This must count Form 990, Part IX, line 25:  c Add lines 4c shrough 80  5 Total expenses, Add lines 3c and 4c (This must count Form 990, Part IX, line 25:  c Add lines 4c shrough 80  c Add lines 4c		karakarakarakarakarakarakarakarakarakar			
a Net unrealized gains floatests on investiments b Densided services and use of leatilities c Recoveries of prior year grants d Other (Recorde in Park XIII) c Recoveries of prior year grants d Other (Recorde in Park XIII) c Add lives a stresuigh 28 3 Subtract line 26 from line 1 a Investiment expenses not included on Form 990. Part VIII, line 72 b Other (Recorde in Park XIII) c Add lives a service in Park XIII) c Add lives a service in Park XIII c Add lives a service and use of leatilities d Other (Recorde in Park XIII) c Add lives a service and use of leatilities d Other (Recorde in Park XIII) c Add lives a service and use of leatilities d Add lives a service and use of leatilities a livestiment expenses not included on Form 990, Part X, line 25: a floated in the Service in Park XIII c Add lives a service and use of leatilities d Add lives a service and use of leatilities 3 Subtract line 26 from line 1 a livestiment expenses not included on Form 990, Part X, line 25; b Collect (Recorde in Park XIII) c Add lives a service in Park XIII c Add lives a s				1	1,998,481.
b) Donated centroes and use of facilities 2 comparis 2 comparis 2 comparis 2 comparis 3 comparis 4			200 606		
c. Recoveries of prior year grants d. Orther (Recordine in Part XIII) e. Add lines 2a through 2d 3. Subtreat line 2a trion line 1 3. Subtreat line 2a trion line 1 4. Amounts included on Form 930, Part VIII, line 12, but not on line 1: 9. Investment expenses not included on Form 930, Part VIII, line 12, but not on line 1: 9. Investment expenses not included on Form 930, Part VIII, line 7b 1. Other (Recordine in Part XIII) 1. Add lines 4a and 4b 1. Capter 1. Subtreat lines 2 and 4a. (This must equal form 930, Part I, line 12) 1. Total expenses and lines a fine 4a. (This must equal form 930, Part I, line 12a. 1. Total expenses and lines a fine 4a. (This must equal form 930, Part II, line 12a. 1. Total expenses and lines a fine 4a. (This must equal form 930, Part II, line 12a. 1. Total expenses and lines a fine 4a. (This must equal form 930, Part II, line 12a. 1. Total expenses and lines a fine 4a. (This must equal form 930, Part II, line 2b. 2. Amounts included on Fine 1 but not on Form 930, Part II, line 2b. 2. Amounts included on Fine 1 but not on Form 930, Part II, line 2b. 2. Add lines 2a through 2d. 2. Add lines 2a through 2d. 2. Amounts included on Fine 1 but not on Form 930, Part III, line 2b. 2. Add lines 2a through 2d. 2. Amounts included on Fine 1 but not 90, Part III, line 7b. 2. Add lines 2a through 2d. 2. Amounts included on Fine 930, Part II, line 7b. 2. Anounts included on Fine 930, Part II, line 7b. 3. Subtreat line 2a from 1 line 4. 3. Subtreat line 2a from 1 line 4. 3. Subtreat line 3a and 4b. 3. Subtr					
d Other (Describe in Part XIII) 2 25, 1844   26, 2437   3 2, 268, 922.			4 V/L.	-	
e Add lines 2a through; 2d 3			2 1 0 A	4	
3 3 2,268,922.  4 Ancustris included on Form 980, Part VIII, lines 12, but not on line 1:  5 Investment expenses not included on Form 980, Part VIII, lines 12.  6 Total revenue. Add lines 4 and 40.  6 Total revenue. Add lines 6 and 46. (This must except Form 980, Part VI line 12.  Complete If the organization answered 'Vest' on Form 980, Part IV, line 12.  1 Total expenses and closses per add fed financial statements.  Complete If the organization answered 'Vest' on Form 980, Part IV, line 12.  1 Total expenses and closses per add fed financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of includies.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of the clittles.  2 Amounts included on Form 990, Part IX, line 25:  a Donated services and use of the clittles.  2 Amounts included on Form 990, Part IX, line 25:  a Donated services and use of the clittles.  2 Amounts included on Form 990, Part IX, line 25:  a Donated services and use of the clittles.  2 Amounts included on Form 990, Part IX, line 25:  a Donated services and use of the clittles.  2 Amounts included on Form 990, Part IX, line 25. but not on line 1:  a Investment expenses and clined on Form 990, Part IVIII, line 7b.  4 Amounts included on Form 990, Part IVIII, line 7b.  4 Other (Describe in Part XIII).  5 Total expenses Add lines 3 and 4e. (This must expense form 990, Part IVII, lines 12.  5 Total expenses Add lines 3 and 4e. (This must expense form 990, Part IVII, lines 12.  2 Total expenses Add lines 3 and 4e. (This must expense form 990, Part IVII, lines 12.  4 The NaWCC's COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND RESEARCH  AMTERIALS 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 P				7 1	270 441
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b  b Other (Describe in Part XIII)  c Add lines 4a and 4b  5 Total revenue, Add lines 4 and 4b  5 Total revenue, Add lines 4 and 4b  1 Total expenses and lines 2 and 4c. (This must equal form 990, Part III line 12)  1 Total expenses and lines 5 per audited financial statements.  Complete if the organization enswered "visc on Form 990, Part IV, line 12a.  1 Total expenses and lines 1 but not on Form 990, Part IX, line 25:  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  3 Donated services and use of facilities  4 Amounts included on Form 990, Part IX, line 25:  5 Cother (Describe in Part XIII)  6 Prior year adjustments  6 Other (Describe in Part XIII)  7 Amounts included on Form 990, Part IX, line 25, but not on line 1:  8 Investment expenses and included on Form 990, Part IX, line 25:  9 Investment expenses and included on Form 990, Part IX, line 25:  1 Total expenses Add lines 3 and 4c. (This must equal form 990, Part IX, line 25; but not on line 1:  9 Investment expenses and lines 3 and 4c. (This must equal form 990, Part IX, line 25; but not on line 1:  9 Investment expenses and lines 3 and 4c. (This must equal form 990, Part IX, line 18)  Part XIII Supplemental Information.  PART XIII Supplemental Information Are Expenses and 4c. (This must equal form 990, Part IX, line 2 Part IX, line 2; Part IX,				The same of the sa	
a investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue. Add lines 3 and 4c, (This must equiel Form 990, Part IV, line 12a.  Longistes if the organization arswered "Yes" on Form 990, Part IV, line 12a.  Longistes if the organization arswered "Yes" on Form 990, Part IV, line 12a.  Longistes if the organization arswered "Yes" on Form 990, Part IV, line 12a.  Longistes if the organization arswered "Yes" on Form 990, Part IV, line 12a.  Longistes if the organization arswered "Yes" on Form 990, Part IV, line 12a.  Longistes if the organization arswered "Yes" on Form 990, Part IV, line 12a.  Longistes in the organization arswered "Yes" on Form 990, Part IV, line 12b.  Amounts included on Fine 1 but not on Form 990, Part IV, line 25.  Longistes and losses per audited financial statements with Expenses per Return.  Longistes and losses per audited financial statements with Expenses per Return.  Longistes and losses per audited financial statements with Expenses per Return.  Longistes and losses per audited financial statements with Expenses per Return.  Longistes and losses per audited financial statements with Expenses per Return.  Longistes and losses per audited financial statements with Expenses per Return.  Longistes and losses per audited financial statements with Expenses per Return.  Longistes and losses per audited financial statements with Expenses per Return.  Longistes and losses per audited financial statements with Expenses per Return.  Longistes and losses per audited financial statements with Expenses per Return.  Longistes and losses per audited financial statements with Expenses per Return.  Longistes and losses per audited financial statements with Expenses per Return.  Longistes and losses per audited financial statements with Expenses per Return.  Longistes and losses per audited financial statements with Expenses per Return.  Longistes and losses per audited financial statements with Expenses per Return.  Longistes an				3	enementeriorium de la Carte
b Other (Describe in Pert XIII) 4c 202,912. 6c 219,159. 5 2,488,081. [Part XIII   Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part I, line 12a. 1 Total expenses and losses per audited financial statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements with Expenses per Return. 2 Announts included on line 1 but not on Form 990, Part IV, line 25: a Donated services and loss of facilities 2 Announts included on Form 990. Part IV, line 25: a Donated services and loss of facilities 2 and loss of facilities 2 and loss of facilities 2 and 1 and 1 and 2 and 2 and 2 and 3 and 3 and 3 and 4 announts included on Form 990, Part IV, line 2 and 2 and 3 and 3 and 4 announts included on Form 990, Part VIII, line 7 b 4a 1 6, 247. b Other (Describe in Part XIII) 2 a Investment expenses not included on Form 990, Part IV, line 7 b 4a 1 6, 247. b Other (Describe in Part XIII) 2 and 2 and 4 b. Announts included on Form 990, Part IV, line 7 b 4a 1 6, 247. b Other (Describe in Part XIII) 2 and 3 and 4 b. (This must servel form 990 Part IV, line 1 and 2 and 4 b. Also complete his part to provide any additional information.  PART III, LINE 1A:  THE NAWCC'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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.	• • • • • • • • • • • • • • • • • • • •		16 2/7		
c Add lines 4s and 4b 5 Total revenue Add lines 3 and 4c. (This must exual Form 990, Part I, time 12) 5 Total revenue Add lines 3 and 4c. (This must exual Form 990, Part II, time 12) 5 Z., 488, 081.    Part XII   Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.    Complete it the organization answered Yes* on Form 990, Part IV, line 12e. 1 Total expenses and loses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2	•		20,247.	-	
S Total revenue Add lines 3 and 4e. This must equal Form 990, Part IV, line 12a.   Complete if the organization answered Yes' on Form 930, Part IV, line 12a.   Total expenses per audited financial statements With Expenses per Return. Complete if the organization answered Yes' on Form 930, Part IV, line 12a.   Total expenses and losses per audited financial statements   1			anananananananananianananananana	1 1	219 159
Part XII   Reconcilitation of Expenses per Audited Financial Statements With Expenses per Return.   Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.     Total expenses and losses per audited financial statements   1   2,168,357.     Amounts included on line 1 but not on Form 990, Part IX, line 25:     2a				housement	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IV, line 25: a Donated services and use of facilities 2 Prior year adjustments 2 Other losses 4 Other (Describe in Part XIII) 2 Add lines 2a through 2d 3 Subtract line 2a from line 1 4 Amounts included on Form 990, Part IV, line 25, but not on line 1: a investment expenses not included on Form 990, Part IV, line 7b 4 Other (Describe in Part XIII) 4 Other (Describe in Part XIII) 4 Other (Describe in Part XIII) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part IV, line 7b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part IV, line 18 and 4; Part IV, lines 1b and 2b; Part IV, line 4; Part X, line 2; Part XI, lines 2d and 4b. Also complete this part to provide any additional information.  PROVIDE THE NAWCC '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 CARRED 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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND THEIR COLLECTION.	Part XII Reconciliation of Expenses per Audited Fina	<i>ru, line 12)</i> ncial Statements Wit	h Expenses per l	_0	
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on form 990, Part IX, line 25: 2 Donated services and use of facilities and use of facilities of the services of the use of facilities and use of facilities of the services of the use of facilities and use of facilities of the services of the use of facilities of the services of the use of facilities of the services of facilities of the services of the use of facilities of the services of facilities of the services of facilities of the services of the services of facilities of the services of facilities of the services of facilities of the services of the servi	(monotone construction of the construction of				э и
2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other (Describe in Part XIII) c Add lines 2a through 2d 3 Subtract line 2e from line 1 a investment expenses not included on Form 990, Part IX, line 25, but not on line 1: a investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a through 2d c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990 Part I line 18.)  5 Total expenses Add lines 3 and 4c. (This must equal Form 990 Part I line 18.)  5 Total expenses Add lines 3 and 4b. Also complete this part to provide any additional information.  PART III, LINE 1A:  THE NAWCC'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  CARRED 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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND			***************************************		2,168,357.
a Donated services and use of facilities b Prior year adjustments c Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part IXII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4e. (This must equal Form 990, Part IXII, line 7b b Total expenses. Add lines 3 and 4e. (This must equal Form 990, Part IXII, line 18.) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4e. (This must equal Form 990, Part IXII, line 18.) c Add lines 4a and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART III, LINE 1a:  THE NAWCC'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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND					ennonononennalarennonononennonalarenkononinareninarennonon
b Prior year adjustments c Other lossess d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Substact line 2a from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part IX, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b c Add Imes 4a and 4b c Add Imes 4a and 4b c Total expenses, Add lines 3 and 4c. (This must equal Form 390, Part I, line 18.)  For total expenses, Add lines 3 and 4c. (This must equal Form 390, Part I, line 18.)  Frowlde the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b. and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART III, LINE 1A:  THE NAWCC'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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND		2a	4,071.		
c Other (Describe in Part XIII) d Other (Describe in Part XIII) e Add lines 2e through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4e and 4b 5 Total expenses. Add lines 3 and 4e. (This must couls form 990, Part I III, line 18) 5 Total expenses. Add lines 3 and 4e. (This must couls form 990, Part I III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b. Also complete this part to provide any additional information.  PART III, LINE 1a:  THE NAWCC'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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND			en e	*	
d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 3 3 Catalog 2d 3 Subtract line 2e from line 1 3 2 (132,248.)  4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a invostment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4e. (This must equal Form 990, Part I, line 18.)  Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IX, lines 1b and 2b; Part X, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.  PART III, LINE 1A:  THE NAWCC'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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND					
e Add lines 2a through 2d 3 Subtract line 2b from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a investment expenses not included on Form 990, Part IX, line 25, but not on line 1: a investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III, lines 1a.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III, lines 1a.) 6 \$ 2,171,407.    Part XIII] Supplemental Information.   Part XIII] Supplemental Information.   Part XIII] Lines 2d and 4b. Also complete this part to provide any additional information.   Part XIII] Lines 1a:   THE NAWCC'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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.   PART III, LINE 4:   THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND	***************************************		32,038.		
3 Subtract line 2e from line 1 4 Armounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I line 18)  Povide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b. Also complete this part to provide any additional information.  PART III, LINE 1A:  THE NAWCC'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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND				7 1	36,109.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4e. (This must equal Form 990. Part I, line 18.)  Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART III, LINE 1A:  THE NAWCC'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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND	~			The same of the sa	
b Other (Describe in Part XIII.) c Add lines 4a and 4b 4c 39,159. 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I, line 18.)  Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART III, LINE 1A:  THE NAWCC'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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND					
b Other (Describe in Part XIII.) c Add lines 4a and 4b 4c 39,159. 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I, line 18.)  Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART III, LINE 1A:  THE NAWCC'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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	16,247.		
c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I, line 18.)  Fort XIII Supplemental Information.  Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART III, LINE 1A:  THE NAWCC'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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND	b Other (Describe in Part XIII.)	4b	22,912.		
Part XIII Supplemental Information.  Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART III, LINE 1A:  THE NAWCC'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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND	W 4 4 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5			4c	
Part XIII Supplemental Information.  Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART III, LINE 1A:  THE NAWCC'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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND	5 Total expenses. Add lines 3 and 4c. (This must equal Form 990. F	Part I, line 18.)		5	2,171,407.
THE NAWCC'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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND	Part XIII Supplemental Information.				
PART III, LINE 1A:  THE NAWCC'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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND				l; Part >	K, line 2; Part XI,
THE NAWCC'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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4: THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND	into 20 and 15, and 1 are M, into 20 and 15.7 100 complete and pare to	provide any additional mion	THREE OF I		
THE NAWCC'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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4: THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND					
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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND	PART III, LINE 1A:				
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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND					
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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND	THE NAWCC'S COLLECTIONS ARE MADE UP	OF HOROLOGICAL	ARTIFACTS	AND	RESEARCH
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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS 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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND	MATERIALS OF HISTORICAL SIGNIFICANCE	THAT ARE HELD	FOR EDUCAT	ION	AL,
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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND					
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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND	RESEARCH, AND CURATORIAL PURPOSES.	EACH OF THE IT	EMS IS PRES	ERVI	ED AND
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 OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND					
POLICY THAT REQUIRES PROCEEDS FROM THEIR SALES TO BE USED TO ACQUIRE OTHER  ITEMS FOR THE COLLECTION OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND	CARED FOR AND ACTIVITIES VERIFYING T	HEIR EXISTENCE	AND ASSESS	ING	THEIR
POLICY THAT REQUIRES PROCEEDS FROM THEIR SALES TO BE USED TO ACQUIRE OTHER  ITEMS FOR THE COLLECTION OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND					
ITEMS FOR THE COLLECTION OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND	CONDITION ARE PERFORMED CONTINUOUSLY	. THE COLLECT	'IONS ARE SU	IBJE(	OT TO A
ITEMS FOR THE COLLECTION OR FOR CONSERVATION OF ITEMS IN THE COLLECTION.  PART III, LINE 4:  THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND					
PART III, LINE 4: THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND	POLICY THAT REQUIRES PROCEEDS FROM T	HEIR SALES TO	BE USED TO	ACQI	JIRE OTHER
PART III, LINE 4: THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND					
THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND	ITEMS FOR THE COLLECTION OR FOR CONS	ERVATION OF IT	EMS IN THE	COL	LECTION.
THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND					
THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND					
THE ORGANIZATION'S COLLECTIONS ARE MADE UP OF HOROLOGICAL ARTIFACTS AND	DADM TTT T.TNE /.				
	LUVI III' TIMD 4:				
DECENDER MARKEDIALS OF RISMODICAL STONIETCANCE BUAR ADE UELD FOR	THE ORGANIZATION'S COLLECTIONS ARE M	ADE UP OF HORC	LOGICAL ART	'IFA	CTS AND
	DECEADOU MAMEDIALO OE UTOMODIONI OTO	NITETONNOE MUNA	י אסט טטרה ד	σΩ.	

Schedule D (Form 990) 2019 COLLECTORS, INC. 23-2072465 Page
Part XIII Supplemental Information (continued)
EDUCATIONAL, RESEARCH, AND CURATORIAL PURPOSES. EACH OF THE ITEMS IS
PRESERVED AND CARED FOR AND ACTIVITIES VERIFYING THEIR EXISTANCE 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 COLLECTIONS. THE INSURANCE COVERAGE IN EFFECT
FOR ITEMS IN THE COLLECTION AMOUNTED TO \$9,000,000.
PART V, LINE 4:
THE INTENDED USE OF THE ORAGNIZATION'S ENDOWMENT FUND IS FOR THE MUSEUM,
LIBRARY, EDUCATION, AND NAWCC.
PART XI, LINE 2D - OTHER ADJUSTMENTS:
CHANGE IN VALUE OF CHARITABLE GIFT ANNUITY -6,854.
COST OF GOODS SOLD 22,390.
RENTAL EXPENSE 9,648.
TOTAL TO SCHEDULE D, PART XI, LINE 2D 25,184.
PART XI, LINE 4B - OTHER ADJUSTMENTS:
OTHER: MUSEUM COLLECTIONS 16,220.
CELEBRATION EXPENSE 6,692.
IN-KIND CONTRIBUTION 180,000.
TOTAL TO SCHEDULE D, PART XI, LINE 4B 202,912.
PART XII, LINE 2D - OTHER ADJUSTMENTS:
COST OF GOODS SOLD 22,390.
RENTAL EXPENSE 9,648.
TOTAL TO SCHEDULE D, PART XII, LINE 2D 32,038.

# NATIONAL ASSOCIATION OF WATCH AND CLOCK

Schedule D (Form 990) 2019 COLLECTORS, INC.	23-2072465 Page 5
Schedule D (Form 990) 2019 COLLECTORS, INC.  Part XIII Supplemental Information (continued)	
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
OTHER: MUSEUM COLLECTIONS	16,220.
CELEBRATION EXPENSE	6,692.
momar mo componer o page with time 45	22 012
TOTAL TO SCHEDULE D, PART XII, LINE 4B	22,912.

#### SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information. NATIONAL ASSOCIATION OF WATCH AND CLOCK

Open to Public Inspection

Employer identification number

COLLECTORS, INC. 23-2072465 Part I Types of Property (a) (b) (c) (d) Number of Noncash contribution Check if Method of determining contributions or amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1q Art - Works of art 180,000.FMV Art - Historical treasures X 2 Art - Fractional interests 3 Books and publications X 24,140. AUCTION WEBSITES 4 5 Clothing and household goods Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 Securities - Publicly traded 9 Securities - Closely held stock 10 Securities - Partnership, LLC, or 11 trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 3,951. AUCTION WEBSITES X 18 Collectibles 19 Food inventory Drugs and medical supplies 20 21 Taxidermy 14 6,039. AUCTION WEBSITES Historical artifacts X 22 23 Scientific specimens Archeological artifacts 24 244. FMV RECEIPTS ( MISCELLANEOUS ) 25 26 Other 27 Other Other 28 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 0 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for X exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II. X Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X contributions? b If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, 33

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

Schedule M (Form 990) 2019

LHA

describe in Part II

#### NATIONAL ASSOCIATION OF WATCH AND CLOCK

23-2072465 Schedule M (Form 990) 2019 COLLECTORS, INC. Page 2 **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete Part II this part for any additional information. SCHEDULE M, PART I, COLUMN (B): NUMBER OF CONTRIBUTIONS IS THE DIFFERENT NUMBER OF CONTRIBUTORS THAT CONTRIBUTED THE SAME TYPE OF ITEM.

#### **SCHEDULE 0**

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

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

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

NATIONAL ASSOCIATION OF WATCH AND CLOCK COLLECTORS, INC.

Employer identification number 23-2072465

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TIMEKEEPING VIA EDUCATIONAL OPPORTUNITIES, SPECIAL PUBLICATIONS, MEMBER
AND PUBLIC EVENTS AND ACCESS TO THE LIBRARY/MUSEUM.
FORM 990, PART VI, SECTION A, LINE 6:
THE ORGANIZATION HAS DIFFERENT LEVELS OF MEMBERSHIPS BASED ON
CONTRIBUTIONS. BRASS, SILVER, GOLD, PLATINUM, RUBY, AND DIAMOND MEMBERS
HAVE VOITING RIGHTS. INDIVIDUAL, YOUTH, STUDENT, AND INTRODUCTORY MEMBERS
DO NOT HAVE VOTING RIGHTS.
FORM 990, PART VI, SECTION A, LINE 7A:
MEMBERS ELECT 7 OF THE 12 BOARD MEMBERS.
FORM 990, PART VI, SECTION A, LINE 7B:
MEMBERS MUST APPROVE CHANGES TO THE BYLAWS.
FORM 990, PART VI, SECTION B, LINE 11B:
THE FORM 990 IS EMAILED TO BOARD OF DIRECTORS BEFORE THEIR NEXT BOARD
MEETING FOR REVIEW AT THE BOARD MEETING.
FORM 990, PART VI, SECTION B, LINE 12C:
EACH BOARD MEMBER IS REQUIRED TO SIGN OR RESIGN A NEW FORM EVERY TWO YEARS
OR IF ANY ITEMS CHANGE.
FORM 990, PART VI, SECTION B, LINE 15A:

THE EXECUTIVE COMMITTEE COLLECTS SALARY AND BENEFIT INFORMATION FROM OTHER

Name of the organization NATIONAL ASSOCIATION OF WATCH AND CLOCK COLLECTORS, INC.	Employer identification number 23-2072465
ORGANIZATIONS.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
CA, CO, CT, GA, MA, MS, NC, NH, NJ, NY, OK, OR, PA, TN, WA	
FORM 990, PART VI, SECTION C, LINE 19:	
NAWCC MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST	POLICY AND
FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST	AND VIA THE
ORGANIZATION'S WEBSITE	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN VALUE OF CHARITABLE GIFT ANNUITY	-6,854.
IN-KIND CONTRIBUTION	-180,000.
TOTAL TO FORM 990, PART XI, LINE 9	-186,854.
PART XII, LINE 2C EXPLANATION	
THE FINANCE COMMITTE ASSUMES RESPONSIBILITY FOR OVERSIGHT	OF THE AUDIT
AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT.	

Exempt Organization Business Income Tax Return Eorm 990-T OMB No. 1545-0047 (and proxy tax under section 6033(e)) For calendar year 2019 or other tax year beginning APR 1, 2019 and ending MAR 31, 2020 Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasury Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Internal Revenue Service D Employer identification number Name of organization ( Check box if name changed and see instructions.) Check hox if (Employees' trust, see address changed NATIONAL ASSOCIATION OF WATCH AND CLOCK **B** Exempt under section COLLECTORS, INC. 23-2072465 Print E Unrelated business activity code X 501(c)(3 or Number, street, and room or suite no. If a P.O. box, see instructions. (See instructions.) Type 514 POPLAR STREET 408(e) 220(e) 408A 530(a) City or town, state or province, country, and ZIP or foreign postal code 529(a) COLUMBIA, PA 17512-2130 541800 O Book value of all assets at end of year F Group exemption number (See instructions.) 480,345. G Check organization type X 501(c) corporation 501(c) trust 401(a) trust Other trust H Enter the number of the organization's unrelated trades or businesses. Describe the only (or first) unrelated trade or business here WEB SITE ADVERTISING . If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V. During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? X No If "Yes," enter the name and identifying number of the parent corporation. J The books are in care of JENNIFER BYERS, CONTROLLER Telephone number ► 717-684-8261 Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales c Balance **b** Less returns and allowances 1c 2 Cost of goods sold (Schedule A, line 7) 2 3 Gross profit, Subtract line 2 from line 1c 3 4 a Capital gain net income (attach Schedule D) 4a **b** Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4h Capital loss deduction for trusts C 4c Income (loss) from a partnership or an S corporation (attach statement) 5 5 Rent income (Schedule C) 6 6 Unrelated debt-financed income (Schedule E) 7 7 8 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 9 Exploited exempt activity income (Schedule I) 10 10 Advertising income (Schedule J) 11 11 Other income (See instructions; attach schedule) STATEMENT 1 18,484. 18,484. 12 12 18,484. 18,484 Total. Combine lines 3 through 12 13 Part II **Deductions Not Taken Elsewhere** (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.) Compensation of officers, directors, and trustees (Schedule K) 14 14 14,192. Salaries and wages 15 15 Repairs and maintenance 16 16 17 17 Interest (attach schedule) (see instructions) 18 18 19 Taxes and licenses 19 20 Depreciation (attach Form 4562) 20 21 Less depreciation claimed on Schedule A and elsewhere on return 21a 21b 22 Depletion 22 Contributions to deferred compensation plans 23 23 24 Employee benefit programs 24 25 Excess exempt expenses (Schedule I) 25 Excess readership costs (Schedule J) 26 26 Other deductions (attach schedule) SEE STATEMENT 2 2,501. 27 27 Total deductions. Add lines 14 through 27 16,693. 28 1,791. 29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 SEE STATEMENT 3 30 (see instructions) 791 Unrelated business taxable income. Subtract line 30 from line 29 31

EXTENDED TO FEBRUARY 16, 2021

Form 990-T (2019) NATIONAL ASSOCIATION OF WATCH AND CLOCK COLLECTORS, IN

23-2072465 Page 2

Form 990-T (2019) COLLECTORS, INC.

Schedule A - Cost of Goods	<b>s Sold.</b> Enter	method of inven	tory va	aluation N/A	MOREMOREMOREMORE					HANNING MORNING MORNING
1 Inventory at beginning of year	arararararangkarararararang katarararar	(1.1646161846161616161616161616161616161616	ngunununun	Inventory at end of year	eneralenenenen T	***************************************	6		010101010101010101	ORONOMORONOMON
2 Purchases			B	Cost of goods sold. Su						***************************************
3 Cost of labor			1	from line 5. Enter here a						
4a Additional section 263A costs	····		1	line 2			7			
(attach schedule)	4a		8	Do the rules of section			4		Yes	No
<b>b</b> Other costs (attach schedule)			1	property produced or a	cquired	for resale) apply to		<b>*</b>		
5 Total. Add lines 1 through 4b	5			the organization?						
Schedule C - Rent Income	(From Real	Property and	Pers	onal Property L	ease	d With Real Prop	erty	)		**************************************
(see instructions)	********************************	0101010101010101010101010101010101010101	enerenenenene		16101616161616161616		1010101010101010	0.000.000.000.000.000.000.000.000.000.000.000.000.000.000.000.000.000.000.000.000.000.000.000.000.000.000.000	01.1010161016161616	STOCKETOKETOKETOK
1. Description of property										
(1)										
(2)					neuronenenenen		an a	04-1-04-1-04-1-04-1-04-1-04-1-04-1-04-1		***********
(3)	3161010101010101010101010101010101010101		2101010101010101010		1010101010101010101		1010101010101010	0101010101010101010101010101010101010101	0.000.000.000.000.000.000.000.000.000.000	
(4)									*****	
	2. Rent receiv	ed or accrued	40404040404040		rata kata kata kata kata	Of a 3 Conducation and alive at h		معان معاف مافات المعام		
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	than	` of rent for p	ersonal	onal property (if the percentag property exceeds 50% or if ed on profit or income)	je	<b>3(a)</b> Deductions directly columns 2(a) a	nd 2(b)	cted with the inc (attach schedule	ome in	
(1)	24.000.000.000.000.000.000.000.000.000.0		1016101010101010101	rakanakan kerikan manan manan kenangan kenangan kenangan kenangan kenangan kenangan kenangan kenangan kenangan	01010101010101010101				1616161616161616	rosorosorosoros
(2)	21.000.000.000.000.000.000.000.000.000.0									reteresteresteres
(3)	21.000.000.000.000.000.000.000.000.000.0									reterente testesten in
(4)	21.000.000.000.000.000.000.000.000.000.0									reterente testesten in
Total	0.	Total			0.					
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column					0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	Win			0.
Schedule E - Unrelated Deb		B	instru	otions)					***************************************	
	***************************************	0.000.000.000.000.000.000.000.000.000.000.000	,	. Gross income from	nemanananan	3. Deductions directly con to debt-finance			9	***************************************
1. Description of debt-fit	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation		(b) Other de		samenamena S
·	,			manosa proporty		(attach schedule)		attach sch	eaule)	
(1)	01.404.04.04.04.04.04.04.04.04.04.04.04.04	0400164016401640464646464646464646464646				***************************************				NOTO DE LA CONTRACTORIO DE LA CO
(2)	21.000.000.000.000.000.000.000.000.000.0									on the second second
(3)	21.000.000.000.000.000.000.000.000.000.0									reterente testesten in
(4)					WORDEN KONDEN KONDE				CONTRACTOR OF THE SECOND	<i>ORGANIZATION</i>
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property h schedule)	6	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8, Allocable of (column 6 x total 3(a) and	al of colu	
(1)			Junior	%	orenoren en en en				0101.10101010101.110	ORONOLONOLONOLON
(2)				%	Heronolousionolousio					<i>MANAGAMANA</i>
(3)			THE STREET STREET	%	0.000.000.000.000.000.000.000.000.000.					*****************
(4)				%	unionelenenelenele					<i>SECRETARIA DE L'ARRES</i>
			e di manunana manuna Tanggar tanggar			inter here and on page 1, Part I, line 7, column (A).		Enter here and Part I, line 7, co		
Totals				<b>M</b> .		0			,	0.
Totals  Total dividends-received deductions in							<u>.</u>			<u>~~</u> .

Form **990-T** (2019)

Form 990-T (2019) COLLECTORS, INC.

Schedule F - Interest, A	∖nnuitie	s, Royal	ties, an	rapus est est est est est est est est est es	TOTAL TOTAL CONTRACTOR OF THE	********************		tions	see ins	structior	rs)
				Exempt (	Controlled O	rganizati	ons	~~~~	renerale renerale renerale renerale		***************************************
Name of controlled organizati	on	<b>2.</b> Em identifi num	cation		elated income instructions)	4. Tot payr	tal of specified ments made	includ	rt of column 4 led in the cont ation's gross	rolling	6. Deductions directly connected with income in column 5
(1)	esensen en e				KARIONIKA BIRAKA BIRAKA BIRAKA	***************************************	***************************************			nasananan da	08.44.64.64.64.64.64.64.64.64.64.64.64.64.
(2)		),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			440000000000000000000000000000000000000		******************************			en e	
(3)		greene en			440000000000000000000000000000000000000		******************************			en e	
(4)						***************************************	******************************			en e	
Nonexempt Controlled Organia	zations							L			
7 Taxable Income	*****************	inrelated incon	ne (loss)	<b>Q</b> Total	of specified payr	ments	10. Part of colur	nn 9 tha	t is included	11 D	eductions directly connected
		see instructions		<b>V.</b>	made		in the controlli		nization's	wit	h income in column 10
(1)	*****************	KAN			1866 1866 1866 1866 1866 1866 1866 1866	*********	***************************************		101610101010101010101010101010101010101	1101010101010101010101010101010101010101	
(2)	***************************************	1001010101010101010101010101010101010101			1000101010101010101010101010101010101010	************				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(3)	*****************	KAN			1866 1866 1866 1866 1866 1866 1866 1866	***********	***************************************		PORTO POR PORTO POR PORTO P		
(4)	protososososososososos	***********************	4. M. S.		TATOTETATOTOTOTOTOTOTOTOTOTOTOTOTOTOTOTO	************	114000000000000000000000000000000000000		AN KAN NEW KAN KAN KAN KAN KAN KAN KAN	i de la companione de l	
	bereinen er		***************************************	***************************************		***************************************	Add colun Enter here and	on page	1, Part I,		dd columns 6 and 11. here and on page 1, Part I,
							line 8, c	olumn (/	•		line 8, column (B).
Totals						<b>&gt;</b>			0.		
Schedule G - Investme		ne of a S	Section	501(c)(7	'), (9), or (	17) Org	ganization				
(see instr	uctions)	40101010101010101010101010101010101		******************************	nyuenaanaanaanaanaanaanaanaa	and a superior of the superior	4410701010101010101010101010101010101010		quentana anticonariona de la constanta de la c	1010101010101010101010101	manany penangkananananananananananananananananana
1, Descr	ription of inco	me			2. Amount of	income	<ol> <li>Deduction directly conne (attach sched)</li> </ol>	cted	4. Set- (attach s	asides schedule)	<ol><li>Total deductions and set-asides (col. 3 plus col. 4)</li></ol>
(1)											
(1) (2) (3) (4)											
(3)											
(4)											
	***************************************				Enter here and e Part I, line 9, co						Enter here and on page 1 Part I, line 9, column (B).
Totals				<b>&gt;</b>		0.					0.
Schedule I - Exploited (see instru	Exempt				Than Adv	ertisin	g Income				
			3 EV	penses	4. Net incom						7. Excess exempt
1. Description of exploited activity	unrelated incom	Gross I business ne from business	directly of with proof un	connected oduction related s income	from unrelated business (co minus colum gain, compute through	olumn 2 n 3). If a e cols. 5	<ol> <li>Gross inco from activity t is not unrelat business inco</li> </ol>	hat ed	attribut	penses table to mn 5	expenses (column 6 minus column 5, but not more than column 4).
(1)	<u> </u>	100000000000000000000000000000000000000	unionalonalaisenalonalaisena						luonanananananana		***************************************
(1) (2) (3) (4)	***************************************		***************************************			****************	1101010101010101010101010101010101010101		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	101610101010101010101010101	
(3)	######################################	*******************	CHOCHERORENO CONTRACTOR CONTRACTO	******************							
(4)	HEROKOROKO KARIKARIA	********************	HOTOLOGICA CONTRACTOR AND	karakarekiskarakarekiskarakarekisk	nementario en la compania de la compania del compania del compania de la compania del compania del compania de la compania del compania d				haman kanan ka	1016401616161616161616161	
	page 1	re and on I, Part I, col. (A).	page :	re and on 1, Part I, , col. (B).	,						Enter here and on page 1, Part II, line 25.
Totals		0.		0.							0.
Schedule J - Advertisir	ig Incor	<b>ne</b> (see i	nstruction	ns)	American de la company de la c						
Part I Income From I	Periodic	als Repo	orted o	n a Cons	solidated	Basis					
1. Name of periodical		2. Gross advertising income	adv	3. Direct ertising costs	or (loss) (cocol. 3). If a ga	ising gain ol. 2 minus ain, comput nrough 7.	5. Circulat e income		<b>6.</b> Read cos		7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)											
(2)											
(3)											
(1) (2) (3) (4)											
	<b>&gt;</b>		0.	0	•						0.
Totals (carry to Part II, line (5))			0.	0	•						0.

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

oolamii 2 tiiloagii 7 ofi e	t mie by mie basis.,	i Yanan kanan ka	· · · · · · · · · · · · · · · · · · ·	yuunin maanan maana		***************************************
1. Name of periodical	<b>2.</b> Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)				<u> </u>		
(3)						
(4)		***************************************				
Totals from Part I	0.	0.				0.
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 26.
Totals, Part II (lines 1-5)	0.	0.				0.
Schedule K - Compensation	n of Officers, I	Directors, and	<b>Trustees</b> (see in	nstructions)		

<b>1</b> . Name	<b>2.</b> Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		<b>&gt;</b>	0.

Form **990-T** (2019)

FORM 990-T	OTHER	INCOME		STATEMENT 1
DESCRIPTION				AMOUNT
WEBSITE ADVERTISING				18,484.
TOTAL TO FORM 990-T, PAGE 1	, LINE 12			18,484.
FORM 990-T	OTHER	DEDUCTI	ONS	STATEMENT 2
DESCRIPTION				AMOUNT
COMCAST				2,501.
TOTAL TO FORM 990-T, PAGE 1	, LINE 27			2,501.
FORM 990-T NE	T OPERATING	G LOSS D	EDUCTION	STATEMENT 3
TAX YEAR LOSS SUSTAINED	LOS: PREVIOU APPL:	JSLY	LOSS REMAINING	AVAILABLE THIS YEAR
03/31/19 5,571.	***************************************	0.	5,571.	5,571.
NOL CARRYOVER AVAILABLE THI	S YEAR		5,571.	5,571.

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 4
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
03/31/10	3,078.	0.	3,078.	3,078.
03/31/11	2,455.	0.	2,455.	2,455.
03/31/12	4,052.	0.	4,052.	4,052.
03/31/13	11,578.	0.	11,578.	11,578.
03/31/14	7,987.	0.	7,987.	7,987.
03/31/15	16,614.	0.	16,614.	16,614.
03/31/16	18,875.	0.	18,875.	18,875.
03/31/17	7,912.	0.	7,912.	7,912.
03/31/18	9,669.	0.	9,669.	9,669.
NOL CARRYO	VER AVAILABLE THIS	YEAR	82,220.	82,220.