_{Form} **99**0

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2013

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

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

Open to Public

A	For the	2013 cale		mina January 1					30 13				
			ndar year, or tax year beging C Name of organization Trout		2013, and en	uing	Decemb		, 20 13	umbor			
В		f applicable.		Lake Nature Center, Inc.			—— "	D Employer identification number					
님		change	Doing Business As		\	4- 4-		-	59-3039878				
님	Name c	•	·	x if mail is not delivered to street addres	ss) Room	vsute		elepnor	ne number				
\vdash	Initial re		P.O. Box 641						352-357-7536				
\sqcup	Termina	rted	City or town, state or province	, country, and ZIP or foreign postal code	e								
닏	Amende	ed return	Leesburg, FL 32727-06411	3			G	Gross re	ceipts \$	142,368			
Ш	Applicat	tion pending	(a) is this a group	p return for s	subordinates? 🔲 Ye:	s 🔲 No							
			bordinates	s included? 🔲 Ye	s 🔲 No								
<u></u>	Tax-exe	mpt status	✓ 501(c)(3) ☐ 50	01(c) () ◀ (insert no.) 🔲 4947(a))(1) or 🔲 527	·	If "No,"	" attach a	list, (see instruction	ons)			
J	Website	e: ► www	w.troutlakenature.org			н	(c) Group ex	kemption	number 🕨				
K	Form of	organization	Corporation Trust As	ssociation ☐ Other ►	L Year of form	mation ⁻	1991	M State	of legal domicile	FI			
Р	art I	Summ	ary										
	1	Briefly de	escribe the organization's	mission or most significant acti	vities: Pres	serve ar	nd maintai	n the na	tive flora and	iauna			
8]			ge and understanding of the inte									
Activities & Governance	İ			dlife. Teach stewardship and pro									
Ē	2			tion discontinued its operations									
્રે	3			governing body (Part VI, line 1a				3		12			
~	4			mbers of the governing body (P	•	151		4		12			
es	5			ved in calendar year 2013 (Part	- Contraction			5	- '	2			
Ξ	6		nber of volunteers (estima			7001		6					
支	7a			rom Part VIII, column (C), line	2-1	/ö/		7a		125			
_	l 'b			ome from Form 990-T, line 34	2010	ري / . خ	/	7b		<u>-0-</u>			
_	-	146t Gillel	ated business taxable inc	Une nom rom spo-1, and 54	3 8 711	1 /13	Pnor Year		Current Y	-0-			
	。	Contribut	tions and grants (Part VIII,	- 11		- Oditent I							
3	8		•	1	15,562		138,218						
Revenue	9	_	service revenue (Part VIII,		1,811		760						
æ	10		ent income (Part VIII, colun	nn (A), lines 3, 4, and (d).	GOEN,			1,969		2173			
6	11			,,	-10,			1,090	12				
	12			11 (must equal Part VIII, column			1	20,432		147,368			
Expenses	13			Part IX, column (A), lines 1-3).				-0-		-0-			
× = = = = = = = = = = = = = = = = = = =	14		paid to or for members (Pa					-0-	· , , , , , , , , , , , , , , , , , , ,	-0-			
S S	15	Salaries,	other compensation, emplo	yee benefits (Part IX, column (A),	, lınes 5–10)			75,882		74,399			
SE	16a	Profession	onal fundraising fees (Part	IX, column (A), line 11e)				-0-		-0-			
୬ଞ୍ଚ	b	Total fun	draisıng expenses (Part IX	(, column (D), line 25) ▶									
- W	17	Other exp	penses (Part IX, column (A), lines 11a-11d, 11f-24e) .		L		26,339		31,102			
5	18	Total exp	enses. Add lines 13-17 (n	nust equal Part IX, column (A), I	line 25) .		1	02,221		105,501			
	19	Revenue	less expenses. Subtract li	ine 18 from line 12				18,211		36,867			
, 5 %						Begin	ning of Curre	ent Year	End of Yo				
Net Assets or Fund Balances	20	Total ass	ets (Part X, line 16)				5	88,125		629,674			
	21	Total liab	ilities (Part X, line 26)					870		954			
, 2 .5	22	Net asse	ts or fund balances. Subtr	act line 21 from line 20			- 5	87,255		628,720			
P	art II	Signat	ture Block					07/2001		020,720			
Un	der pena	alties of penu	ry, I declare that I have examined	this return, including accompanying so	hedules and st	atements	and to the	best of m	ny knowledge and	d helief it is			
				r than officer) is based on all information					,	<i>z</i>			
			Konew Mac	Luce			T	7-2	4-14				
Sign Signature of officer Date								····					
He	_		Ronald Mai	fortune T	reago	سرے							
		Type	or print name and title	3/0/01/01/01									
_	• •		pe preparer's name	Preparer's signature	· · · · · · · · · · · · · · · · · · ·	Date			PTIN				
	Paid						Check [#					
	epare			· · · · · · · · · · · · · · · · · · ·		ļ		self-emp	noyeu				
Us	e On							EIN ►					
Ma	v the II		ddress ► s this return with the prepri	arer shown above? (see instruc	tions)		Phone	no.		e DNo			
IVIC	v 1110 11	war wated St	a una reconstitue de OFACE	arer allowii aurove (ISBB IIISTITIC	111 11 1961					o i i Nio			

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2013)

Cat. No. 11282Y

	0 (2013) Page 2
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 conjunction with Florida State Standards and administered by volunteers and staff members. The programs 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?
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O. 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.
4 a	(Code) (Expenses \$ 56,374 including grants of \$) (Revenue \$ 18,600) 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 2500 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, photosynthesis and many more. This past year a Lake County Water Authority Minigrant enabled the Center to create two entirely new water-related curriculums. For many children this is their first experience in a natural outdoor classroom.
4b	(Code) (Expenses \$ 14,901 including grants of \$) (Revenue \$ 8500) 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.
4c	(Code:
-	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 2,700 adults/families participated in these various programs this past year. Some of the programs included logging and land management, Florida turtles, Greenscaping for Wildlife, Innovative Waste Management, geo caching and many others.
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

80,534

4e Total program service expenses ▶

Part	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	\	
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,	<u> </u>		├ `
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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.	4.74.7	37	- इंस्
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
c	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	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
	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		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	3 · · · · · · · · · · · · · · · · · · ·	14a		✓
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		✓
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		20a		7
b		20b		Ľ

Part	Checklist of Required Schedules (continued)			ugu .
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		√
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		√
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		√
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		✓
c b	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 24c		√
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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		√ ✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		✓
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		√
29 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	29		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30		√
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		√
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		√
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		√
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
Ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		\
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			,
38	Part VI	37		√
	10. Hotel Fall Colling of the required to complete obligable O	38 For	n 990	(2013)
		1 011		(EU 10)

² art	· · · · · · · · · · · · · · · · · · ·			
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a			İ
þ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
_	reportable gaming (gambling) winnings to prize winners?	1c		/
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			İ
	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	✓	
	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		✓
Ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		✓
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	1		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			١.
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country:			ŀ
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		✓
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or			١.
_	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			ļ
	and services provided to the payor?	7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		✓
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	_		
		7c		/
d	If "Yes," indicate the number of Forms 8282 filed during the year	- <u>-</u>		ر
e	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		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		✓
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			, -
_	organization, have excess business holdings at any time during the year?	8		✓
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?			,
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		V
10	Section 501(c)(7) organizations. Enter:	90		_
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:	1 1		
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			İ
	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		
ь Б	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			-
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
. О	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.	-54		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	1 1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14h		

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	See ins	for a	"No" ions.
Secti	on A. Governing Body and Management		T	
19	Enter the number of voting members of the governing body at the end of the tax year 1a 12		Yes	No
la	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		 	
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	ļ		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets?. Did the organization have members or stockholders?	5	1	✓
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?	7a	1	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	1	·
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a b	The governing body?	8a 8b	✓	_
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		√
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode.))
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10a		✓
11a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		<u> </u>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	-	
12a b	Did the organization have a written conflict of interest policy? <i>If "No,"</i> go to line 13	12a		1
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		1
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons compensation of the deliberation of the del	14		√
а	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15a		1
b	Other officers or key employees of the organization	15b		1
16a	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?	16a		1
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?	1Ch		
Secti	on C. Disclosure	16b	<u> </u>	Ь
17 18	List the states with which a copy of this Form 990 is required to be filed ► Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	າ 501(c)(3)s	only)
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of integration in the statements available to the public during the tax year.	erest	policy	/, and
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: ▶	of the)	

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PAGE	

Form		

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,	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 no	or any relate	d org	<u>aniz</u> a			ompe	nsa	ted any currer	t officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any	liverage box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Joan Bryant President	8	1		✓				-0-	-0-	-0
(2) Ronald Macfarlane Treasurer	77	1		✓				-0-	-0-	-0
(3) Joan Nelson Secretary	3	1		1			1	-0-	-0-	-0
(4) Donna Kelley Vice President	4	1		✓				-0-	-0-	-0
(5) Bernie Yokel Director	2	1		·				-0-	-0-	
(6) Joe Hill Director	3	1		· ·	-					
(7) Margie LaRoe Director	2	<i>'</i>		· •				-0-	-0-	
(8) Morris Pelham Director	6	· /		<u> </u>				-0-	-0-	-0
(9) Horace Thompson Director	4	v		<u>·</u>			<u> </u>	-0-	-0-	
(10) Sharon Hillebrandt Director	3	<u>,</u>		· •					-0-	
(11) JoAnn Ryan Director	5	1	$ \cdot $	<u>`</u>				-0-	-0-	-0
(12) Jim Rafferty Director	4	1		<u>·</u>				-0-	-0-	
(13) Lavon Silverman Naturalist/Admin Director	42	•		•		1		-0-	-0-	0
(14)			\Box			<u> </u>	\vdash	49,179		

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
		(C)												
	(A)	(B)	(B) Position (do not check more than o			nne	(D)	(E)) (F)					
	Name and title	Average	Average box, unless per			rson	is both	n an	Reportable	Reportable			nated	
		hours per week (list any		er and		irect	or/trust	<u> </u>	compensation	compensation related	from		unt of her	
		hours for	우콥	inst	Officer	<u>\$</u>	ag 등	Former	the	organization	ns		ensatio	n
		related	l in Maria	1	<u>E</u>	91	ples) m	organization	(W-2/1099-MI		fror	n the	
		organizations below dotted	호트	100		Key employee	8 6	`	(W-2/1099-MISC)				ization elated	
		line)	Individual trustee or director	7		ye 8	# #						zation	
			ee	Institutional trustee			Highest compensated employee							
		i		6			Ē							
(15)														
		1	1											
(16)								\vdash						
32		†	1					1						
(17)		<u> </u>						\vdash						
X/		 	1											
(18)					 		 -	t						
X-157		† 	1					1						
(19)		 								· · · · · · ·				
1.07		†	1			1								
(20)					_	-		⊢	-					
320)		 	ł		t	ļ		ŀ			-			
(21)			 	H	-	-		-	 					
(21)		 	1											
(00)		<u> </u>		\vdash				H						
(22)			1											
(00)				<u> </u>		-		<u> </u>						
(23)			-	1										
45.43				<u> </u>	ļ	ļ		ļ	ļ .					
(24)			1		İ						}			
				L.				<u> </u>						
(25)			1	1										
							L	<u> </u>						
1b	Sub-total			-	•				49,179					
C	Total from continuation sheets to Part	•		•										
d	Total (add lines 1b and 1c)	<u></u>		. •				•	49,179					
2	Total number of individuals (including but	t not limited	d to th	ose	list	ted	above	e) w	ho received m	ore than \$10	0,000 c	of		
	reportable compensation from the organ	zation ►												
									<u> </u>				Yes	No
3	Did the organization list any former of	ficer, direc	tor, c	or tr	rust	ee,	key 6	emp	oloyee, or high	est comper	sated			
	employee on line 1a? If "Yes," complete	Schedule J	for s	uch	ind	ıvıdı	ual					3		√
4	For any individual listed on line 1a, is the	sum of re	porta	ble (con	npei	nsatio	n a	ind other comp	ensation fro	m the			
	organization and related organizations	greater th	an \$1	150,	,000	? /:	f "Ye	s, "	complete Sch	edule J for	such			
	ındıvıdual											4		1
5	Did any person listed on line 1a receive of	r accrue co	ompe	nsat	tion	fro	m any	/ un	related organiz	ation or indi	vidual			
	for services rendered to the organization											5		1
Section	on B. Independent Contractors	_												
1	Complete this table for your five highest	compensat	ed in	den	end	ent	contr	act	ors that receive	ed more than	\$100.0	200 of		
	compensation from the organization. Rep													ax
	year.								,					
	(A)							Г	(B)			(C)		
	Name and business add	Iress							(B) Description of s	ervices	Co	ompens	ation	
								-		· 				
								\vdash	 -					
								 		<u></u>				
								-						
								<u> </u>	·					
	T-4-1							<u> </u>						
2	Total number of independent contractor							o th	nose listed abo	ove) who				
	received more than \$100,000 of compen	sauon from	me o	ryar	ııza	แดบ							. gan	

Part	VIII	Statement of Revenue						
		Check if Schedule O cor	ntains a resp	onse or note to			<u></u>	<u> </u>
1				•	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts ts	1a	Federated campaigns .	1a	-0-				
E 전	ь	Membership dues	1b	10,885				
e È	С	Fundraising events		10,961				
# F	d	Related organizations .		-0-				
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants (contribu	— — — — — — — — — — — — — — — — — — —	91,390				
	f	All other contributions, gifts,			•	:		
E E		and similar amounts not include		24,982		į		
وَ قِ	g	Noncash contributions included in	lines 1a-1f: \$					
a Co	ň	Total. Add lines 1a-1f.			138,218			,
				Business Code	100,210			
Ē	2a							
æ	b	*						· · · · · · · · · · · · · · · · · · ·
8	c							
<u>S</u>	d					• • • • • • • • • • • • • • • • • • • •	 	
S E	e							···
Program Service Revenue	f	All other program service		90009	760			
Š	g	Total. Add lines 2a-2f.			760			
	3	Investment income (incl			760	·		
		and other similar amounts	•		2173			
	4	Income from investment of t	-	-	21/3			
	5			· ·				
		rioyanies	(i) Real	(ii) Personal				
	6a	Gross rents	1170					
	b	Less. rental expenses	1170					
	c	Rental income or (loss)			ļ			
	ď	Net rental income or (loss)		•	1170			
	7a	\ <u></u>	i) Securities	(ii) Other	1170			
	'"	assets other than inventory	,	(1) 5 11 15				į
	ь	Less: cost or other basis						
	_	and sales expenses .						
	c	Gain or (loss)			i			
	ď	Net gain or (loss)	l					
	,	ret gain or (1033)						
ne	8a	Gross income from fundra	aisına	Ì				
e		events (not including \$						
)ther Revenue		of contributions reported or	n line 1c)					
٦٢	ļ		· · · a					
the	h	Less: direct expenses .	-,					
0		Net income or (loss) from	· L	events .				
		Gross income from gaming					<u> </u>	
	-	See Part IV, line 19			ŀ			
	ь	Less: direct expenses .	- 1					
	c	Net income or (loss) from		/ities ▶				
	-	Gross sales of invent						
			· · · a	82	1			
	ь	Less: cost of goods sold		35	j			
		Net income or (loss) from				~ ·		
	⊢ٽ	Miscellaneous Reveni		Business Code	47		7	
	11a				··· -		\	
	b							
	c		·	······································				
	d	All other revenue	·			-		
	e	Total. Add lines 11a-11d			-0-			-
	12	Total revenue. See instru			-0- 142 368			
					IA/ SERI			

	<u> </u>				Fage 10
	IX Statement of Functional Expenses				
Sectio	on 501(c)(3) and 501(c)(4) organizations must con			s must complete co	lumn (A)
	Check if Schedule O contains a respon			<u> </u>	
	nt include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	-0-			
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	-0-			
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	-0-			
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	-0- 49,179	34,425	12,295	2459
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	-0-	34,423	12,200	
7 8	Other salaries and wages	15,539 3500	13,985	777 525	777
9	Other employee benefits	1197	1077	60	523
10	Payroll taxes	4984	4486	249	249
11	Fees for services (non-employees):				
а	Management	-0-			
b	Legal				
C	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f g	Investment management fees				
12	Advertising and promotion	1657	828		828
13	Office expenses	2430	1944	243	243
14	Information technology	-0-		210	
15	Royalties	-0-			
16	Occupancy	14032	10,103	1964	1965
17	Travel	-0-			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance	3824	2677	1147	-0-
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Environmental Education	822	622		
b	Volunteer Luncheon	202	822 202	<u> </u>	···
c	Program Expense	279	279		
ď	Workman's Compensation	600	2/3	600	
e	All other expenses	7256	7256	<u> </u>	 -
25	Total functional expenses. Add lines 1 through 24e	105,501	80,534	17,860	7107
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 following SOP 98-2 (ASC 958-720)				

Р	art 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	3745	1	13,818
	2	Savings and temporary cash investments	247,612	2	271,848
	3	Pledges and grants receivable, net	-0-	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		5	
	6	Loans and other receivables from other disqualified persons (as defined under section	<u> </u>		
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
	İ	sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
ţ		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b	300,134	10c	302,131
	11	Investments—publicly traded securities	36,633	11	41,877
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	588,124	16	629,674
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
es	22	Loans and other payables to current and former officers, directors,			
≣		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	870	25	954
	26	Total liabilities. Add lines 17 through 25	870	26	954
S		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			
92		complete lines 27 through 29, and lines 33 and 34.			
lar	27	Unrestricted net assets		27	
B	28	Temporanly restricted net assets		28	
2	29	Permanently restricted net assets		29	
Ī		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and			
ō		complete lines 30 through 34.		_	·
ets	30	Capital stock or trust principal, or current funds		30	
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	· · · · · · · · · · · · · · · · · · ·
Net Assets or Fund Balance	32	Retained earnings, endowment, accumulated income, or other funds .		32	
ž	33	Total net assets or fund balances	588,124	33	629,674
	34	Total liabilities and net assets/fund balances	587,254	34	628,720

orm 99	90 (2013)			P	age 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				. П
1	Total revenue (must equal Part VIII, column (A), line 12)	1			42,368
2	Total expenses (must equal Part IX, column (A), line 25)	2			05,501
3	Revenue less expenses. Subtract line 2 from line 1	3			36,687
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		•	88,124
5	Net unrealized gains (losses) on investments	5			
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		6:	24,991
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				_ 🗆
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," exp	olain i	n		
	Schedule O.				
2a	The state of the s			ļ	✓
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	iled o	r		
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis			-	
b			2b_	-	/
	If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	a on a	a		
_	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov of the audit, review, or compilation of its financial statements and selection of an independent account				١,
				-	 √
	If the organization changed either its oversight process or selection process during the tax year, existence of the control of	piain II			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth II	n	· · · · · ·	

If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

За

Form **990** (2013)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

20**13**

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

Open to Public Inspection

Hame	or the organization						1.	anproyer ic	ciidiicado	ii iidiiibei	
Trout	Lake Nature Center									39878	
Pai	rt I Reason fe	or Public Chai	rity Status (All orga	nization	s must c	omplete	this pai	rt.) See i	nstruction	ons.	
The o	organization is not	a private founda	tion because it is (Fo	r lines 1 t	hrough 1	1, check	only one	box.)			
1	A church, conv	ention of church	nes, or association of	churches	describe	ed in sec	tion 170((b)(1)(A)(i).		
2	A school desci	nbed in section	170(b)(1)(A)(ii). (Attac	h Sched	ule E.)						
3	A hospital or a	cooperative hos	spital service organiza	ation desc	cribed in s	section 1	70(b)(1)(A)(iii).			
4											
•	hospital's nam	e, city, and state	e:								
5	5 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	6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7	7 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.)										
8	☐ A community t	rust described in	n section 170(b)(1)(A)	(vi). (Cor	nplete Pa	ırt II.)					
9											
10	☐ An organizatio	n organized and	operated exclusively	to test fo	r public s	safetv. Se	e sectio	n 509(a)(4).		
11											
	a 🗌 Typel	b 🔲 Type	II c 🗌 Type III	-Functio	nally inte	arated	d □	Type III-N	Non-func	tionally integ	rated
e f	other than fou or section 509	ndation manage (a)(2).	that the organization ers and other than one a written determination	e or more	publicly	support	ed organ	izations o	described	I in section 5	509(a)(1)
•	_								, 0,,		·
9		17, 2006, has ti	he organization accep						•		. Ш
	(i) A person v	vho directly or i	ndirectly controls, eithody of the supported o								s No
			on described in (i) abo	-						11g(ii)	
		· · · · · · · · · · · · · · · · · · ·	a person described in								-
h	• •	•	on about the support	, .						11g(m)	
				, , , , , , , , , , , , , , , , , , , 				T		l	
(1)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) lis	organization sted in your document?	the organ	ou notify nization in of your port?	organizat (i) organi	Is the tion in col. zed in the S.?	(vii) Amount of suppo	
	•			Yes	No	Yes	No	Yes	No	1	
(A)			,				·				
(B)											
(C)											
(D)											
(E)											
					1	1		l			

instructions .

Part		ations Descr	ibed in Secti	ons 170(b)(1)(A)(iv) and 1	70(b)(1)(A)(vi)
	(Complete only if you checked the Part III. If the organization fails to	ne box on line	5, 7, or 8 of	Part I or if the	e organizatioi	n failed to qua	alify under
Secti	on A. Public Support	y quality unde	ine tests ne	ited belevi, pi	case comple	ite i ait iii.j	·
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and	(27 2 2 2 2	(5) 2515	(0) 2011	(-) 25 (2	(0) 2010	(i) rota
	membership fees received. (Do not			1			
	include any "unusual grants.")	104,698	92,682	115,985	115,562	138,218	567,145
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	104,698	92,682	115,985	115,562	138,218	567,145
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 Secti	Public support. Subtract line 5 from line 4. on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	104,698	92,682	115,985	115,562	138,218	
8	Gross income from interest, dividends,	104,036	32,002	113,363	113,362	130,210	567,145
•	payments received on securities loans,						
	rents, royalties and income from similar						
	sources	1600	3647	2477	3410	3343	14,477
9	Net income from unrelated business					33.3	
	activities, whether or not the business						
	is regularly carned on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets		:				
	(Explain in Part IV.)	19,770	23,273	7731	2901	10,961	64,636
11	Total support. Add lines 7 through 10						646,258
12 13	Gross receipts from related activities, etc.					12	501(.)(0)
13	First five years. If the Form 990 is for the organization, check this box and stop here.						
Secti	on C. Computation of Public Suppor			<u>· · · · · · </u>	· · · · ·	• • • • •	· · • <u> </u>
14	Public support percentage for 2013 (line 6			1 column (f)		14	88 %
15	Public support percentage from 2012 Sch					15	88
	331/3% support test—2013. If the organiz						
	box and stop here. The organization qual						
b	331/3% support test-2012. 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 organi	zation qualifie:	s as a publicly	supported org	anization .		
17a	10%-facts-and-circumstances test = 20	013. If the orga	inization did no	ot check a box	on line 13, 16	a, or 16b, and I	ine 14 is
	10% or more, and if the organization me	ets the "facts-a	and-circumsta	nces" test, che	ck this box an	d stop here. E	xplain in
	Part IV how the organization meets the "f						
	organization						. ▶ 🛚
b	10%-facts-and-circumstances test-20						
	15 is 10% or more, and if the organizat	tion meets the	"facts-and-ci	rcumstances"	test, check th	is box and sto	op here.
	Explain in Part IV how the organization m	eets the "facts	s-and-circumst	tances" test. T	he organization	n qualifies as a	publicly
18	supported organization						

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

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

Secti	on A. Public Support						**-
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the		•				
3	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513	<u> </u>					
4	Tax revenues levied for the		!				
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities		1				
	furnished by a governmental unit to the organization without charge		ļ				
6	Total. Add lines 1 through 5				-		
	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000				Ì		
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from]		
Cooti	on B. Total Support		L		1	l	L
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	(a) 2009	(6) 2010	(6) 2011	(0) 2012	(e) 2013	(i) Total
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .		1				
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
14	loss from the sale of capital assets						
	(Explain in Part IV.)		•				
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop he	_	n's first, secon		-		
Secti	on C. Computation of Public Suppor	t Percentag	e				
15	Public support percentage for 2013 (line 8			3, column (f))		15	%
16	Public support percentage from 2012 Sch			<u></u>	<u> </u>	16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2013 (17	<u>%</u>
18	Investment income percentage from 2012					18	%
19a	331/a% support tests—2013. If the organ						
_	17 is not more than 33½%, check this box 33½% support tests—2012. If the organiz						
b	line 18 is not more than 331/3%, check this l						
20	Private foundation. If the organization di	· ·	•	•			
	The second of the organization of		23/ 3/1 11/0 17	, , , , , , , , , , , , , , , , , , , ,	51.55K 1113 DOX	and occ motio	J.10110 P

	Part 990 or 990-EZ) 2013	ge 4
Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; an Part III, line 12. Also complete this part for any additional information. (See instructions).	
Pat II Line	D There were no sales of capital assets in 2013.	
Part II Line	17a or b The Box on 16a was checked.	
		
		-
	, 	

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.

► Attach to Form 990.

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

OMB No 1545-0047 2013

Open to Public Inspection Employer identification number

	ent of the Treasury	► Information about Schedul	► Attach to Form 990. • D (Form 990) and its instructions is at www.	v irs anvlf	om990	Open to Public Inspection
	Revenue Service of the organization	- information about ochedul	o D (1 OTH) 390) and its instructions is at www			ation number
	Γ LAKE NATURE	CENTED INC				
Par		•	r Advised Funds or Other Similar Fu	inds or		9-3039878 hts
			ered "Yes" to Form 990, Part IV, line 6			
			(a) Donor advised funds		(b) Funds a	and other accounts
1	Total number a	at end of year				
2	Aggregate con	tnbutions to (during year).				
3	Aggregate grai	nts from (during year)				
4		ue at end of year				
5			donor advisors in writing that the assets			
			t to the organization's exclusive legal con			
6			nors, and donor advisors in writing that gr			
	conformed imp	able purposes and not for the	benefit of the donor or donor advisor, or	r for any	otner pu	rpose
Dari		rvation Easements.	<u> </u>			☐ Yes ☐ No
rar			ered "Yes" to Form 990, Part IV, line 7	7		
1			by the organization (check all that apply).	•		
•			recreation or education) Preservation	of an his	torically i	mportant land area
	_	of natural habitat	☐ Preservation			
	Preservation	n of open space				
2			tion held a qualified conservation contribu	tion in the	e form of	a conservation
		he last day of the tax year.			Hel	d at the End of the Tax Year
а	Total number of	of conservation easements .			2a	
b	•	•	ements	, , , , , , , , , , , , , , , , , , ,	2b	
c			tified historic structure included in (a)		2c	
d		inservation easements includi ire listed in the National Regist	ed in (c) acquired after 8/17/06, and no er			
3			I, transferred, released, extinguished, or te		2d	raanization during the
•	tax year ►	iservation easements modified	, transferred, released, extinguished, or te	ariiii aleu	by the c	organization during the
4		tes where property subject to	conservation easement is located ▶			
5			cy regarding the periodic monitoring, ii	nspection	, handlı	ng of
			ion easements it holds?			
6	Staff and volur	nteer hours devoted to monitor	ring, inspecting, and enforcing conservation	on easem	ents dun	
	>					
7		enses incurred in monitoring,	inspecting, and enforcing conservation ea	sements	during th	ne year
_	\$.		_		
8			on line 2(d) above satisfy the requirements			·· · · ·
_	••					. ∐ Yes ∐ No
9			ports conservation easements in its reven- text of the footnote to the organization's			
		accounting for conservation e		in idi ioldi i	statemer	no triat describes trie
Part	-		ctions of Art, Historical Treasures,	or Other	Simila	r Assets.
			ered "Yes" to Form 990, Part IV, line 8			
1a	If the organiza	tion elected, as permitted und	ler SFAS 116 (ASC 958), not to report in	ıts revenu	ue staten	nent and balance sheet
	works of art, I	historical treasures, or other	similar assets held for public exhibition,	education	n, or res	earch in furtherance of
			f the footnote to its financial statements the			
b			der SFAS 116 (ASC 958), to report in it			
		nistorical treasures, or other sprovide the following amounts	similar assets held for public exhibition,	education	n, or res	earch in furtherance of
			•		_	•
	(ii) Assets usel	ided in Form 990, Part VIII,	line 1		. >	Ф
2	If the organiza	ation received or held works	of art, historical treasures, or other simil	 Iar accoto	. ► for fina	Design and provide the
-	following amou	unts required to be reported un	nder SFAS 116 (ASC 958) relating to these	e items:	, 101 11118	moiai gain, provide the
a			81		. •	\$
h	Assets include	d in Form 990. Part Y		· · ·		*

						•
Schedu	le D (Form 990) 2013					D 2
Pari		Collections of	Art Historical 7	reasures or O	ther Similar Acc	Page 2
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and oth	ner records, chec	k any of the follo	wing that are a sign	inificant use of its
а	☐ Public exhibition		d 🗌 Loan	or exchange prog	ırams	
b	Scholarly research		e 🗌 Othe		·····	
С	☐ Preservation for future generations	3	–			
4	Provide a description of the organizat XIII.		nd explain how t	hey further the org	ganization's exem	pt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather	solicit or receive than to be mainta	donations of art, ined as part of the	historical treasure e organization's co	es, or other similar	Yes No
Part	IV Escrow and Custodial Arra	ingements.				
	Complete if the organization 990, Part X, line 21.				·	
1a	Is the organization an agent, trustee, included on Form 990, Part X?	custodian or oth	er intermediary fo	or contributions o	r other assets not	☐ Yes ☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	te the following ta	able:		
					Arr	nount
C	Beginning balance			<u>1</u> 0		
d	Additions during the year			10	d .	
e	Distributions during the year				•	
f	Ending balance				f	
2a	Did the organization include an amour					☐ Yes ☐ No
b	If "Yes," explain the arrangement in Pa	art XIII. Check here	of the explanation	n has been provid	ed in Part XIII .	<u> </u>
Par	t V Endowment Funds.					-
	Complete if the organization					
	_	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	40,751	36,879	35,099	31,377	27,197
þ	Contributions					
С	Net investment earnings, gains, and					
_	losses	2370	2319	2478	3722	875
d	Grants or scholarships					
8	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance	46,428	40,751			31,317
2	Provide the estimated percentage of the		d balance (line 1g	, column (a)) held	as:	
а	Board designated or quasi-endowmer	nt ▶	_%			
b	Permanent endowment	%				
С	Temporarily restricted endowment ▶	%				
	The percentages in lines 2a, 2b, and 2					
3a	Are there endowment funds not in the	e possession of the	e organization tha	at are held and ad	lministered for the	·
	organization by					Yes No
	(i) unrelated organizations					3a(i) ✓
_	(ii) related organizations					3a(ii) ✓
b	If "Yes" to 3a(II), are the related organi					3b
4	Describe in Part XIII the intended uses		n's endowment f	unds.		
Part			. .			
	Complete if the organization				See Form 990, P	art X, line 10.
	Description of property	(a) Cost or oth	1,1,		Accumulated epreciation	(d) Book value

70,000 70,000 Buildings 215,621 215,621 Leasehold improvements 9658 9658 Equipment . . . 5580 5580 Other . . 1271 1271 Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 302,130

Part VII	Investments-Other Securitie					
	Complete if the organization an	swered "Yes" to For	m 990	, Part IV, line	11b. See Form	990, Part X, line 12.
	(a) Description of security or catego (including name of security)	ory	(10)	Book value		hod of valuation -of-year market value
(1) Financial	denvatives					
. ,	eld equity interests		L			
(3) Other			<u> </u>			
(A)			↓			
(B)		***************************************				
(C)			├		·	
(D) (E)			├		 	·
(F)			 			
(G)		**************************************	 			
(H)			 			
	b) must equal Form 990, Part X, col (B) line 12)	>	┼			
Part VIII	Investments—Program Relate		Ц			
	Complete if the organization an		m 990	. Part IV. line	11c. See Form	990. Part X. line 13.
	(a) Description of investment			Book value	(c) Me	thod of valuation of-year market value
_(1)						
(2)						
_(3)			<u> </u>		·	
(4)			.			
_(5)			ļ			
_(6)			.			
						
(8)		····································	├			
Total (Column (b) must equal Form 990, Part X, col. (B) line 13)	· · · · · · · · · · · · · · · · · · ·	 			
Part IX	Other Assets.		1			
Tartix	Complete if the organization an	swered "Yes" to For	m 990	. Part IV line	11d. See Form	990. Part X. line 15
	<u> </u>	(a) Description		,		(b) Book value
(1)						
(2)						
(3)						
(4)						
_(5)						
_(6)						
_(7)					. 	
(8)						
(9)	mn (b) must equal Form 990, Part X,	col (R) line 15.)				
Part X	Other Liabilities.	COI. (B) IIIIe 15.)	<u>· · · · · </u>	· · · · · ·	<u> ▶</u>	L
Partx	Complete if the organization an line 25.	swered "Yes" to For	m 990	, Part IV, line	11e or 11f. See	Form 990, Part X,
1.	(a) Description of liability	(b) Book value			·	
(1) Federal in		<u> </u>	953			
(2)		· · · · · · · · · · · · · · · · · · ·				
(3)						
(4)						
(5)						
(6)						,
(7)						
(8)]			
(9)]			
	b) must equal Form 990, Part X, col (B) line 25)		1			
Z. LIADINTY to	r uncertain tax positions. In Part XIII, pro s liability for uncertain tax positions und	ovide the text of the foots	note to t	ne organization	s financial stateme	ents that reports the
organization	a mapping for uncertain tax positions and	E 1114 40 (MSC /40). Ch	eck ner	en me text of th	ie iooulote nas bet	en provided in Part XIII

Part	XI	Reconciliation of Revenue per Audited Financial Stateme Complete if the organization answered "Yes" to Form 990, F			Retu	m.
1	Total	revenue, gains, and other support per audited financial statements				
2		nts included on line 1 but not on Form 990, Part VIII, line 12:	• •		1	· · · · · · · · · · · · · · · · · ·
		•	0-	ĺ		
a		nrealized gains on investments	2a			
b		ed services and use of facilities	2b			
C		veries of prior year grants	2c			
đ		(Describe in Part XIII.)	2d			
е		nes 2a through 2d			2e	
3		act line 2e from line 1	· -		3	
4		nts included on Form 990, Part VIII, line 12, but not on line 1:				
a		ment expenses not included on Form 990, Part VIII, line 7b	4a			
b		(Describe in Part XIII.)	4b			
c		nes 4a and 4b			4c	
5		revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	
Part	XII	Reconciliation of Expenses per Audited Financial Statem			er Ref	:urn.
		Complete if the organization answered "Yes" to Form 990, F	art I	/, line 12a.		
1		expenses and losses per audited financial statements			1	
2	Amou	nts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donat	ed services and use of facilities	2a			
b	Prior y	year adjustments	2b			
C	Other	losses	2c			
d	Other	(Describe in Part XIII.)	2d]	
e	Add I	nes 2a through 2d			2e	
3	Subtra	act line 2e from line 1			3	<u> </u>
4	Amou	nts included on Form 990, Part IX, line 25, but not on line 1				
а	Invest	ment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other	(Describe in Part XIII.)	4b		i	
c	Add li	nes 4a and 4b			4c	
5	Total	expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)		5	
Part	XIII	Supplemental Information.				
Provid	le the c	lescriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	14; P	art IV, lines 1b and 2b	; Part	V, line 4; Part X, line
2; Parl	t XI, lin	es 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to pro	ovide any additional in	forma	tion.
PART!	III We h	ave no art or historical treasures. However, as part of our environmenta	l edu	cation program, we hav	e enu	merable mounted
						
specin	nens of	birds, animals, fish and mammals. While these creatures are irreplaced	ble ir	most cases, the cost of	of repla	acıng them is only
relevar	nt to ha	ving a taxidermist prepare the new specimen for mounting. The specim	ens t	hemselves have been o	lonate	d once the creature
		Y				
died.						
PART	V - It is	intended that certain percentage of the assets be used to aid with opera	atina d	costs of the Nature Cen	ter. H	owever, the Board
decide	d to ce	ase that practive ntil the Fund grows to a more meaningful level.				
PART :	X - Not	applicable.				
PART	XI, XII a	nd XIII - As a relatively small organization with limted financial resource	s, the	Board feels that an ex	pendit	ure for a full
audit is	s not a	wise use of operating funds at this time. We have taken one step which	s to e	ngage the services, on	a volu	ınteer basis, of
a perso	on form	ally employed by an accounting firm to prepare our financial reports in	conju	nction with our Treasu	rer.	
		••••				
						·

Schedule D (For	rm 990) 2013	Page 5
Part XIII	Supplemental Information (continued)	

····		
	•••••••••••••••••••••••••••••••••••••••	
	•	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

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

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

TROUT LAKE NATURE CENTER INC. 59-3039878 SCHEDUE B There was no need for this schedule, since no individual made a contribution of \$5,000 or more in 2013. 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 form was completed by the Treasurer, it was presented at the next Board meeting for review by all of the members present at the meeting. Discussion leading to corrections will be made prior to submitting 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 minutes are usually kept of any meeting of a committee.

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization	Employer identification number
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·····	

