Form **990**

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.

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

Open to Public Inspection

Α	For th	e 2013 calen	ar year, or tax year begin	ıning		, 201	l3, and	l endin	g				
В	Check if	applicable:	C Name of organization LEA	GUE OF A	MERICAN	WHEEL	MEN,	INC	•	D Emplo	yer identi	fication Number	
	Add	dress change	Doing Business As LEA	GUE OF A	MERICAN	BICYC	LIST	S		36-	62062	225	
	\vdash	me change	Number and street (or P.O. box					Room/s	uite	E Teleph	one numb	er	
	\vdash	ial return	1612 K STREET, N	1101				308		(20	21 81	22-1333	
	\vdash		City or town, state or province,		r foreign postal	code		1500		120	2) 02	22 1333	
	H	rminated					~ ^^		0004	<u> </u>		¢ 0 (10 4(0	
		ended return	Washington			De	3 20	006-	Z8Z4 H(a) is this a			\$ 2,610,468.	×Νο
	Ap	plication pending	F Name and address of principal					1	• •	•			
			Andrew D. Clark 1612 K				DC 200	06-2824	H(b) Are all: If 'No,' a	subordinates attach a list. (see Instru	? YesYes	No
1	Tax-e	exempt status	X 501(c)(3) 501(c) () ▼ (ins	sert no.)	4947(a)(1)	Of	527			_		
J	Web	osite: 🛌 ww	v.bikeleague.org						H(c) Group	exemption nu	ımber 🏲		
K	Form	of organization:	X Corporation Trust	Association	Other ►		L Year o	of formatio	n: 196!	5 M :	State of le	gal domicile: DC	
Pa	rt I	Summar	1	•									
			the organization's mission	n or most signi	ificant activi	ties:	TO P	ROMO'	re and	PROTE	CT T	HE RIGHTS	
4			LISTS, ADVOCATE										
ĕ			SKILLS EDUCATION								 S		
띹			SPORTATION.										
Activities & Governance		Check this bo		discontinued	its operation	ns or dispo	sed of	more th	nan 25% o	of its net a	ssets.		
~ 영	3	Number of vo	ng members of the govern								3		15
જ	4	Number of inc	ependent voting members	of the governir	ng body (Pa	rt VI, line 1	b)				4		15
<u>اٽ</u> ڌ.	5	Total number	of individuals employed in o	alendar year :	2013 (Part \	/, line 2a) .					5		23
Ę.	6	Total number	of volunteers (estimate if ne	ecessary)							6		0
쥑			I business revenue from Pa								7a	19,5	<u>40.</u>
	b	Net unrelated	ousiness taxable income fr	om Form 990-	T, line 34						7b		88.
										rior Year		Current Year	
ا ب	8	Contributions	and grants (Part VIII, line 1	h)					2	,168,6	574.	2,162,25	59.
Revenue	9	Program serv	ce revenue (Part VIII, line 2	g)						426,6	531.	397,53	35.
ş	10	Investment in	ome (Part VIII, column (A),	lines 3, 4, and	d 7d)					12,6	524.	11,15	57.
œ	11	Other revenue	(Part VIII, column (A), line:	s 5, 6d, 8c, 9c	, 10c, and 1	1e)				14,9	963.	-16,24	47.
	12	Total revenue	- add lines 8 through 11 (i	must equal Pa	rt VIII, colur	nn (A), line	12) .		2	,622,8	392.	2,554,70	04.
\neg	13	Grants and si	nilar amounts paid (Part IX	, column (A), li	ines 1-3) .							22,85	50.
			o or for members (Part IX,										
		-	compensation, employee							,177,2	219.	1,296,4	70.
Expenses			indraising fees (Part IX, co							, , -			
ĕ													
윘			ng expenses (Part IX, colui					<u>593.</u>					
_		,	s (Part IX, column (A), line							,159,8		1,441,18	
	18	Total expense	s. Add lines 13-17 (must ed	qual Part IX, co	olumn (A), li	ne 25)			2	337,0)37.	2,760,50	09.
	19	Revenue less	expenses. Subtract line 18	from line 12						285,8	355.	-205,80	05.
8 6						,			Beginnit	ng of Curre	nt Year	End of Year	
Net Assets Fund Baken	20	Total assets (Part X, line 16)						1	,378,6	591.	1,253,65	55.
Ϋ́	21	Total liabilities	(Part X, line 26)							193,6	587.	236,24	46.
žŽ	22	Net assets or	und balances. Subtract line	e 21 from line	20				1	,185,0	004.	1,017,40	09.
Da	rt II	Signatui								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
				including accomp	anvina schedule	es and statema	nts and	to the hes	t of my know	ledge and be	lief it is tr	ue correct and	
comp	tete. De	claration of prepar	ere that I have examined this return r (other than officer) is based on all	information of which	th preparer has	any knowledge	9 .	(0 510 50.	it of fifty miles.	acego cino oc			
									[,			
Sig	n	Signatu	e of officer						Da				
Hei	re re	1	July Ulle:							Nove	nser	14 2014	
	•	Type or	print name and title.									1	
			eparer's name	Preparer's signa	ature /		Dat	te		Check	if	PTIN	
			_	Tei			- 1		11 1	۱ ۱	!"		
Pai		Jerry		.' // _ /	1 / / <i>(</i> -		1 + 1	L/13/	14	self-employ	eu	P00105650	
	pare		Kronzek, Fis		bez, YL	гС							
US	e Onl	Firm's addre		et, NE						Firm's EIN		-1864182	
			Washington				002-4	4909		Phone no.	(202		
Man	the IE	od discuss thi	return with the preparer sh	noun ahova?	lead instruct	ionel						. X Yes	No

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Х X 2 Х 3 Χ 4 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 . Х 5 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, Х Χ 7 8 Χ 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 Χ 9 X 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D. Parts VI, VII, VIII, IX, 11 or X as applicable. a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule Χ 11a Х 11b Χ 11 c 11 d Χ Χ 11 e e 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 . . . X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Χ 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and Χ if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional 12 b Х 13 Х 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, X 14b Χ 15 X 16 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) Х 17 18 Χ 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' 19 Χ complete Schedule G, Part III. Х 20 20 b

Form 990 (2013) LEAGUE OF AMERICAN WHEELMEN, INC.

Part IV Checklist of Required Schedules (continued)

NUMBER OF STREET			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23	Х	
24 a	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		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
c	Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
k	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
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	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
k	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Χ_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33	<u>-</u>	Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ŀ	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		Х
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		Х
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

13 a

14 a 14b X

Page 5 Form 990 (2013) LEAGUE OF AMERICAN WHEELMEN, INC. 36-6206225 Part V Statements Regarding Other IRS Filings and Tax Compliance No Yes 1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . 1a 60 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming Х 1 c (gambling) winnings to prize winners? 2 a 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 X 2 b b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 a Х 3 b 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х 4 a financial account in a foreign country (such as a bank account, securities account, or other financial account)? **b** If 'Yes.' enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Х 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b 5 c 6 a 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? Х вa b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were 6 h Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and Х 7 a 7 b b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Х 7 c d If 'Yes,' indicate the number of Forms 8282 filed during the year Χ e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e X 7 f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.... g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7 h 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 Sponsoring organizations maintaining donor advised funds. 9 a 9 h b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12. b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)............ 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers.

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.

b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans

LOHII	1990 (2013) LEAGUE OF AMERICAN WHEELMEN, INC. 50-6206225		1 6	190 V
Par	Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes i Schedule O. See instructions.	n		
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
	r a	`	Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
	Enter the number of voting members included in line 1a, above, who are independent			
2	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?	2		X
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		Х
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7 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?	7 a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or other persons other than the governing body?	7 b	estimovania 3	X
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8 a	X	
	Each committee with authority to act on behalf of the governing body?	8 b	Х	
	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		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10 a		<u>X</u>
	of Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<u> </u>	1
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		T	
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	Х	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a		<u>X</u>
b	Other officers of key employees of the organization	15b	30000000000000000000000000000000000000	X
16 a	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			
b	taxable entity during the year?	16 a		X
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
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 (501(c)(3)s only) available			
	inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O)	•		
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available the public during the tax year.	le to		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	n:		
		02) 8:	22-1	333
				2013)

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3	n-	n/	w	r) /.	7.	

Form 990 (2013)	LEAGUE	OF	AMERICAN	WHEELMEN.	TNC

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

Independent Contractors	· ¬
Observation Controlled Constant of the controlled Contr	- 1

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

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

- 1 a 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 r	nor any rela	ated o	rgan	izati	on c	omper	nsate	ed any current officer, o	director, or trustee.	
				(C	;)					
(A) Name and Title	(B) Average hours per week (list	one bo	x, unl cer an	ess p	erson	more tha is both : /trustee)	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	any hours for related organiza- tions below dotted line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) HANS VAN NAERSSEN	1.00									
CRAIR (01/01/13 - 03/03/13); MEMOER 03/04/13 - 05/01/13)		Х		Х				0.	0.	0.
(2) GAIL SPANN	1.00									_
MEXASER (01/01/13 - 03/03/13); CZAIR (03/03/13 - 12/31/13)		X		<u>X</u>				0.	0.	0.
(3) TIM YOUNG	1.00									
VICE CHAIR (01/01/13 - 03/03/13)	4 00	X		<u>X</u>				0.	0.	0.
(4) JOHN SIEMIATKOSKI	1.00	.,		,,				0	^	0
YEXEER (01/01/13 - 03/03/13); VICE CEAR (03/03/13 - 12/31/		Х	H	Х				0.	0.	0.
(5) HARRY BRULL	1.00	v		Х				0.	0.	0.
(0)/01/13 - 03/03/13; MASER (03/03/13 - 12/31/13	1.00	X		_A				0.	<u> </u>	
SECRETARY (03/03/13 - 12/31/13)	- 1.00	Х		Х				0.	0.	0.
(7) ERIC_SWANSON	1.00	Λ	H	Λ				0.		0.
TREASURER	_ = .00	Х		Х				. 0.	0.	0.
(8) GARY BRUSTIN	1.00		\vdash					· ·	0.1	
MEMBER (01/01/13 - 03/03/13)		Х						0.	0.	0.
(9) STEVE DURRANT	1.00									
MEMBER		Х						0.	0.	0.
(10) JAY FERM	1.00									
MEMBER (03/01/13 - 12/31/13)		Х						0.	0.	0.
(11) JENNIFER GREY FOX	1.00									,
MEMBER		Х						0.	0.	0.
(12) ALISON HILL GRAVES	1.00									
MEMBER		Х						0.	0.	0.
(13) TANIA LO	1.00									
MEMBER (03/03/13 - 12/31/13)		X						0.	0.	0.
(14) DAVID MADSON	_1.00									
MEMBER		X						0.	0.	0.

Part VII Section A. Officers, Directors, Trus		Cey	En			es,	and	d Highest Con	pensated Emp	loyees (continued)
(A) Name end title	Average hours per	Вoх.	, unle	heck ss pe	ition more	than o s both or/trust	an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week (list any hours for related organiza - tions below dotted line)		_			Highest compensated employee		the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15) MATT MOORE MEMBER	1.00	Х						0.	0.	0.
(16) MIKE NIX MEMBER (01/01/13 - 03/03/13)	1.00	х						0.	0.	0.
(17) NICOLE PRESTON MEMBER (03/01/13 - 12/31/13)	1.00	1—						0.	0.	0.
(18) CORINNE WINTER MEMBER	1.00	Х						0.	0.	0.
(19) ANN MACK MEMBER (06/24/13 - 12/31/13)	1.00	х						0.	0.	0.
(20) ANDREW D_CLARKE PRESIDENT	40.00			Х				168,225.	0.	10,652.
(21) JAKOB M WOLF-BARNETT CHIEF OPERATING OFFICER	40.00			х				79,964.	0.	6,028.
(22)										
(23)										
(24)										
(25)										
1 b Sub-total	΄			• •	• •	, ,	▶	248,189.	0.	16,680.
d Total (add lines 1b and 1c)							>	248,189.	0.	16,680.
2 Total number of individuals (including but not limited to from the organization ► 1	o those	listed	labo	ove)	who	rece	eive	d more than \$100,0	000 of reportable co	mpensation
3 Did the organization list any former officer, director, on line 1a? If 'Yes,' complete Schedule J for such ind. 4 For any individual listed on line 1a, is the sum of repo	ividual				٠.	• •		. , ,	nployee 	Yes No
4 For any individual listed on line 1a, is the sum of reporting the organization and related organizations greater the such individual	in \$150,	0007	If 'Y	es'	com	plete	Scl	hedule J for		. 4 X
5 Did any person listed on line 1a receive or accrue cor for services rendered to the organization? If 'Yes,' con Section B. Independent Contractors	npensati <i>mplete S</i>	on fr ched	om a lule :	any <i>J for</i>	unre r <i>suc</i>	lated h pe	l org	ganization or individual	dual	. 5 X
Complete this table for your five highest compensated compensation from the organization. Report compensation.	d indepersation for	nden r the	t coi cale	ntrad	ctors r yea	that ar en	rec ding	eived more than \$	100,000 of organization's tax ye	ear.
(A) Name and business addres	s							(B) Description of) if services	(C) Compensation
						'				,
2 Total number of independent contractors (including b \$100,000 of compensation from the organization	ut not lin	nited	to th	nose	liste	ed ab	ove) who received mo	re than	

Part VIII Statement of Revenue (A) Total revenue (D) (C) (B) Unrelated Related or Revenue exempt business excluded from tax function revenue under sections revenue 512-514 1 a Federated campaigns PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS. 19,327 b Membership dues 1 b 616,016 1 c c Fundraising events d Related organizations 1 d 1e e Government grants (contributions) . . f All other contributions, gifts, grants, and similar amounts not included above . . 526,916 g Noncash contributions included in lines 1a-1f: \$ 51,500 h Total. Add lines 1a-1f 2,162,259 **Business Code** 2a PROGRAM & RALLIES ____ 900099 377,995 377,995 541800 b PUBLICATIONS_____ 19,540 n 19,540 f All other program service revenue . . . 397,535. Investment income (including dividends, interest and 11,157 11,1<u>57.</u> Income from investment of tax-exempt bond proceeds . . . Royalties...... (i) Real (II) Personal 6a Gross rents b Less: rental expenses c Rental income or (loss) . . (ii) Other (i) Securities 7 a Gross amount from sales of assets other than inventory. b Less: cost or other basis and sales expenses . . . c Gain or (loss) 8 a Gross income from fundraising events OTHER REVENUE (not including . . \$ of contributions reported on line 1c). See Part IV, line 18. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19. b Less; direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 39,517 b Less: cost of goods sold 55,764. c Net income or (loss) from sales of inventory -16,247-16,247Miscellaneous Revenue **Business Code** 11 a d All other revenue.....

2,554,704.

361,748.

19,540

Part IX Statement of Functional Expenses

	Check if Schedule O contains a re-				
Do i 6b,	not Include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	and organizations in the United States. See Part IV, line 21	22,850.	22,850.		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	275,031.	177,997.	84,398.	12,636.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	868,971.	782,955.	53,550.	32,466.
8	Pension plan accruals and contributions				
•	(include section 401(k) and 403(b) employer contributions).	10,704.	9,124.	1,153.	427.
9	Other employee benefits	59,239.	53,987.	3,069.	2,183.
10	Payroll taxes	82,525.	69,569.	9,701.	3,255 <u>.</u>
11	, , ,				
	a Management				
ı	b Legal	16,311.	0.	16,311.	0.
	Accounting	39,380.	0.	39,380.	0.
•	d Lobbying				
•	e Professional fundraising services. See Part IV, line 17				
	Investment management fees				
_	Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) Advertising and promotion	404,836.	392,739.	3,002.	9,095.
13	Office expenses	377,517.	257,192.	93,810.	26,515.
14	Information technology	30,624.	0,	30,624.	0.
15	Royalties	50,024.	V •	30,021.	
16	Occupancy	94,149.	0.	94,149.	0.
17	Travel	163,066.	128,955.	23,215.	10,896.
18		103,000.	120,300.	20/210.	
19	Conferences, conventions, and meetings	214,614.	213,101.	1,513.	0.
20	Interest	919.	0.	919.	0.
21	Payments to affiliates		***		
22	Depreciation, depletion, and amortization	17,283.	0.	17,283.	0.
23	Insurance	10,298.	0.	10,298.	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.)				
:	DUES & SUBSCRIPTIONS	69,141.	58,069.	9,476.	1,596.
	OTHER TAXES	3,051.	0.	3,051.	0
	COST ALLOCATION	0.	417,202.	-436,726.	19,524.
	d		•		
	e All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,760,509.	2,583,740.	58,176.	118,593.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				
BAA		TECA0110 11/			Form 990 (2013)

Part X Balance Sheet

(B) (A) Beginning of year End of year 1 72,654. 269,607. 2 1,128. 2 11,691. 474,192 3 397,039. 4 90,910. 0. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part il of Schedule L 5 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 7 8 Prepaid expenses and deferred charges q 13,905 Land, buildings, and equipment: cost or other basis.
Complete Part VI of Schedule D 10 a 10 a 204,287 b Less: accumulated depreciation 10b 10 c 174,598. 27,045 29,689. 11 551,319 11 561,986. Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 43,720. 14 Other assets. See Part IV, line 11 15 15 32,061 32,061. 16 1,378,691 16 1,253,655. 17 134,356 17 147<u>,427.</u> 18 Grants payable........... 18 85,254. 19 19 52,795 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, 22 23 24 3,565. 24 6,536 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 . . . 25 25 26 236,246 Total liabilities. Add lines 17 through 25....... 193,687 26 Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets............ 896,504 27 516,475. 288,500 28 500,934. 28 29 29 Q Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34. 30 30 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 1,185,004 1,017,409. 33 1,378,691 34 1,253,655. 34 BAA Form 990 (2013)

Forn	n 990 (2013) LEAGUE OF AMERICAN WHEELMEN, INC. 36	-6206	225		Page 12
Pai	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	-	2	<u>2,554</u>	704.
2	Total expenses (must equal Part IX, column (A), line 25)		2	<u>2,760</u>	<u>,509.</u>
3	Revenue less expenses. Subtract line 2 from line 1			-205	805.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		1	L <u>,185</u>	5,004.
5	Net unrealized gains (losses) on investments			38	3,210.
6	Donated services and use of facilities				
7	Investment expenses				
8	Prior period adjustments				
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	1	017	7,409.
Pai	t XII Financial Statements and Reporting	110		<u> </u>	, 100.
2.08.21					Г
	Check if Schedule O contains a response or note to any line in this Part XII	• • • •	• • • •		es No
4	Accounting method used to prepare the Form 990: Cash X Accrual Other			- ''	53 NO
1	Accounting method used to prepare the Porn 990.	<u> </u>			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 a	a Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on separate basis, consolidated basis, or both:	а			
	Separate basis Consolidated basis Both consolidated and separate basis				
	Were the organization's financial statements audited by an independent accountant?			2 b	x
•	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate				
	basis, consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the at review, or compilation of its financial statements and selection of an independent accountant?	ıdit,		2 c	х
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
3 8	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Singl Audit Act and OMB Circular A-133?	e 		3 a	Х
ı	of '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			3 b	
BAA			F	orm 99	90 (2013)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047

2013

Open to Public Inspection

Employer identification number

Schedule A (Form 990 or 990-EZ) 2013

LEAGUE OF AMERICAN WHEELMEN, INC. 36-6206225 Part Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 4 name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 9 An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or 11 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. Type III - Non-functionally integrated Type III - Functionally integrated Type II ď Type I C By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) 11 g (i) below, the governing body of the supported organization? 11 g (ii) A 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organization(s). h (ili) Type of organization (described on lines 1-9 above or IRC section (see Instructions)) (iv) is the organization in column (i) listed in your governing (v) Did you notify the organization in column (i) of your support? (vi) Is the organization in column (i) organized in the (II) EIN (vli) Amount of monetary (i) Name of supported organization document? Yes Yes No Yes No No (B) (C) (D) (E)

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

36-6206225

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

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

Sec	tion A. Public Support						
begiı	ndar year (or fiscal year nning 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.')	1,653,810.	1,772,941.	1,923,979.	2,168,674.	2,162,259.	9,681,663.
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	1,653,810.	1,772,941.	1,923,979.	2,168,674.	2,162,259.	9,681,663.
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						
6	shown on line 11, column (f) Public support. Subtract line 5						3,564,952.
0	from line 4				76 - 200		6,116,711.
	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	1,653,810.	1,772,941.	1,923,979.	2,168,674.	2,162,259.	9,681,663.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	13,511.	13,927.	12,543.	12,624.	11,157.	63,762.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	6,289.	7,685.	19,975.	8,749.	88.	42,786.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0.	2,487.	5,250.	1,000.	0.	8,737.
11	Total support. Add lines 7 through 10						9,796,948.
12	Gross receipts from related activiti	es, etc (see instru	ctions)			12	1,901,504.
13	First five years. If the Form 990 is organization, check this box and s	s for the organization top here	on's first, second, t	hird, fourth, or fifth	tax year as a sect	ion 501(c)(3)	▶ 🗍
Sec	tion C. Computation of Pu	blic Support F	^P ercentage		***************************************		
14	Public support percentage for 201	3 (line 6, column (f) divided by line 11	I, column (f))		14	62.43 %
	Public support percentage from 20						57.35 %
16 a	33-1/3% support test $-$ 2013. If and stop here. The organization of	the organization di Jualifies as a public	d not check the bo dy supported organ	x on line 13, and the state of	ne line 14 is 33-1/3	% or more, check	this box · · · · · · ► X
b	33-1/3% support test — 2012. If t and stop here. The organization of	he organization dic qualifies as a publi	I not check a box o cly supported orga	on line 13 or 16a, a nization	and line 15 is 33-1/	3% or more, check	this box ▶
17 a	10%-facts-and-circumstances te or more, and if the organization method organization meets the 'facts-a	anta tha faata and	airaumatanaaai ta	si ahaali ihia hay c	and atom have Evr	dain in Dart IV how	
	10%-facts-and-circumstances to or more, and if the organization morganization meets the 'facts-and-	eets the 'facts-and- circumstances' tes	-circumstances' tes t. The organizatior	st, check this box a n qualifies as a pub	and stop here. Exp dicly supported org	olain in Part IV how janization	the
18	Private foundation. If the organiz	ation did not check	c a box on line 13,	16a, 16b, 17a, or 1	17b, check this box	and see instructio	ns ▶ [

36-6206225

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.)

<u>Sec</u>	tion A. Public Support							
Calen	dar year (or fiscal yr 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 organization's tax-exempt purpose							
3	Gross receipts from activities							
•	that are not an unrelated trade							
	or business under section 513							
4	Tax revenues levied for the organization's benefit and							
	either paid to or expended on							
_	its behalf							
5	The value of services or facilities furnished by a			i I				
	governmental unit to the							
	organization without charge.							
	Total. Add lines 1 through 5							
7 a	Amounts included on lines 1,							
	2, and 3 received from disqualified persons							
h	Amounts included on lines 2							
	and 3 received from other than							
	disqualified persons that							
	exceed the greater of \$5,000 or 1% of the amount on line 13							
	for the year							
c	Add lines 7a and 7b							
8	Public support (Subtract line							
	7c from line 6.)							····
Sec	tion B. Total Support	1		T	T			
	tion B. Total Support dar year (or fiscal yr beginning in) >	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
Calen 9	dar year (or fiscal yr beginning in) Amounts from line 6	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
Calen 9	dar year (or fiscal yr beginning in) Amounts from line 6 Gross income from interest,	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
Calen 9	dar year (or fiscal yr beginning in) Amounts from line 6 Gross income from interest, dividends, payments received	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
Calen 9	dar year (or fiscal yr beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
Calen 9 10 a	dar year (or fiscal yr beginning in) Amounts from line 6	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
Calen 9 10 a	dar year (or fiscal yr beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
Calen 9 10 a	dar year (or fiscal yr beginning in) Amounts from line 6	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
Calen 9 10 a	dar year (or fiscal yr beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
Calen 9 10 a	dar year (or fiscal yr beginning in) Amounts from line 6	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
Calen 9 10 a b	dar year (or fiscal yr beginning in) Amounts from line 6	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
Calen 9 10 a b	dar year (or fiscal yr beginning in) Amounts from line 6	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
Calen 9 10 a b	dar year (or fiscal yr beginning in) Amounts from line 6	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
Calen 9 10 a b	dar year (or fiscal yr beginning in) Amounts from line 6	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
Calen 9 10 a b	dar year (or fiscal yr beginning in) Amounts from line 6	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
Calen 9 10 a b	dar year (or fiscal yr beginning in) Amounts from line 6	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
Calen 9 10 a b	dar year (or fiscal yr beginning in) Amounts from line 6	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
Calen 9 10 a b	dar year (or fiscal yr beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total Support. (Add los 9,10c. 11 and 12) First five years. If the Form 990 is	s for the organizati	on's first, second,	third, fourth, or fifth	tax year as a sec	ion 501(c)(3)		
Calen 9 10 a b c 11	dar year (or fiscal yr beginning in) Amounts from line 6	s for the organizati	on's first, second,	third, fourth, or fifth	tax year as a sec	ion 501(c)(3)		
Calen 9 10 a b c 11 12 13 14 Sec	dar year (or fiscal yr beginning in) Amounts from line 6	s for the organization hereblic Support P	on's first, second,	third, fourth, or fifth	tax year as a sect	ion 501(c)(3)		
Calen 9 10 a b c 11 12 13 14 Sec 15	dar year (or fiscal yr beginning in) Amounts from line 6	s for the organization top here blic Support P	on's first, second,	third, fourth, or fifth	tax year as a sect	ion 501(c)(3)	15	▶
Calen 9 10 a b 11 12 13 14 Sec 15 16	dar year (or fiscal yr beginning in) Amounts from line 6	s for the organization top here blic Support P 3 (line 8, column (f	on's first, second, ercentage divided by line 13 art III, line 15	third, fourth, or fifth	tax year as a sect	ion 501(c)(3)		
Calen 9 10 a b 11 12 13 14 Sec 15 16 Sec	dar year (or fiscal yr beginning in) Amounts from line 6	s for the organization top here	on's first, second, one centage of divided by line 13 art III, line 15	third, fourth, or fifth	tax year as a sect	ion 501(c)(3)	15	► □
Calen 9 10 a b 11 12 13 14 Sec 15 16 Sec	dar year (or fiscal yr beginning in) Amounts from line 6	s for the organization hereblic Support P 3 (line 8, column (for the column of the	on's first, second, 'ercentage) divided by line 13 art III, line 15 ne Percentag	third, fourth, or fifth	tax year as a sect	ion 501(c)(3)	15 16	▶ □
Calen 9 10 a b 11 12 13 14 Sec 17 18	dar year (or fiscal yr beginning in) Amounts from line 6	s for the organization hereblic Support P 3 (line 8, column (f 012 Schedule A, Parestment Incore) 2013 (line 10c, column 2012 Schedule A)	on's first, second, crecentage) divided by line 13 art III, line 15 ne Percentag lumn (f) divided by	third, fourth, or fifth	tax year as a sect	ion 501(c)(3)	15 16 17 18	▶ □ 8 9 9 9 9
Calen 9 10 a b 11 12 13 14 Sec 17 18	dar year (or fiscal yr beginning in) Amounts from line 6	s for the organization hereblic Support P 3 (line 8, column (f 012 Schedule A, Parestment Incore) 2013 (line 10c, column 2012 Schedule A)	on's first, second, crecentage) divided by line 13 art III, line 15 ne Percentag lumn (f) divided by	third, fourth, or fifth	tax year as a sect	ion 501(c)(3)	15 16 17 18	▶ □ 8 9 9 9 9
Calen 9 10 a b c 11 12 13 14 Sec 17 18 19 a	dar year (or fiscal yr beginning in) Amounts from line 6	s for the organization top here blic Support P 3 (line 8, column (f 012 Schedule A, Pa restment Incor 2013 (line 10c, co m 2012 Schedule the organization d his box and stop h	on's first, second, ercentage divided by line 13 art III, line 15 me Percentag lumn (f) divided by A, Part III, line 17 id not check the bere. The organiza	third, fourth, or fifth	h tax year as a section of the secti	ion 501(c)(3) n 33-1/3%, and organization more than 33-	15 16 17 18 d line 17	► □

Schedule A (Form 990 or 990-EZ) 2013

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF
► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Name of the organization		Employer Identification number
LEAGUE OF AMERICAN WHEELMEN,	INC.	36-6206225
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a p	rivate foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a privat	e foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Ge	neral Rule or a Special Rule .	
Note. Only a section 501(c)(7), (8), or (10) organ	nization can check boxes for both the General Rule and a Speci	al Rule. See instructions.
General Rule For an organization filing Form 990, 990-EZ contributor. (Complete Parts I and II.)	, or 990-PF that received, during the year, \$5,000 or more (in m	oney or property) from any one
Special Rules		
509(a)(1) and 170(b)(1)(A)(vi) and received	orm 990 or 990-EZ that met the 33-1/3% support test of the regu from any one contributor, during the year, a contribution of the g /III, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
For a section 501(c)(7), (8), or (10) organizatotal contributions of more than \$1,000 for u the prevention of cruelty to children or anima	ition filing Form 990 or 990-EZ that received from any one contr se <i>exclusively</i> for religious, charitable, scientific, literary, or educ als. Complete Parts I, II, and III.	butor, during the year, cational purposes, or
└──' contributions for use exclusively for religious If this box is checked, enter here the total co purpose. Do not complete any of the parts u	ation filing Form 990 or 990-EZ that received from any one contribe, charitable, etc, purposes, but these contributions did not total ontributions that were received during the year for an exclusively inless the General Rule applies to this organization because it r.,000 or more during the year	to more than \$1,000. religious, charitable, etc, received nonexclusively
990-PF) but it must answer 'No' on Part IV, line	the General Rule and/or the Special Rules does not file Schedu 2, of its Form 990; or check the box on line H of its Form 990-E filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF	Z or on its Form 990-PF,
BAA For Paperwork Reduction Act Notice, s or 990-PF.	ee the Instructions for Form 990, 990EZ, Schedule I	B (Form 990, 990-EZ, or 990-PF) (2013)

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

2013

Onen to Bubli

Department of the Treasury Internal Revenue Service

(6)

► Complete If the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ► 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

Open to Public Inspection

• Section 501(c) (other than sec	s: Complete Parts I-A and B. Do not complete tion 501(c)(3)) organizations: Complete Parts I		t complete Part I-B.	
 Section 527 organizations: Co If the organization answered 'Yes 	mplete Part I-A only. s,' to Form 990, Part IV, line 4, or Form 990-	EZ, Part VI, line 47 (L	obbying Activities), the	en
 Section 501(c)(3) organization 	s that have filed Form 5768 (election under sec	ction 501(h)): Complete	Part II-A. Do not comple	ete Part II-B.
 Section 501(c)(3) organization Part II-A. 	s that have NOT filed Form 5768 (election und	er section 501(h)): Cor	nplete Part II-B. Do not c	omplete
-	s,' to Form 990, Part IV, line 5 (Proxy Tax) o	r Form 990-EZ, Part \	/, line 35c (Proxy Tax),	then
• Section 501(c)(4), (5), or (6) o	ganizations: Complete Part III.		Employer identifica	
Name of organization				
LEAGUE OF AMERICAN W	HEELMEN, INC. organization is exempt under section	on 501/o) or is a	36-620622	5 Zation
				Zationi
	organization's direct and indirect political camp			13 -
A	organization is exempt under secti			
	ise tax incurred by the organization under secti		▶ \$	
	ise tax incurred by organization managers und			
	section 4955 tax, did it file Form 4720 for this			
b If 'Yes,' describe in Part IV.				
	organization is exempt under secti	on 501(c) . excen	t section 501(c)(3).	
	pended by the filing organization for section 52			
•	organization's funds contributed to other orga			
function activities				
line 17b	ditures. Add lines 1 and 2. Enter here and on F			
	Form 1120-POL for this year?			
organization made navment	and employer identification number (EIN) of al s. For each organization listed, enter the amou ons received that were promptly and directly de I action committee (PAC). If additional space is	nt naid from the filing c	rdanization's tunds. Also	enter the
(a) Name	(b) Address	(o) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If
				none, enter -0
(1)				
(2)				
(3)				
(4)				
(5)				

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

Schedule C (Form 990 or 990-EZ) 2013

Part II-A Complete if		n is exempt under se		filed Form 5768 /e	lection under
section 501		i is exempt under se	ction sorte)(s) and	inted Form 5700 (e	
A Check ► I if the filin	g organization belong	gs to an affiliated group (and	l list in Part IV each affilia	ated group member's nan	ne,
address,	EIN, expenses, and	share of excess lobbying ex	penditures).		
B Check ► if the filin	g organization check	ed box A and 'limited contro	l' provisions apply.		
(The term	Limits on Lobbyi 'expenditures' mea	ng Expenditures ns amounts pald or incurr	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	res to influence publi	c opinion (grass roots lobbyi	ng)	0.	
b Total lobbying expenditu	res to influence a leg	slative body (direct lobbying))	5,5 <u>5</u> 0.	
	•	1b)		5,550.	
d Other exempt purpose ex	xpenditures		• • • • • • • • • • •	2,754,959.	
e Total exempt purpose ex	spenditures (add lines	1c and 1d)		2,760,509.	
f Lobbying nontaxable am both columns	ount. Enter the amou	nt from the following table in	1	288,025.	
If the amount on line 1e, col	umn (a) or (b) is:	The lobbying nontaxable	amount is:		s.Deans a pas
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the excess			
Over \$1,000,000 but not over	\$1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000.		
Over \$1,500,000 but not over :	\$17,000,000	\$225,000 plus 5% of the excess	over \$1,500,000.		
Over \$17,000,000		\$1,000,000.			
g Grassroots nontaxable a	mount (enter 25% of	line 1f)		72,006.	
h Subtract line 1g from line	e 1a. If zero or less, e	nter -0		0.	
i Subtract line 1f from line	1c. If zero or less, er	ter -0		0.	
j If there is an amount other	er than zero on eithei	line 1h or line 1i, did the or	ganization file Form 4720	reporting	<u> </u>
section 4911 tax for this	year?			* * * * * * * * * * * * * * * * * * *	Yes No
/Som		I-Year Averaging Period U t made a section 501(h) el		omplete all of the five	
		s below. See the instructi			
	Lobb	ying Expenditures During	4-Year Averaging Perio	od	
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2 a Lobbying non-taxable amount	264,11	9. 255,090.	266,852.	288,025.	1,074,086.
b Lobbying ceiling amount (150% of line 2a, column (e))					1,611,129.
c Total lobbying expenditures	2,12	7. 7,642.	2,696.	5,550.	. 18,015.
d Grassroots nontaxable amount	66,03	0. 63,773.	66,713.	72,006.	268,522.
e Grassroots ceiling amount (150% of line 2d, column (e)) · · · ·					402,783.
f Grassroots lobbying expenditures		0. 0.	0.	0.	0.
BAA				Schedule C (Forn	1 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013 LEAGUE OF AMERICAN WHEELMEN, INC.	36	-620	6225 Page 3
Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	Γ file	d For	m 5768
Formula Manifester and the lines of through dishelate provide in Port IV a datailed description	(8)	(b)
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Amount
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)?			
f Grants to other organizations for lobbying purposes?			
i Other activities?			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 d if the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	(c)(5)	. or	
section 501(c)(6).		,	Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			
Part III-B Complete If the organization is exempt under section 501(c)(4), section 501 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) I answered 'Yes.'	(c)(5)	, or s	section 501(c)
1 Dues, assessments and similar amounts from members		1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
a Current year	 	2 a 2 b	
c Total		2 c	
 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess 		3	
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4	
5 Taxable amount of lobbying and political expenditures (see instructions)		5	
Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); P Part II-B, line 1. Also, complete this part for any additional information.			
			

Schedule of Found and of Andrew Carlot OF AMERICAN MHERTMEN, INC.	36-6206225	Page 4
Schedule C (Form 990 or 990 EZ) 2013 LEAGUE OF AMERICAN WHEELMEN, INC. Part IV Supplemental Information (continued)		
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~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		

# **SCHEDULE D** (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

2013

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

m990. Open to Public Inspection

Employer Identification number

LEA	AGUE OF AMERICAN WHEELMEN, INC.	36-6206225
Par	Organizations Maintaining Donor Advised Funds or Other Similar	Funds or Accounts.
	Complete if the organization answered 'Yes' to Form 990, Part IV, line	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor are the organization's property, subject to the organization's exclusive legal control?	or advised funds
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds for charitable purposes and not for the benefit of the donor or donor advisor, or for any other primpermissible private benefit?	urpose conferring
Da.	t II Conservation Easements.	
	Complete if the organization answered 'Yes' to Form 990, Part IV, line	7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
•		on of an historically important land area
		on of a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the last day of the tax year.	ne form of a conservation easement on the
		Held at the End of the Tax Year
	a Total number of conservation easements	
ì	b Total acreage restricted by conservation easements	2 b
•	c Number of conservation easements on a certified historic structure included in (a) $ \dots  \dots $	2c
•	d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	
3	Number of conservation easements modified, transferred, released, extinguished, or terminate tax year ►	d by the organization during the
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, hand	dling of violations,
	and enforcement of the conservation easements it holds?	<del>-</del> -
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easen	nents during the year
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements  \$\Bar{\sigma}\$\$	s during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of sec and section 170(h)(4)(B)(ii)?	tion 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and include, if applicable, the text of the footnote to the organization's financial statements that desconservation easements.	
Par	Organizations Maintaining Collections of Art, Historical Treasures Complete if the organization answered 'Yes' to Form 990, Part IV, line	, or Other Similar Assets. 8.
1 a	a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenuant, historical treasures, or other similar assets held for public exhibition, education, or research in Part XIII, the text of the footnote to its financial statements that describes these items.	re statement and balance sheet works of hin furtherance of public service, provide,
ł	b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue st historical treasures, or other similar assets held for public exhibition, education, or research in following amounts relating to these items:	furtherance of public service, provide the
	(i) Revenues included in Form 990, Part VIII, line 1	<b>⊳</b> \$
	(ii) Assets included in Form 990, Part X	
	If the organization received or held works of art, historical treasures, or other similar assets for amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	financial gain, provide the following
	a Revenues included in Form 990, Part VIII, line 1	
	b Assets included in Form 990, Part X	

Schedule D (Form 990) 2013 LEAG	JE OF AMERICA	N WHEELMEN,	INC.	36-620			Page 2
Part III Organizations Mainta	ining Collection	s of Art, Histor	ical Treasures, o	Other Similar Ass	ets (c	<u>ontinu</u>	ed)
3 Using the organization's acquisition items (check all that apply):	n, accession, and othe	er records, check ar	ny of the following that a	are a significant use of its	collecti	on	
a Public exhibition		d Loan or	exchange programs				
b Scholarly research		e Other					
c Preservation for future genera	tions	<del></del>					
4 Provide a description of the organi Part XIII.	zation's collections an	d explain how they	further the organization	n's exempt purpose in			
5 During the year, did the organization to be sold to raise funds rather than	n to be maintained as	part of the organiza	ation's collection?		Yes		No
Part IV Escrow and Custodia line 9, or reported an a	I Arrangements. mount on Form 9	Complete if the 90, Part X, line	e organization ansv 21.	vered 'Yes' to Form	990, F	art IV	,
1 a Is the organization an agent, truste on Form 990, Part X?					Yes		No
<b>b</b> If 'Yes,' explain the arrangement in	Part XIII and complet	te the following tabl	e:				
					Amount		
c Beginning balance							
d Additions during the year							
e Distributions during the year							
f Ending balance			<i></i>	. 1f			
2 a Did the organization include an am	nount on Form 990, Pa	art X, line 21?			Yes		No
b If 'Yes,' explain the arrangement in	n Part XIII. Check here	if the explantion ha	s been provided in Par	t XIII		· · · [	
Part V Endowment Funds. C	complete if the ord	anization answ	ered 'Yes' to Form	990, Part IV, line 10	),		
Social Section Control of the Contro	(a) Current year	(b) Prior year	(c) Two years back			our years	back
1 a Beginning of year balance	(a) con on just	(4)		(-)	1	, , , , , , , , , , , , , , , , , , ,	
b Contributions							
c Net investment earnings, gains, and losses							
d Grants or scholarships					<del></del>		
e Other expenditures for facilities					1	••	
and programs					<del>                                     </del>		
f Administrative expenses					+		
g End of year balance	4.11		7 33 1 11	į	<u> </u>		
2 Provide the estimated percentage			column (a)) held as:				
a Board designated or quasi-endow	**************************************						
b Permanent endowment	<del></del> 8	•					
c Temporarily restricted endowment							
The percentages in lines 2a, 2b, a	nd 2c should equal 10	0%.					
3 a Are there endowment funds not in organization by:	•					Yes	No
(i) unrelated organizations					3a(i)		
(ii) related organizations					. 3a(ii)		
b If 'Yes' to 3a(ii), are the related org	anizations listed as re	quired on Schedule	R?		. 3b		
4 Describe in Part XIII the intended to	uses of the organization	n's endowment fun	ds.				
Part VI Land, Buildings, and	Equipment.						
Complete if the organiz	zation answered "	Yes' to Form 99	0, Part IV, line 11a	. See Form 990, Pa	rt X, lir	ne 10.	
Description of property	(a) Cos	t or other basis	(b) Cost or other	(c) Accumulated	(d) F	3ook va	lue
	(ir	vestment)	basis (other)	depreciation			
1a Land						***	
b Buildings	<del> </del>						
c Leasehold improvements	<del></del>						
d Equipment	-		166,861.	143,627.			<u>,234.</u>
e Other			37,426.	30,971.			<u>455.</u>
Total Add lines 1a through 1e (Column	(d) must squal Form	990 Part X column	(B) line 10(c) }			29	689

BAA

Schedule **D** (Form 990) 2013

Complete if the organization answered "  (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-y	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
<u>(E)</u>			
(F)			
(G)			
<u>(H)</u>			
(1)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)  Part VIII Investments — Program Related.	<u> </u>	The state of the s	
Complete if the organization answered "	Yes' to Form 990,	Part IV, line 11c. See Form 990, Pa	rt X, line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of	
(1)	_		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			· · · · · · · · · · · · · · · · · · ·
(9)		•	
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) . > Part IX Other Assets.			
Complete if the organization answered "	Yes' to Form 990,	Part IV, line 11d. See Form 990, Pa	art X, line 15.
	scription		(b) Book value
(1)			
(2)			
(3)			,
(4) (5)	11.411		
(6)	usun		
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B),	ine 15.)		
Part X Other Liabilities.  Complete if the organization answered 'Yes' to Fe	orm 000 Dart IV ling	11a or 11f Saa Form 990 Part Y lina 25	
(a) Description of liability	(b) Book valu		
(1) Federal income taxes	, , ,		
(2)			
(3)			
(4)		Log the emontone of course on while duties	
(5)			
(6)			
(7) (8)			on a favoreschool of
(9)			
(10)			
(11)			
			CONTRACTOR AND AND THE AND
	<b>•</b>		
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the foot tax positions under FIN 48 (ASC 740). Check here if the text of the footnote	note to the organization's fi		

BAA

Schedule D (Form 990) 2013 LEAGUE OF AMERICAN WHEELMEN, INC.	6-6206225	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	leturn.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	. 1 2,	<u>,648,678.</u>
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments	<u>.</u>	
b Donated services and use of facilities	_  *	
c Recoveries of prior year grants	_	
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d		93,974.
3 Subtract line 2e from line 1	. 3 2	<u>,554,704.</u>
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	_	
b Other (Describe in Part XIII.)	_	
c Add lines 4a and 4b		
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		<u>,554,704.</u>
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	r Keturn.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		,
1 Total expenses and losses per audited financial statements	· 1 2	<u>,816,273.</u>
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities	_	
b Prior year adjustments	_	
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d		55,764.
3 Subtract line 2e from line 1	3 2	<u>,760,509.</u>
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	-	
c Add lines 4a and 4b	4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<del> </del>	,760,509.
Part XIII Supplemental Information.		,
Provide the descriptions required for Part II, lines 3, 5, and 9: Part III, lines 1a and 4: Part IV, lines 1b and 2b; Part V.		
ine 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 additi	onal information.	
Pt X Line 2THE_ORGANIZATION_FOLLOWS_THE_AUTHORITATIVE		
LC V TIME S THE ORDUITAVITOR LORDON O THE ROLL WITTEN		<del></del>
Pt X Line 2GUIDANCE RELATING TO ACCOUNTING FOR UNCERTAINTY IN		
ICTVTTTTTCTTTTTTTTTTTTTTTTTTTTTTTTTTTTT		
Pt X Line 2 INCOME TAXES INCLUDED IN FASB ASC 740-10, INCOME		
1 C V DIIC V		
Pt X Line 2TAXES.		
**************************************		
Pt X Line 2 THESE PROVISIONS PROVIDE CONSISTENT GUIDANCE FOR		
Pt_X_Line_2THE_ACCOUNTING_FOR_UNCERTAINTY_IN_INCOME_TAXES		

Schedule D (Form 990) 2013

Pt X Line 2 RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND

Pt X Line 2 PRESCRIBE A THRESHOLD OF "MORE LIKELY THAN NOT" FOR

	3 LEAGUE OF AMERICAN WHEELMEN, INC.	36-6206225	Page 5
Part XIII   Supplemen	ntal Information (continued)		
Pt X Line 2	RECOGNITION AND DERECOGNITION OF TAX POSITIONS TA	AKEN	
Pt X Line 2	OR EXPECTED BE TAKEN IN A TAX RETURN. THE ORGANI	ZATION	
Pt_X_Line_2	PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITION	<u> 15</u>	
Pt_X_Line_2	FOR THE YEAR ENDED DECEMBER 31, 2013, AND DETERMINE	INED	
Pt X Line 2	THAT THERE WERE NO MATTERS THAT WOULD REQUIRE		
Pt X Line 2	RECOGNITION IN THE FINANCIAL STATEMENTS OR WHICH		
Pt X Line 2	MAY HAVE ANY EFFECT ON ITS TAX EXEMPT STATUS. AS	6 OF	
Pt X Line 2	DECEMBER 31, 2013, THE STATUTE OF LIMITATIONS FOR	R TAX	
Pt X Line 2	YEARS 2010 THROUGH 2012 REMAINS OPEN WITH FEDERAL	<u>-</u>	
Pt X Line 2	AND DC AUTHORITIES.		
Pt_XI_Line_2d	COST OF MERCHANDISE SOLD		
Pt_XII_Line_2d	COST OF MERCHANDISE SOLD		
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SCHEDULE	Form 990)
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Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ➤ Attach to Form 990.

2013

OMB No. 1545-0047

Open to Public Inspection

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

Employer identification number 36-6206225

		Ž	
5		X Yes	
36-6206225		of the grants or assistance, the grantees' eligibility for the grants or assistance, and	
36			
		ance, and	
		ts or assist	
		or the gran	
		eligibility f	
		ne grantees	ted States.
		ssistance, t	s in the Un
		grants or as	f grant fund
	nce	ount of the	g the use of
	Assistaı	ate the amo	r monitoring
INC.	ints and	o substanti rants or as:	cedures fo
EELMEN	n on Gra	in records to ward the gr	zation's pro
CAN WH	formatio	ion maintai a used to a	the organiz
LEAGUE OF AMERICAN WHEELMEN, INC.	Part   General Information on Grants and Assistance	1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.
AGUE O	irt I Ge	Does the	Describe
Ц	۲	-	N

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section If applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) WASHINGTON AREA BICYCLIST 2599 ONTARIO ROAD, NW - WASHINGTON DC 20009	23-7305477	501 (C) (3)	15,000.	0.0	FMV	0	PROGRAM
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(3)							
(4)							
[5]							
]						A	
[6]							
(7)		THE PERSON NAMED IN COLUMN NAM					
[8]							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government org	anizations listed in the	e line 1 table				
3 Enter total number of other organizations listed in the line 1 table	ons listed in the line 1	table					
DAA For Bangary Deduction Act Notice see the Instructions for Form 990	citatination inctin	ne for Eorm 990		CHCHICO POOCADET	07/12/13	Cohod	Schedule I (Form 990) (2013)

Schedule I (Form 990) (2013) LEAGUE OF AMERICAN WHEELMEN, INC.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-					
2					
8					
4					
ro			:		
9					
_					
Part IV Supplemental Information. Provide the information	ide the information		ine 2, Part III, colum	required in Part I, line 2, Part III, column (b), and any other additional information.	ditional information.
Pt_I_Line_2THE_ORGANIZATION_REQUIRES_ALL_GRANT_RECIPIENTS_	ION REQUIRES A	LL GRANT RECIP	읽	SUBMIT COMPLETE	
Pt_I_Line_2NARRATIVE_AND_FINANCIAL_REPORTS_TO_ACCOUNT_FOR_FUNDS_GRANTED	. FINANCIAL REP	ORIS TO ACCOUN	T_EOR_EUNDS_GR	ANTED	
		; ; ; ; ; ; ; ;			
ВАА					Schedule I (Form 990) (2013)

## SCHEDULE J (Form 990)

**Compensation Information** 

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

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

Attach to Form 990. ► See separate instructions.

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

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

EAGUE OF AMERICAN WHEELMEN, INC.

Employer identification number

36-6206225

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

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

Schedule J (Form 990) 2013

Schedule J (Form 990) 2013 LEAGUE OF AMERICAN WHEELMEN, INC.

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

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

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

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	compensation :	(C) Retirement	(D) Nontaxable	(E) Total of	(F) Compensation
(A) Name and Title	•	(l) Base compensation	(II) Bonus and incentive compensation	(III) Other reportable compensation	and other deferred compensation	benefits	columns(B)(I)+(D)	deferred in prior
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ВАА			TEEA4102 07/08/13	<u>m</u>			Schedule J	Schedule J (Form 990) 2013

# **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. ► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047 2013

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

LEAGUE OF AMERICA	N WHEELMEN, INC.	36-6206225
Pt_VI, Line 6	REGULAR MEMBERSHIP SHALL CONSIST OF AN INDIVIDU	AL OR
	FAMILY. A FAMILY SHALL CONSIST OF TWO OR MORE	PEOPLE
	LIVING AT THE SAME ADDRESS WHO ARE RELATED BY B	LOOD,
	MARRIAGE, CIVIL UNION, ADOPTION OR FOSTER CARE.	
Pt VI, Line 7a	AN INDIVIDUAL MEMBER SHALL HAVE ONE VOTE. A FAM	<u>ILY</u>
	MEMBERSHIP SHALL HAVE TWO VOTES. REGULAR MEMBE	<u>RS</u>
	SHALL HAVE THE RIGHT TO ELECT THE BOARD OF DIRE	CTORS.
Pt VI, Line 11b	THE AUDIT COMMITTEE FIRST REVIEWS THE FORM 990.	WHEN
	APPROVED BY THE AUDIT COMMITTEE, THE FORM 990 I	S SENT
	TO THE ENTIRE BOARD FOR THEIR REVIEW AND APPROV	AL BEFORE
	FILING WITH THE INTERNAL REVENUE SERVICE.	
Pt VI, Line 12c	A CONFLICT OF INTEREST MAY EXIST WHEN THE FINAN	CIAL
	INTERESTS OF ANY DIRECTOR, OFFICER OR STAFF MEM	BER, OR
	SAID PERSON'S IMMEDIATE FAMILY, MAY BE SEEN AS	COMPETING
	WITH THE INTERESTS OR CONCERNS OF THE CORPORATI	ON. ANY
	POSSIBLE CONFLICT OF INTEREST SHALL BE DISCLOSE	D TO THE
	BOARD OF DIRECTORS BY THE PERSON CONCERNED. WI	EN ANY
	SUCH CONFLICT OF INTEREST IS RELEVANT TO A MATT	'ER
	REQUIRING ACTION BY THE BOARD OF DIRECTORS, THE	INTERESTED
	PERSON SHALL CALL IT TO THE ATTENTION OF THE BO	DARD OF
	DIRECTORS, AND SUCH PERSON SHALL NOT VOTE ON TH	HE MATTER.
	MOREOVER, THE PERSON HAVING A CONFLICT SHALL RE	ETIRE_FROM
	THE ROOM IN WHICH THE BOARD IS MEETING AND SHAI	L_NOT
	PARTICIPATE IN THE DELIBERATION OR DECISION REC	SARDING
	THE MATTER UNDER CONSIDERATION. HOWEVER, THAT	PERSON MAY
	PROVIDE THE BOARD WITH ANY AND ALL RELEVANT IN	FORMATION.

Schedule O (Form 990 or 9	90-EZ) 2013	Page 2
Name of the organization  LEAGUE OF AMERIC	AN WHEELMEN, INC.	Employer identification number 36-6206225
3 mm/s/11.8.5	THE MINUTES OF THE MEETING OF THE BOARD SHALL R	EFLECT
	THAT THE CONFLICT OF INTEREST WAS DISCLOSED AND	
	THE INTERESTED PERSON WAS NOT PRESENT DURING TH	
	DISCUSSION OR VOTE AND DID NOT VOTE. WHEN THER	
	AS TO WHETHER A CONFLICT OF INTEREST EXISTS, TH	
	SHALL BE RESOLVED BY A VOTE OF THE BOARD OF DIR	
	EXCLUDING THE PERSON CONCERNING WHOSE SITUATION	
	DOUBT HAS ARISEN.	
Dt VI Jino 19	THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS	
<u></u>	PRINTED IN OUR MAGAZINE AND POSTED ON OUR WEBSI	
	THE GOVERNING DOCUMENTS AND CONFLICTS OF INTERE	
 D+ YT	ARE LISTED ON THE WEBSITE.	
Pt_XI	NET_UNREALIZED_GAIN_ON_INVESTMENTS	~

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

BICYCLING SKILLS EDUCATION, AND PROMOTE BICYCLING FOR FUN, FITNESS AND TRANSPORTATION.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4a (continued)

BRINGS CYCLISTS TO CAPITOL HILL TO SPEAK WITH REPRESENTATIVES AND SENATORS.

BICYCLE FRIENDLY AMERICA PROGRAM:

THE LEAGUE IS CHANGING THE LOOK OF AMERICA WITH THE BICYCLE FRIENDLY
STATE, COMMUNITY, UNIVERSITY AND BUSINESS PROGRAMS. THESE PROGRAMS
OFFER TECHNICAL ASSISTANCE FROM LEAGUE STAFF, AN IN-DEPTH APPLICATION
THAT GIVES PARTICIPANTS AN OPPORTUNITY TO SELF-EVALUATE, AND FEEDBACK TO
ALL APPLICANTS-RECOGNIZED OR NOT. THE PROGRAM, LAUNCHED IN 2003, ENCOURAGES
APPLICANTS TO PROVIDE BETTER FACILITIES, ENCOURAGEMENT ACTIVITIES,
INFRASTRUCTURE AND EDUCATION FOR CYCLISTS AND PUCLICLY REWARDS THEM
FOR DOING SO. EACH APPLICATION HAS SPECIFIC QUESTIONS THAT ADDRESS THE
IMPORTANCE OF ENCOURAGING AND ENABLING UNDERSERVED POPULATIONS TO BIKE
FOR TRANSPORTATION.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4d (continued)

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.

Code:	Description:	PROMOTION - THE LEAGUE IS THE NATIONAL SPONSOR OF
Expenses	428,858.	BIKE MONTH AND BIKE TO WORK DAY.
Grants Of	350.	
Revenue.	0.	

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

● If you a ● If you a	re filing for an Automatic 3-Month Extension, corr re filing for an Additional (Not Automatic) 3-Monti	plete only l Extension	Part I and check this box	 orm).		· · · · · ×
Do not cor Electronic corporation request an Associated	nplete Part II unless you have already been grante filing (e-file). You can electronically file Form 8868 required to file Form 990-T), or an additional (not at extension of time to file any of the forms listed in Par With Certain Personal Benefit Contracts, which musting of this form, visit www.irs.gov/efile and click on a	d an automa if you need : itomatic) 3-r rt I or Part II	tic 3-month extention on a previously filed a 3-month automatic extension of time to fil nonth extension of time. You can electronic with the exception of Form 8870, Information 1881, Inc. 1881 in page 1881.	Form ( e (6 m ally fil	onths for a e Form 8868	
Part I	Automatic 3-Month Extension of Time					<del></del>
****	on required to file Form 990. T and requesting an out	omalia 6 ma	onit onginai (no copies needed).			
All other co.	on required to fite Form 990-T and requesting an autoporations (including 1120-C filers), partnerships, RE	emiatic 6-mo	rusts must use Form 7004 to request an ex	ete Pai densio	rt I only on of time to fi	• []
income tax	returns.		Enter filer's identi			
	Name of exempt organization or other filer, see instructions.				oyer Identification	
Type or print	LEAGUE OF AMERICAN WHEELMEN,	TNC	OPY			
File by the	Number, street, and room or suite number. If a P.O. box, see instr	ructions.	<del>5(()) \</del>		6206225 I security number	(SSN)
due date for filing your	1612 K STREET, NW, #308	<u> </u>	2	1		
return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address	ss, see instructio	ns.			
	Washington				DC 2000	06-2824
Enter the Re	eturn code for the return that this application is for (fi	le a separati	e application for each return)			01
Application Is For		Return Code	Application Is For			Return Code
	Form 990-EZ	01	Form 990-T (corporation)		•	07
Form 990-B		02	Form 1041-A			08
Form 4720 (		03	Form 4720 (other than individual)			09
Form 990-P		04	Form 5227			10
	(section 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T	(trust other than above)	06	Form 8870			12
Telepho  If the org  If this is check the the external through the control of the	the sare in the care of ► THE ORGANIZATION  THE	Fax No ss in the Unit Group Exect this box. required to ization returnant	ited States, check this box	this is	for the whole I EINs of all m	group,
3 a If this a	opplication is for Forms 990-BL, 990-PF, 990-T, 4720 undable credits. See instructions	0, or 6069, e	nter the tentative tax, less any	3 a	\$	0.
lax pay	application is for Forms 990-PF, 990-T, 4720, or 606 ments made. Include any prior year overpayment al	lowed as a c	oredit	3 b	\$	0.
EFTPS	e due. Subtract line 3b from line 3a. Include your pa (Electronic Federal Tax Payment System). See ins	tructions		3 с		0.
Caution. If y payment inst	ou are going to make an electronic funds withdrawal ructions.	(direct debi	t) with this Form 8868, see Form 8453-EO	and Fe	orm 8879-EO	for

	8 (Rev 1-2014) LEAGUE OF AMERICAN	WHEELMEN	, INC.	36-6206225	Page 2
<ul><li>If you a</li></ul>	are filing for an Additional (Not Automatic) 3-Month	Extension, o	complete only Part II and check this	box	· · · • 🗓
Note. Only	y complete Part II if you have already been granted a	n automatic 3	-month extension on a previously file	ed Form 8868.	<u>[A</u>
<ul><li>If you a</li></ul>	are filing for an Automatic 3-Month Extension, com	plete only Pa	art I (on page 1).		
Part II	Additional (Not Automatic) 3-Month E	xtension	of Time. Only file the original	(no conies needed)	<u> </u>
				identifying number, se	
	Name of exempt organization or other filer, see instructions.		Eurei mei s	Employer identification number	
Type or				Lingity of definitions and more	(Elli) O
print	LEAGUE OF AMERICAN WHEELMEN, I	NC		26 6006005	
	Number, street, and room or suite number. If a P.O. box, see instruc	ctions.		36-6206225 Social security number (SSN)	
File by the extended					
due date for filing your return, See	1612 K STREET, NW, #308				
return, See instructions,	City, town or post office, state, and ZIP code. For a foreign address,	see instructions.			
	Washington	DC . 20	006-2824		
	1.502.14 0011	<u> </u>	006-2824		
Enter the F	Return code for the return that this application is for (fi	ile a separate	application for each return)		[01]
			(1) (Z 1)		<u>MT</u>
Applicatio	n	Return A	Application		Return
ls For		( ( ( )	is For		Code
	or Form 990-EZ	01			
Form 990-I	BL	- 02	Form 1041-A	the same and the s	08
	(individual)	03	Form 4720 (other than individual)	······································	09
Form 990-I		04	Form 5227		10
	T (section 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-1	Γ (trust other than above)	06	Form 8870	· · · · · · · · · · · · · · · · · · ·	12
If the or If this is whole grou	oks are in care of THE ORGANIZATION one No. (202) 822-1333 rganization does not have an office or place of busine of or a Group Return, enter the organization's four digital process for a group Return.  If it is for part of the group extension is for.	Fax No. ► ess in the Unit it Group Exen	nption Number (GEN)	. If this	s is for the
<ul> <li>5 For case</li> <li>6 If the</li></ul>	nest an additional 3-month extension of time until alendar year 2013, or other tax year beginning tax year entered in line 5 is for less than 12 months, change in accounting period in detail why you need the extension <u>Delaysessary information to file a content of the extension of time until extension o</u>	check reason s_in_assemplete_a	embling and compiling nd accurate return.	, 20 Final return	
nonte	application is for Forms 990-BL, 990-PF, 990-T, 4720 fundable credits. See instructions		• • • • • • • • • • • • • • • • • • • •	8a \$	0.
lax pa	application is for Forms 990-PF, 990-T, 4720, or 606 ayments made. Include any prior year overpayment alously with Form 8868	llowed as a cr	bica tauame vas has tiber	8b\$	0,
c Balan	nce due. Subtract line 8b from line 8a. Include your pa S (Electronic Federal Tax Payment System). See ins	avment with th	nis form if required by using		0.
	Signature and Verifica	ation must	be completed for Part II on	 ily.	
Inder penalties correct, and con Signature ►	of periury, declare that have examined this form, including accompaniete, and that I are authorized to prepare this form.  Title		and statements, and to the best of my knowledge	end belief, it is true,  Date	14/14
•	V	FIFZ.0502 12	231113	Form 8868 (F	kev 1-2014)