# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

Α	For the	2014 cale	endar year, or tax year beginning	January 1	2014, and	ending	Decen	nber 31	, 20 14		
В	Check if	applicable.	C Name of organization Trout Lake	Nature Center, Inc.				D Employ	er identification nu	mber	
	Address	change	Doing business as						59-3039878		
$\overline{\sqcap}$	Name ch	•	Number and street (or P.O. box if m	ail is not delivered to street addre	ess) Ro	oom/suite		E Telepho	ne number		
	Initial reti	•	P.O. Box 641					•	352-7536		
$\exists$		rn/terminated	0.4	ntry, and ZIP or foreign postal coo	l de			-	302 7000		
믐				,	<del></del>		1	G Groce w	ecounte ¢	120,058	
님	Amended		Eustis, FL 32727-0641								
ш	Application	on pending	F Name and address of principal office				' '	s a group return for subordinates? Yes No			
			Joan Bryant, 707 Poinsettia Dri				, , ,				
<u> </u>	Tax-exen	mpt status:	✓ 501(c)(3)	) ◀ (insert no.) ☐ 4947(	a)(1) or 📙 🤄	527	ł		a list. (see instruction	is)	
<u>J</u>	Website		w.troutlakenature.org		<del></del>		H(c) Group	exemption	number ▶		
_		organization.	✓ Corporation Trust Associa	tion Other ►	L. Year of	formation	1991	M State	of legal domicile	<u>Fl</u>	
P	art I	Summ									
	1	Briefly de	escribe the organization's miss	ion or most significant ac	tivities: P	reserve	and maint	ain the na	ative flora and fa	una	
8		with the e	ecosystems. Install knowledge a	nd understanding of the int	errelations	ships in t	he natural	world wi	th particular		
ē	1	emphasis	s on water, wetlands and wildlife	. Teach stewardship and p	romote cor	nservatio	on of our r				
E											
ò	<ul> <li>Check this box ▶☐ if the organization discontinued its operations or disposed of more than</li> <li>Number of voting members of the governing body (Part VI, line 1a)</li></ul>									11	
ಶ			of independent voting member					3		11	
es	1		mber of individuals employed in					5		2	
Activities & Governance	1		mber of volunteers (estimate if	•				6		115	
	4		related business revenue from					7a		-0-	
								7b			
	b	Net unre	lated business taxable income	from Form 990-1, line 34	<del></del>	<del></del>	Prior Ye		Current Ye	-0-	
	_	O A!la	diama and monto (Doct VIII) line	4L\ ·		-			- Continue to		
Revenue			tions and grants (Part VIII, line	· · · · · · · · · · · · · · · · · · ·				138,218		118,014	
	4	•	service revenue (Part VIII, line	<del>-</del> -				760		-0-	
è			ent income (Part VIII, column (A					2173		1413	
			venue (Part VIII, column (A), line					1217		631	
_			enue-add lines 8 through 11 (r					147,368		120,058	
			nd similar amounts paid (Part I			- • -		-0-	·	-0-	
			paid to or for members (Part I)			• ⊨		-0-		-0-	
ŝ	15		other compensation, employee	•	-			74,399		67,954	
Expenses	16a	Profession	onal fundraising fees (Part IX, c	olumn (A), line 11e)				-0-		-0-	
ğ	b	Total fun	idraising expenses (Part IX, col	umn (D), line 25) 🕨			·····		,	1	
Ú	17	Other ex	penses (Part IX, column (A), lin	es 11a-11d, 11f-24e) .		- ∟		31,102		26,417	
	18	Total exp	oenses. Add lines 13-17 (must	equal Part IX, column (A),	line 25)	. L		105,501		94,372	
	19	Revenue	less expenses. Subtract line 1	8 from line 12	<u></u>			36,867		25,686	
20.00						Beg	jinning of Cu	rrent Year	End of Ye	ar	
sets Fan	20	Total ass	sets (Part X, line 16)			. [		629,674		671,403	
ASS	21	Total liab	oilities (Part X, line 26)			. [		954	= .	1215	
Net Assets of Fund Balance	22	Net asse	ets or fund balances. Subtract I	ine 21 from line 20		. 🗆		628,720		670,188	
	art II	Signa	ture Block	·· <u>·</u>		•					
			ury, I declare that I have examined this	return, including accompanying s	schedules and	d stateme	nts, and to t	he best of r	my knowledge and	belief, it is	
tru	e, correct	t, and comp	lete Declaration of preparer (other than	officer) is based on all information	on of which p	oreparer ha	s any knowl	edge.			
_			Konsid / Vale	arlina							
Sig	n	Sign	nature of officer	-			Da	te	11 1		
He	_		Ronald Mac	farlans.	Irea	SUN	س پ		5/26 <i>[15</i>		
		Type	e or print name and title	/4. 1-1.3	1,00	, , , ,			٠,		
_		1 7	/pe preparer's name	Preparer's signature		Date		T	РПИ		
Pa			C-Freezen ar a transfer	.,				Check self-em	<b>□</b>		
Pr	epare										
Us	se Onl	y Firm's n						n's EIN ▶			
Firm's address Phone no  May the IRS discuss this return with the preparer shown above? (see instructions)									- No		
Ma	y the IH	15 discus	s this return with the preparer	snown above? (see instru	cuons) .	• • •		<u> </u>	· · · Yes	No	

Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	The mission emphasizes environmental education for children and adults. The children's education, largely for elementary schools,
	is designed in conunction with Florida State Standards and administered by volunteers and staff members. The prgrams for adults involves staff members and non-staff experts conducting activities on site and including visits to other locations, often in
	conjunction with other organizations.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
	/O-1
4a	(Code:) (Expenses \$ 50,084 including grants of \$) (Revenue \$)
	During the school year, visitations are conducted from elementary schools, plus charter and private schools and home schooled
	children in Lake County. Programs meet Florida State Standards and are taught by staff and docents. To a lesser extent
	there are groups of children visiting during the summer. For the entire year, approximately 3,000 students participated in student
	educational programs, which was the largest number to visit the Nature Center in one year. Students are exposed to academic concepts like adaptation, habitat, food webs, photosyntheses and many more. This past year a Lake County Water Authority mini-
	grant enabled the Center to create two entirely new water-related curriculums. For many children this is their first experience in a
	natural outdoor classroom.
	Tatural Outdoor Classiconi.
4b	(Code: ) (Expenses \$ 13,236 including grants of \$ ) (Revenue \$ )
	The Center is open to the general public without charge. Groups can arrange visits that involve staff and/or docents. People
	can walk the trails leading to a boardwalk that ends at a dock on Trout Lake. The Education and Museum Buildings that contain
	a large collection of mounted specimens, native to Florida, ranging from various birds, snakes, and fish to a black bear and Florida
	panther. There are a small number of live specimens. A new addition to the trails is an Adventure Walk plus another trails into
	another part of the property.
4c	(Code: ) (Expenses \$ 8,228 including grants of \$ ) (Revenue \$ )
-	Educational programs are conducted several times per month on site or with visits to other locations. These programs range from
	lectures by experts in certain environmental fields (attendance as high as 100-125 persons) to bird watching on site and off site.
	Approximately 2800 adults/families participated in these various programs this past year. Some of the programs included logging
	and land management, Florida turtles, Greenscaping for Wildlife, Innovation Waste Management, and many others.
4d	Other program services (Describe in Schedule O.)
Ac	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 71,548

Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	<b>-</b>	1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
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	1	
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		1
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		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
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		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		1

Part IV Checklist of Required Schedules (continued	Part IV	Checklist	of Required Schedules	(continued
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	•	$\overline{}$	Yes	No
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		<u>···</u>
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>·</u> ✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		<b>✓</b>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		<b>√</b>
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		<b>√</b>
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		<u>√</u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		<b>✓</b>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		✓_
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			, ,
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b	_	<u>✓</u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<b>✓</b>
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<b>✓</b>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		<b>✓</b>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<b>✓</b>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		<b>✓</b>
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		<b>√</b>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		<b>✓</b>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38		<u>✓</u>
		Form	990	(2014)

<u>Part</u>				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	· ·	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   0		Yes	No
b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	1 1		
	reportable gaming (gambling) winnings to prize winners?	1c		1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			•
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		1
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			,
	account)?	4a		<b>V</b>
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).		ļ	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		7
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			<u> </u>
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		✓
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		<b>✓</b>
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	70		_
	required to file Form 8282?	7c	1	1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓_
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u>✓</u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			,
9	sponsoring organization have excess business holdings at any time during the year?	8		<u>✓</u>
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	1	1
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12		1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			
11	Section 501(c)(12) organizations. Enter:		l	
a	Gross income from members or shareholders	1	}	
b	against amounts due or received from them.)	İ		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	•	1
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<b>√</b>
	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		1	
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>✓</u>
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in S								
	Check if Schedule O contains a response or note to any line in this Part VI								
Secti	on A. Governing Body and Management								
4	Enter the number of cotton reserves and of the country back at the and of the Assurance	ا م		Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 1a  If there are material differences in voting rights among members of the governing body, or	11			[ ]				
	if the governing body delegated broad authority to an executive committee or similar								
	committee, explain in Schedule O.								
b	Enter the number of voting members included in line 1a, above, who are independent . 1b	11			1				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation	nship with							
	any other officer, director, trustee, or key employee?		2		1				
3	Did the organization delegate control over management duties customarily performed by or under								
	supervision of officers, directors, or trustees, or key employees to a management company or other per		3 4		1				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?								
5									
6 7a	Did the organization have members or stockholders?		6_	✓					
10	a 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?								
ь	Are any governance decisions of the organization reserved to (or subject to approval by)		7a_	✓	<del></del>				
_	stockholders, or persons other than the governing body?		7b	✓	ŀ				
8	Did the organization contemporaneously document the meetings held or written actions underta	ken during							
	the year by the following:								
а	The governing body?		8a	<b>\</b>					
b									
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be	reached at							
Cooti	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	· · · ·	9	242	1				
Secu	on B. Policies (This Section B requests information about policies not required by the Inte	illai nevell	ue Co	Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	!	10a		1				
	If "Yes," did the organization have written policies and procedures governing the activities of such	n chapters,	104	_	<u> </u>				
	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu		10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	the form?	11a	<b>√</b>					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			_					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a		1				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		12b		<b>/</b>				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy	? If "Yes,"	40.						
40	describe in Schedule O how this was done		12c	<del> </del>	1				
13 14	Did the organization have a written whistleblower policy?		14	├─	1				
15	Did the process for determining compensation of the following persons include a review and a		<u> </u>	<del>                                     </del>	<del>                                     </del>				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and								
а	The organization's CEO, Executive Director, or top management official		15a		1				
b	Other officers or key employees of the organization		15b		1				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				l				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar at	rangement			. تر ا				
	with a taxable entity during the year?		16a	-	1				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to e participation in joint venture arrangements under applicable federal tax law, and take steps to safe				1				
	organization's exempt status with respect to such arrangements?		16b	-	† ·				
Secti	on C. Disclosure			<u> </u>	1				
17	List the states with which a copy of this Form 990 is required to be filed ▶								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 99 available for public inspection. Indicate how you made these available. Check all that apply.	30-T (Section	501(	(c)(3)s	only				
	☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedul								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, or the provided that the south is during the terminal described in the south in the south is during the terminal transfer or the south is during t	conflict of inte	erest	policy	y, 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 be	ooks and re	cords	: ▶					

Part VII	Compensation of Officers,	Directors,	Trustees, I	Key Employees,	Highest	Compensated	<b>Employees</b>	, and
	Independent Contractors							

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

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

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

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

Check the box is notice the organization no					<del>(</del> )				]	.,
(A)	(B)	(do n	ot ch		ition	than o	nna	(D)	(E)	(F)
Name and Title	Average	box,	unles	s pe	rson	is both	n an	Reportable	Reportable	Estimated
	hours per week (list any hours for related organizations below dotted line)	Individua or directo		a Officer	Key employee	Highest compensated employee	÷	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) Joan Bryant President	8					ä				
		✓		✓			<u> </u>	-0-	-0-	-0-
(2) Ronald Macfarlane Treasurer	6	1		<b>\</b>				-0-	-0-	-0-
(3) Joan Nelson Secretary	3	1		<b>√</b>				-0-	-0-	-0-
(4) Donna Kelley Vice President	4	1		1				-0-	-0-	-0-
(5) Bernie Yokel Director	2	1		1				-0-	-0-	0-
(6) Margie LaRoe Director	2	1		1				-0-	-0-	-0-
(7) Morris Pelham Director	7	1		<b>✓</b>				-0-	-0-	-0-
(8) Horace Thompson Director	4	1		1				-0-	-0-	-0-
(9) Sharon Hillebrandt Director	3	1		1				-0-	-0-	-0-
(10) JoAnn Ryan Director	5	1		1				-0-	-0-	-0-
(11) Jim Rafferty Director	5	1		1				-0-	-0-	-0-
(12) Eileen Tramontana	42					1		55,000		
(13)						<u></u>		33,000		
(14)										

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
				Average box, unless person is be hours per officer and a director/tn					(D)  Reportable compensation	(E) Reportab compensation		from amount of		
		week (list any hours for related organizations below dotted line)	ndividua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatio (W-2/1099-N		comp fro orga and	ther ensation the nization related nization	n t
(15)										-				
(16)										·		<del></del> -		
(17)														
(18)								_						
(19)														
(20)														·——-
(21)														
(22)	······································													
(23)														
(24)						-	<u> </u>							<del></del>
(25)			ļ					_		<u>.</u> .		<del></del> -		
1b c	Sub-total	VII, Sectio	n A					<b>&gt;</b>	55,000					
d	Total (add lines 1b and 1c)	t not limited					above	e) w	ho received m		00,000	of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete:	ficer, direc						emp	oloyee, or high	est compe	ensated	3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of re	portal	ble (	con	nper	nsatio	n a s,"	nd other comp complete Sch	ensation fr	om the			
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or inc	dividual			<u> </u>
Section	on B. Independent Contractors		,5.								<u> </u>			
1	Complete this table for your five highest compensation from the organization. Repyear.													tax
	(A) Name and business add	Iress							(B) Description of s	ervices		(C) Compens	sation	
								_						
2	Total number of independent contractor received more than \$100,000 of compensations.							th	nose listed abo	ove) who				ĵ

Par	VIII	Statement of Revenue Check if Schedule O contains a response or note to	Port VIII				
		Official in Schedule & Contains a response of Mote to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	ta b c d e f	Federated campaigns 1a  Membership dues 1b 8215  Fundraising events 1c 6920  Related organizations 1d  Government grants (contributions) 1e 70,750  All other contributions, gifts, grants, and similar amounts not included above 1f 32,129					
Sont and C	g	Noncash contributions included in lines 1a-1f: \$  Total. Add lines 1a-1f	440.044				
		Business Code	118,014				
Program Service Revenue	2a b c d e f	All other program service revenue .					
	3	Total. Add lines 2a-2f ▶ Investment income (including dividends, interest,			<del> </del>	T	
	4 5	and other similar amounts) ▶ Income from investment of tax-exempt bond proceeds ▶	1413				
	6a b	Royalties			,		
	d 7a b	Net rental income or (loss)	631				
	c d	Gain or (loss)			<del>-</del>		
Other Revenue		Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a					
₹	С	Less: direct expenses b  Net income or (loss) from fundraising events . ▶  Gross income from gaming activities.  See Part IV, line 19 a					
	С	Less: direct expenses b  Net income or (loss) from gaming activities ▶  Gross sales of inventory, less returns and allowances a		· · · · · · · · · · · · · · · · ·			
		Less: cost of goods sold b  Net income or (loss) from sales of inventory ▶  Miscellaneous Revenue Business Code					
I	11a	Miscellaneous Revenue Business Code	* ***		, - , - , -		
	b c						
İ	d	All other revenue					
	e 12	Total. Add lines 11a–11d	120,058				

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. Al	Il other organization	s must complete colu	mn (A).
	Check if Schedule O contains a respons	se or note to any lin	e in this Part IX .	<u> </u>	🗆
	t include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				, ,
_	and domestic governments. See Part IV, line 21	-0-			
2	Grants and other assistance to domestic individuals. See Part IV, line 22	-0-			ļ
3	Grants and other assistance to foreign				!
	organizations, foreign governments, and foreign				į.
	individuals. See Part IV, lines 15 and 16	-0-			
4	Benefits paid to or for members	-0-			
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified	53,560	36,421	14,461	2678
О	persons (as defined under section 4958(f)(1)) and			İ	
	persons described in section 4958(c)(3)(B)	-0-			
7	Other salaries and wages	7132	6419	357	356
8	Pension plan accruals and contributions (include	7.132			
	section 401(k) and 403(b) employer contributions)	1458	1020	219	219
9	Other employee benefits	1222	1100	61	61
10	Payroll taxes	4582	4124	229	229
11	Fees for services (non-employees):				
a	Management				
b	Legal				
C d	Accounting				
e	Professional fundraising services. See Part IV, line 17	-0-	<del></del>		····
f	Investment management fees	-0-			
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)		[		
12	Advertising and promotion	250	125		125
13	Office expenses	6821	5456	682	682
14	Information technology	-0-			
15	Royalties	-0-			
16 17	Occupancy	4712	3393	660	660
18	Payments of travel or entertainment expenses	-0-	<del>}}</del>		<del></del>
	for any federal, state, or local public officials	-0-	į		
19	Conferences, conventions, and meetings .	-0-			
20	Interest	-0-			
21	Payments to affiliates [	-0-			
22	Depreciation, depletion, and amortization .	-0-			
23	Insurance	3813	2669	572	572
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				4 7
	(A) amount, list line 24e expenses on Schedule O.)		Ì	}	ۇ 1
а	Environmental Education	472	472		
b	Volunteer Luncheon	356	356		
C	Program Expense	226	226		
d					
е	All other expenses	9767	9767		
25	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	94,372	71,548	17,241	5583
26	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)	)			

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	rt X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	13,818	1	4730
	2	Savings and temporary cash investments	271,848	2	304,498
Assets	3	Pledges and grants receivable, net	ф.	3	-0-
	4	Accounts receivable, net	-0-	4	-0-
	5	Loans and other receivables from current and former officers, directors,			;
		trustees, key employees, and highest compensated employees.  Complete Part II of Schedule L			٠
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
SS	7	Notes and loans receivable, net		7	
•	8	Inventories for sale or use		8	
	9 10a	Prepaid expenses and deferred charges		9	;
	ا		rod n n		4
	b	Less: accumulated depreciation 10b	302,131		316,504
	11	Investments—publicly traded securities	41,877	_	45,671
	12	Investments—other securities. See Part IV, line 11		12	
	13 14	Investments—program-related. See Part IV, line 11	<del></del>	13	
		Intangible assets		14	
	15   16	Other assets. See Part IV, line 11		15	
	17	Total assets. Add lines 1 through 15 (must equal line 34)	629,674	16 17	671,403
,	18	Grants payable		18	
i	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	<u> </u>	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	<del></del>	21	
S	22	Loans and other payables to current and former officers, directors,		-21	3
Liabilities	22	trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	-
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
_	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			<del></del>
	2.5	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	954	25	1215
	26_	Total liabilities. Add lines 17 through 25	954	26	1215
S		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and			,
Sce		complete lines 27 through 29, and lines 33 and 34.			
la	27	Unrestricted net assets		27	
B	28	Temporarily restricted net assets		28	
밀	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.			
ş	30	Capital stock or trust principal, or current funds		30	·
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
<b>Ž</b>	32	Retained earnings, endowment, accumulated income, or other funds .		32	
2	33	Total net assets or fund balances	629,674	33	671,403
	34	Total liabilities and net assets/fund balances	628,720	34	670,188
					Form <b>990</b> (2014)

D	1	9
Page		4

					· ugo	
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI			<u> </u>		$\Box$
1	Total revenue (must equal Part VIII, column (A), line 12)	1			120,0	058
2	Total expenses (must equal Part IX, column (A), line 25)	2			94,	<u> 372</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			2 <u>5,</u> (	686
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			629,6	<u> 674</u>
5	Net unrealized gains (losses) on investments	5			16,0	<u> 073</u>
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10			671,4	<u> 403</u>
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>	• •	•	
				Ye	s N	lo
1	Accounting method used to prepare the Form 990:  Cash Accrual Other		_	1	- [	ļ
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	in			
	Schedule O.			-		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 22	<u> </u>		<del></del> ,
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled	or			,
	reviewed on a separate basis, consolidated basis, or both:		ļ		- ]	}
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		ŀ			
b	Were the organization's financial statements audited by an independent accountant?	• . •	. 2t	<u> </u>		
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on	a	1	- [	3
	separate basis, consolidated basis, or both:		İ			i i
	Separate basis Consolidated basis Both consolidated and separate basis		[	·		[
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o					
	of the audit, review, or compilation of its financial statements and selection of an independent account			<u>: -</u> -		
	If the organization changed either its oversight process or selection process during the tax year, ex	plain	ın		-	
	Schedule O.					.1
3a		torth	1	ł		
	the Single Audit Act and OMB Circular A-133?		· 3a	<u> </u>	_   •	_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits?					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	uaits.			<u></u> _	_
			F	orm <b>9</b>	90 (20	014)

### **SCHEDULE A** . (Form 990 or 990-EZ)

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.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

**Open to Public** Inspection Employer identification number

	JT LAKE NATURE CENTER, INC						39878			
	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.									
	organization is not a private founda		•		-	•				
1	A church, convention of church			ibea in <b>s</b> e	ection 17	(U(b)(1)(A)(i).				
2 3	☐ A school described in <b>section</b> ☐ A hospital or a cooperative ho		•	n coetics	. 170(b)(·	(\/A\/:::\				
4							(iii) Enter the			
•	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:									
5										
6 7	☐ A federal, state, or local gover  An organization that normally described in section 170(b)(1)	receives a subs	tantial part of its sup				n the general public			
8	☐ A community trust described i	n section 170(b)	(1)(A)(vi). (Complete	Part II.)						
9	An organization that normally receipts from activities relate support from gross investme acquired by the organization a	d to its exempt ent income and	functions—subject to unrelated business	certain taxable i	exceptio ncome (l	ns, and (2) no more	than 331/3% of its			
10	☐ An organization organized and	l operated exclus	sively to test for public	c safety.	See <b>sect</b>	ion 509(a)(4).				
11	An organization organized and one or more publicly supported the box in lines 11a through 11	operated exclusi d organizations d	vely for the benefit of, escribed in <b>section 5</b>	to perfor <b>09(a)(1)</b> o	m the fur r <b>sectio</b> n	actions of, or to carry 509(a)(2). See sect	ion 509(a)(3). Check			
а	☐ Type I. A supporting organization(sorganization. You must con	) the power to re	egularly appoint or ele							
b	☐ Type II. A supporting organic control or management of the organization(s). You must control to the control organization organization organization.  ☐ Type II. A supporting organization organization organization organization.  ☐ Type II. A supporting organization organization organization.  ☐ Type II. A supporting organization organization organization.  ☐ Type II. A supporting organization organization organization.  ☐ Type II. A supporting organization organization.  ☐ Type II. A supporting organization organization.  ☐ Type II. A supporting organization organization.  ☐ Type II. A supporting organization organization.  ☐ Type II. A supporting organization.  ☐ Type II. A supporting organization.  ☐ Type II. A supporting organization.  ☐ Type II. A supporting organization.  ☐ Type II. A supporting organization.  ☐ Type II. A supporting organization.  ☐ Type II. A supporting organization.  ☐ Type II. A supporting organization.  ☐ Type III. A supporting organization.  ☐ Type II. A supporting organization.  ☐ Ty	e supporting org	anization vested in th							
С	Type III functionally integra its supported organization(s)						y integrated with,			
d	☐ Type III non-functionally in that is not functionally integr requirement (see instructions	ated. The organi	zation generally must	satisfy a	distributi	ion requirement and				
е		ation received a	written determination	from the	IRS that	it is a Type I, Type I	I, Type III			
f	Enter the number of supported	organizations .					[			
g	Provide the following information	n about the supp	orted organization(s).							
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	listed in you	rganization ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
			(SOS IIISII QOLIOIIS))	Yes	No					
(A)										
(B)										
(C)										
(D)										
(E)										
Total										

Part II

Part							
	(Complete only if you checked the						alify under
	Part III. If the organization fails to	qualify unde	r the tests lis	ted below, pl	ease comple	te Part III.)	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not		ĺ				
	include any "unusual grants.")	92,682	115,985	115,562	138,218	118,014	580,461
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		İ			ļ	
_	organization without charge						<del> </del>
4	Total. Add lines 1 through 3	92,682	115,985	115,562	138,218	118,014	580,461
5	The portion of total contributions by	j				}	
	each person (other than a			ł		. 1	
	governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)					1	•
6	Public support. Subtract line 5 from line 4.					<del></del>	
	on B. Total Support	<u></u>		1			380,481
	dar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	92,682	115,985	115,562	138,218	118,014	580,461
8	Gross income from interest, dividends,					,	
-	payments received on securities loans,	}				1	
	rents, royalties and income from similar	, ,					
	sources	3647	2477	3410	3343	2044	14,921
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.)	23,273	7731	2901	10961	6920	51,786
11	Total support. Add lines 7 through 10						647,168
12	Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for the organization, check this box and stop he	•			-		<b>.</b>
Sooti	on C. Computation of Public Suppor			<del></del>	<del>· · · · · ·</del>	<u> </u>	· · · L
14	Public support percentage for 2014 (line 6			1 column (fl)		14	89 %
15	Public support percentage from 2013 Sch					15	88 %
16a	331/3% support test—2014. If the organiz						
	box and stop here. The organization qua						. ▶ ☑
b	331/3% support test-2013. If the organ	nization did no	t check a box	on line 13 or	16a, and line	15 is 331/3%	
	check this box and stop here. The organ						. ▶ 🗆
17a	10%-facts-and-circumstances test - 20	014. If the orga	nization did no	t check a box	on line 13, 16	a, or 16b, and I	ine 14 is
	10% or more, and if the organization me						
	Part VI how the organization meets the "f	acts-and-circu	mstances" tes	t. The organiza	ation qualifies	as a publicly su	pported
	organization						. ▶ 🗆
b	10%-facts-and-circumstances test - 20	<b>013.</b> If the orga	nization did no	t check a box	on line 13, 16	a, 16b, or 17a,	and line
	15 is 10% or more, and if the organizat						
	Explain in Part VI how the organization m	eets the "facts	-and-circumst	ances" test. Ti	he organizatio	n qualifies as a	publicly
	supported organization					· · · · ·	. ▶ □
18	Private foundation. If the organization di		oox on line 13,	16a, 16b, 17a	, or 17b, chec	k this box and	see
	instructions						. ▶ □

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

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

_ • Se	ection 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Name o	of organization		<u> </u>	Employer ide	ntification number
TROUT	T LAKE NATURE CENTER, I				59-3039878
Part	I-A Complete if the	e organization is exempt und	er section 501(	c) or is a section 527	organization.
1	Provide a description of t	the organization's direct and indire	ct political campa	ign activities in Part IV.	
2	Political expenditures .			<i></i> <b>. &gt;</b> ;	575
3	Volunteer hours		· • • • • • · ·		492
Part	I-B Complete if the	e organization is exempt und	er section 501(	c)(3).	
1	Enter the amount of any	excise tax incurred by the organiza	ation under section	n 4955 ▶ 🤄	\$ -0-
2	Enter the amount of any	excise tax incurred by organization	n managers under	section 4955 ▶	\$ -0-
3	If the organization incurre	ed a section 4955 tax, did it file Fo	rm 4720 for this ye	ear?	Yes 🗸 No
4a	Was a correction made?				🗌 Yes 📝 No
b	If "Yes," describe in Part				
Part		e organization is exempt und			I(c)(3).
1		ly expended by the filing organiz			
^				,	) 
2		filing organization's funds contrib			
•		vities			) 
3					
				•	) 
4	• •	file Form 1120-POL for this year			_
5		ses and employer identification nur ents. For each organization listed,			
		ontributions received that were pro-			
		fund or a political action committee			
		I		T	1
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate political organization. If
					none, enter -0
	<u></u>				
(1)					
(2)					
					<u> </u>
(3)			,		
(4)					
(7)					
(5)					
(6)			<del></del>		

p	age	2

Pa	t II-A Complete if the organization section 501(h)).	is exempt	under section 5	01(c)(3) and file	d Form 5768 (ele	ction under			
Α	Check ► ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).								
В	Check ▶ ☐ if the filing organization che	cked box A	and "limited con	trol" provisions a	apply.				
	Limits on Lobby				(a) Filing	(b) Affiliated			
	(The term "expenditures" me	ans amounts	paid or incurred.	)	organization's totals	group totals			
1:	Total lobbying expenditures to influence	public opinion	(grass roots lobby	ring)					
1	Total lobbying expenditures to influence	a legislative bo	ody (direct lobbying	g)					
•	Total lobbying expenditures (add lines 1a	and 1b) .							
(	d Other exempt purpose expenditures								
	Total exempt purpose expenditures (add								
1	Lobbying nontaxable amount. Enter t								
	columns.				}				
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is:					
	Not over \$500,000		nount on line 1e.						
	Over \$500,000 but not over \$1,000,000		s 15% of the excess	over \$500,000.		;			
	Over \$1,000,000 but not over \$1,500,000		s 10% of the excess						
	Over \$1,500,000 but not over \$17,000,000		s 5% of the excess o	-		:			
	Over \$17,000,000	\$1,000,000.		10. 4.,000,000.	1	Ĵ			
					1				
g Grassroots nontaxable amount (enter 25% of line 1f)									
i	Subtract line 1f from line 1c. If zero or les				" '				
ì	If there is an amount other than zero		1h or line 1i, did	the organization	file Form 4720				
•	reporting section 4911 tax for this year?					Yes No			
	(Some organizations that made a sec See the	tion 501(h) ele separate inst	ructions for lines	e to complete all 2a through 2f.)	of the five column	s below.			
	Lobbying	Expenditures	During 4-Year Av	veraging Period	1				
	Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	( <b>c)</b> 2013	( <b>d)</b> 2014	(e) Total			
2	Lobbying nontaxable amount								
	Lobbying ceiling amount (150% of line 2a, column (e))		-						
	Total lobbying expenditures								
	Grassroots nontaxable amount								
•	Grassroots ceiling amount (150% of line 2d, column (e))								
1	Grassroots lobbying expenditures								

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Forn	n 576	8	
For	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(	a)		(b)	
	ription of the lobbying activity.	Yes	No		Amour	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?	<u> </u>				
d	Mailings to members, legislators, or the public?					
e f	Publications, or published or broadcast statements?	<b> </b>				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	-	<del>                                     </del>			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?		$\vdash$			
j	Total. Add lines 1c through 1i	<b>—</b>				
2a b	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	<u> </u>	ļ		-	
Ç	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
d Post	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	\/E\ .				
rart	501(c)(6).	;)(၁), (	or se	CUON	1	
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		1
Part	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."					3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).	s of				
а	Current year	•	2a			
b	Carryover from last year		2b			
C	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3		-	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb	ying				
5	and political expenditure next year?		4			
Pari	Taxable amount of lobbying and political expenditures (see instructions)		5			
	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	un liet	h. Dar	+ II_Δ	lines	1 and
2 (see	instructions); and Part II-B, line 1. Also, complete this part for any additional information.	up iisi	y, rai	t 11-7- <b>1</b> ,	III ICS	i aiiu
The lo	bbying work began after one of our members offered to purchase certain properties from the City of Eust	is for 1	rout l	Lake N	lature	
Center	. The City acknowledged the bid, but really did nothing further in the negotiation process. Meanwhile the	City C	Counc	il indi	ated t	hat
they w	ere going to change the zoning category of some property adjacent to the site of the Nature Center. This	chang	je cou	ld res	ult in s	ome
develo	pment on that property. Our benefactor wanted to file a lawsuit against the City because of their disrega	rd of p	arts o	f the C	ompre	ehen-
sive P	an when building a nearby fire station plus they didn't seem to follow their own building codes in the pro	cess.	Our B	oard o	of Direc	ctors
voted	to support the lawsuit. This resulted in our enlisting an attorney on a pro-bono basis. The City Council w	as not	pleas	ed wi	h thes	e
develo	pments and opted to no longer continue their financial support in the amount of \$5,000.					

Part V Supplemental information (continued)
We continued to make every effort to ameliorate the relationship with the City, but the lawsuit was the stumbling block. Both parties tried
to negotiate a settlement, but to no avail.
Our Board conducted some preliminary plans for the property on which the bid was submitted to the City, but that didn't seem to smooth
over the relationship. Since the publicity associated with this situation was not favorable, the Board decided that we would no longer
support the lawsuit. Since Trout Lake's support was very important to the process, it appears that we will no longer be involved in the
negotiations. The City has refused to negotiate a settlement, but we will no longer be at risk for financial damages.

### SCHEDULE D (Form 990)

**Supplemental Financial Statements** 

▶ Complete if the organization answered "Yes" to Form 990. Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. OMB No. 1545-0047

Internal Revenue Service

Open to Public ► Attach to Form 990. Department of the Treasury ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Name of the organization Employer identification number Trout Lake Nature Center, Inc. 59-3039878 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds Total number at end of year . . . . . . . . . Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) . Aggregate value at end of year . . . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year. 2a Number of conservation easements on a certified historic structure included in (a) . . . . C Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

Assets included in Form 990, Part X .

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of it collection terms (check at that apply):  a	Par	Organizations Maintaining	Collections of	Art, Historical 1	Treasures, or O	ther Similar Ass	sets (cor	itinu	ıed)
b   Scholarly research     Other	3	Using the organization's acquisition,							
b   Scholarly research   C   Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Par XIII.  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?   Yes   No   No   Part XIII   Escrow and Custodial Arrangements.  Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, part XIII to 9, part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, III to 9, part XIII to 9, part XIII and complete the following table:  C Beginning balance   16	а	☐ Public exhibition		d □ Loan	or exchange proc	arams			
c	b	Scholarly research							
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Par XIII.  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to traise funds rather than to be maintained as part of the organization's collection?	С		3						
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	4	Provide a description of the organizat		and explain how t	hey further the or	ganization's exem	pt purpos	se in	Par
Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	5	assets to be sold to raise funds rather	than to be mainta					; <u> </u>	] No
990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table:  c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	Pari		•				-		
b If "Yes," explain the arrangement in Part XIII and complete the following table:  C Beginning balance .		990, Part X, line 21.		•		·		om	1
b If "Yes," explain the arrangement in Part XIII and complete the following table:    C   Beginning balance   1   1   1   1   1   1   1   1   1	1a							s <b>√</b>	] No
C   Beginning balance     1c	b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the following ta	able:	An			
d Additions during the year    Distributions during the year   1d   1e	С	Beginning balance							
Ending balance   1f							<del></del>		
Ending balance   Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?									
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?									
Part V Endowment Funds.  Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Complete if the organization answered "Yes"							? ☐ Yes	· 「	No
Part V	_								, ]
Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    1a   Beginning of year balance   (a) Current year   (b) Pnor year   (c) Two years back   (d) Three years back   (e) Three years back   (e) Three years   (e) Three yea	-		art Am. Oncor non	on the explanation	Thas been provid	iod iii i die Xiii .	<del></del>		
1a Beginning of year balance . 46,428			answered "Yes"	" to Form 990. P	art IV. line 10.				
Beginning of year balance						(d) Three years back	(e) Four y	ears t	back
b Contributions . Net investment earnings, gains, and losses . Net investment earnings, gains, and losses . Net investment earnings, gains, and losses . Net investment earnings, gains, and losses . Net investment earnings, gains, and losses . Net investment earnings, gains, and losses . Net investment earnings, gains, and losses . Net investment earnings, gains, and losses . Net investment earnings, gains, and losses . Net investment earnings, gains, and losses . Net investment earnings, gains, and losses . Net investment earnings, gains, and	1a	Beginning of year balance	46 428	40 751			<del></del>		
c Net investment earnings, gains, and losses	_		70,720	40,731	30,073	33,033	<del> </del>		,577
d Grants or scholarships	-	Net investment earnings, gains, and	7014	2270	2240	2470			2722
e Other expenditures for facilities and programs	А		7011	2370	2318	24/8	<u> </u>		3122
f Administrative expenses		,				<del> </del>	<del> </del>	-	
f Administrative expenses									
g End of year balance	f	· · · · · · · · · · · · · · · · · · ·					<del> </del>		
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶ %  b Permanent endowment ▶ 100%  c Temporarily restricted endowment ▶ %  The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations		•	50.706	AC 420	40.751	26 970	1	25	- 000
a Board designated or quasi-endowment ▶ 96 b Permanent endowment ▶ 100% c Temporarily restricted endowment ▶ 96 The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations . 3a(i) ✓  (ii) related organizations . 3a(ii) ✓  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b □  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Describtion of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (d) Book value (d) Book valu	-	-					<u> </u>		,033
b Permanent endowment  90%  c Temporarily restricted endowment  9% The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations  3a(i) / (ii) related organizations  3a(ii) / (ii) related organizations  3a(ii) / (ii) related organizations  3a(ii) / (ii) related organizations  3a(ii) / (iii) related organizations  3a(iii) / (iii) related organizations  1sted as required on Schedule R?  3b			•		, column (a), nela	<b>u</b> 3.			
Temporarily restricted endowment ► % The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	_			70					
The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	_								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations (ii) related organizations  b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI  Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation  1a Land  70,150  Description of property  1a Land  70,150  Description of property  1b Buildings  217,907  C Leasehold improvements  18,258  Description of Poperty  18,258  Description of Poperty  2671  Description of Poperty  2671  Description of Poperty  2671  Description of Poperty  2671  Part VI  2671	·	·		no/					
organization by:  (i) unrelated organizations	За				at are held and a	dministered for the	<b>a</b>		
(i) unrelated organizations	-		possession or th	o organization the	at are freid and a	arriance roa for the		<b>7</b> 00	No
(ii) related organizations		•						1	-140
b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (other) (other) (other) (d) Book value (d) Book value (d) Book value (other) (ot								*	
4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (other) (other) (c) Accumulated depreciation (d) Book value (nivestment) (other) (other) (other) (c) Accumulated depreciation (d) Book value (d) Book value (other) (ot	h	• •						$\dashv$	_ <b>-</b>
Part VI  Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  70,150  Buildings							35	L	
Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  70,150  Buildings				or a cridownione re	<u> </u>				
Description of property   (a) Cost or other basis (other)   (b) Cost or other basis (other)   (c) Accumulated depreciation	ı en			to Form 990 P	ert IV line 11a	See Form 990 F	Dart Y lir	<b>1</b> 1 م	3
(investment)         (other)         depreciation           1a Land         70,150         70,150           b Buildings         217,907         217,907           c Leasehold improvements         18,258         18,258           d Equipment         7517         7517           e Other         2671         2671				<del></del>	<del></del>				
b Buildings       217,907       217,907         c Leasehold improvements       18,258       18,258         d Equipment       7517       7517         e Other       2671       2671		Description of property	1 ' '	1	1		(u) DOOK	vaiue	
b Buildings       217,907       217,907         c Leasehold improvements       18,258       18,258         d Equipment       7517       7517         e Other       2671       2671		Land		70.150		<del></del>		70	).150
c       Leasehold improvements	_								
d Equipment		_							
e Other	_	·				<u> </u>			
							<u> </u>		
			nust equal Form 9		(B), line 10c.) .	<b>&gt;</b>			

Part VII	Investments—Other Securities.  Complete if the organization answered	"Yes" to Form 99	90. Part IV. line	11b. See Form	990 Part X line 12.
	(a) Description of security or category		(b) Book value	(c) Meth	nod of valuation
	(including name of security)			Cost or end-	of-year market value
(1) Financial					
	neld equity interests				
(3) Other					
(B)					
(C)				· ·	
(D)			<del></del>	<del></del>	<del></del>
(E)					
(F)					
(G)					<del></del>
(H)					
Total. (Column (	b) must equal Form 990, Part X, col. (B) line 12.) ▶				
Part VIII	Investments – Program Related.				
	Complete if the organization answered	"Yes" to Form 99	90, Part IV, line	11c. See Form	990, Part X, line 13.
	(a) Description of investment	1	(b) Book value		nod of valuation: of-year market value
<u>(1)</u>					
(2)					
(3)					
(4)				·	
_(5)					··
(6)					······································
(8)					<del></del>
Total (Column (	b) must equal Form 990, Part X, col. (B) line 13 )	- <del></del>		<del></del>	
Part IX	Other Assets.				
I GILIX	Complete if the organization answered	"Yes" to Form 99	0. Part IV. line	11d. See Form	990 Part X line 15.
	(a) Descri		<u> </u>		(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
_(6)					
		·			
(8)					
(9)	mn (b) must equal Form 990, Part X, col. (B) I	line 15 )			<del></del>
Part X	Other Liabilities.	116 13.)	<del>· · · · · · · · · · · · · · · · · · · </del>		
PartA	Complete if the organization answered	"Ves" to Form 90	n Part IV line	11e or 11f See	Form 990 Part X
	line 25.	163 101011113	oo, rantiv, iiile	116 0/ 111. 066	TOTTI 550, Fat A,
1.	(a) Description of liability	(b) Book value			
(1) Federal in	ncome taxes	121	5		
(2)		· · · · · · · · · · · · · · · · · · ·	_		
(3)		<del></del>	_		
(4)			-		
(5)		·	-		
(7)			-		
(8)			=		
(9)			-		
	b) must equal Form 990, Part X, col. (B) line 25.) ▶	121	5		
	uncertain tax positions. In Part XIII, provide the			's financial stateme	nts that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part		-	Return.			
<del></del> _	Complete if the organization answered "Yes" to Form 990,		1			
1	Total revenue, gains, and other support per audited financial statements		1			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1	ļ. <b> </b>			
а	Net unrealized gains (losses) on investments	2a	4			
b	Donated services and use of facilities	2b	4 1			
C	Recoveries of prior year grants		4 1			
d	Other (Describe in Part XIII.)		4			
е	Add lines 2a through 2d		2e			
3	Subtract line 2e from line 1		3			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	4 1			
b	Other (Describe in Part XIII.)		4 . 1			
	Add lines 4a and 4b		4c			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5			
Part			er Heturn.			
	Complete if the organization answered "Yes" to Form 990,					
1	Total expenses and losses per audited financial statements					
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1	ļ, ļ			
а	Donated services and use of facilities	2a	4 1			
b	Prior year adjustments		1 1			
С	Other losses		<u>.</u>			
d	Other (Describe in Part XIII.)		<b>.</b>			
е	Add lines 2a through 2d		2e			
3	Subtract line 2e from line 1		3			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b		1 1			
b	Other (Describe in Part XIII.)	4b	<u> </u>			
C	Add lines <b>4a</b> and <b>4b</b>		4c			
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 18.)	5			
	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 We have no art or historical treasures. However, as part of our environmental education programs, we have enumerable mounted						
specim	ens of birds, animals, fish and mammals. While these creatures are irreplace	eable in most cases, the cost	of replacing them is only			
relevar	t to having a taxidermist prepare the new specimen for mounting. The speci	mens themselves have been	donated once the creature			
died.						
PART \	It is intended that certain percentage of the assets be used to aid with opera	iting costs of the Nature Cent	er. However, the Board			
decide	to cease that practice until the Fund grows to a more meaningful level.					
PART X - No applicable						
PART XI, XII, and XIII As a relatively small organization with limited financial resources, the Board feels that an expenditure for a full						
audit is not a wise use of operating funds at this time. We havae taken one step which is to engage the services, on a volunteer basis of						
a person formerly employed by an accounting firm to prepare our monthly financial reports in conjunction with our Treasurer.						
PART \	/ - The Audubon Society presently holds \$53,000 that was gifted to Trout Lake	e through that organization.	At some point that money			
will be paid to us for capítal projects.						

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

Name of the organization

### 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.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2014

Open to Public

Inspection

Employer identification number

TROUT LAKE NATURE CENTER, INC.	59-3039878			
Schedule B - There was no need for this Schedule, since no individual made a contribution of \$5,000 or	r more in 2014.			
990 Part III 4d - There were no other program services expenses or revenues. Other expenses included maintenance expenses for				
buildings, roads, boardwalks, etc.				
Part VI 11 - Once the forms were completed by the Treasurer, it was presented at the next Board meeting	ng for review by all of the members			
present at the meeting. Discussion leading to corrections will be made prior to submission to IRS.				
Part VI 19 - An appropriate message is placed on our website to indicate that a copy of the 990 tax return is available by calling the phone				
number indicated. At the time of contact, other documents will be made available if the calling person requests them.				
Part VI 6 - The organization has members who pay annual dues.				
Part VI 7 - The Board of Directors and Officers are elected by the membership at the annual meeting scheduled for each January.				
Part VI 8 - Any meeting of the membership has minutes prepared by the Secretary which are approved	at the next meeting. Minutes of			
each Board meeting are recorded by the Secretary for approval by the Board at its next meeting. No m	inutes are usually kept of any			
meeting of a committee				
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Schedule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization	Employer identification number
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