Form 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

Inter	nal Reye	nue Service		The organization	may have to us	se a copy o	f this return to	satisfy s	tate report	ıng requiren	nents	Upe	n to Put	onc inst	pection
	For the	e 2008 calendar	year, or	tax year beginr	ning May	1	, 2	008, ar	nd endin	g Apr	30		, 2009		
В	Check if	applicable		C Name of organiza	ation				-		D Empl	oyer Identi			
	Add	ress change Res	ase use Stabel I	Lake Champla	ain Marit	ime Mu	seum at B	asin	Harboi	r. Inc.	22	-2570	380		
	Nar	ne change or	r print r type.	Number and stree								hone numb			
	Ħ	- !	امو	4472 Basin	Harbor	Road							75-20	2.2	
	Ħ	j lń	istruc- tions	City, town or cour		Moad	9	State 7	P code + 4		. (0	02) 4	73-20		
		ended return		Vergennes	•								2 16		
	-	 -		d address of principal	l a ffinar			<u>V 1</u>	5491	H(a) Is this		s receipts \$			
	☐ App					. 17			I	H(b) Are all			iales,	Yes	X No
				ones 4472 Bası					75451			st (see inst	ructions)	Yes	∐ No
<u> </u>		exempt status			(insert no)		1947(a)(1) o	r	527						
J			lcmm.							H(c) Group		_			
K_			Corporation	on Trust	Association	Other ►		L Yea	r of Formati	on 1980	<u> </u>	State of le	gal domic	le VT	
Pa		Summary													
		Briefly describe t							<u>itime</u>	Museu	<u>m R</u>	esear	c <u>h_&</u> _	<u>Educa</u>	<u>ition</u>
e S	_	Through ed	lucati	on and re	<u>search,</u>	<u>the</u> <u>I</u>	<u>ake Ch</u> a	mpla	in_Ma	<u>ritime</u>	Mus!	eum i	<u> </u>		
ш		committed_	<u>to</u> 10	ientifying	_and_pre	eserv	ng a ce	<u>ntra</u>	T pod	y_of_}	nowl	<u>edge,</u>	<u>site</u>	s	
/eri		and artifa	CES P	ertinent_	to the n	n <u>arıtı</u>	me hist	ory.	of th	e_Lake	_Chai	mplair	<u>Reg</u>	<u>ion.</u>	
Activities & Governance		Check this box						ispose	d of more	e than 25'	% of its				
≪ಶ		Number of voting Number of indepe						ına 1h)					10 10		
ties		Total number of			_	Tilling boo	y (Fait Vi, ii	ine iu,					40	_	
Ĭ		Fotal number of v		•	•								100		
Ac		Total gross unrel				II line 12	column (C	3				7a	100		0.
		Net unrelated bus						, 	5			7b			
							CEIVEL)			rior Yea		C	rent Ye	
	8 (Contributions and	d orants	(Part VIII 'line 1	1b) [Q	i		,110,		Cui		145.
Jue		Program service	_			050	2 3 200	ျှင်				939.			173.
Revenue		nvestment incom). lines 6774.	and 7d)	2 3 200	19 10	.1			632.			007.
æ		Other revenue (P					and 11e)		1			928.			902.
		Total revenue 🗕					•	Tine 1	a)	1	,759,				213.
		Grants and simila				~~~		-		Ì		0.			0.
		Benefits paid to d			-	•	,					0.			0.
		Salaries, other co				-	lumn (A). lır	nes 5-1	0)		867.	221.		846.	576.
ses		Professional fund		· -	•		(7,		-,		<u> </u>				0.
Expenses			-			•		100	0.25						
EX		Total fundraising				-		123	<u>,835.</u>	·					
		Other expenses (391.			598.
		Total expenses <i>I</i>					(A), line 25)		1	<u>,541,</u>				174.
_	19 F	Revenue less exp	penses	Subtract line 18	from line 12	2	 -			<u> </u>	217,	465.		-601,	<u>961.</u>
Nat Assets or Fund Balancos										Begir	ning of	Year	En	d of Yea	ar
and a	20	Fotal assets (Par	rt X, line	: 16)						5	,284,	096.	4	,398,	651.
발	21	Total liabilities (P	Part X, lı	ne 26)							439,	219.		423,	309.
		Vet assets or fun	id baland	ces Subtract lin	e 21 from lir	ne 20				4	,844,	877.	3	,975,	342.
<u> Pa</u>	rt II	Signature	Block	(
>		Under penalties of	perjury, I d	declare that I have ex Declaration of prepare	amined this retu	rn, includin	g accompanying	schedul	es and state	ements, and	to the bes	t of my kno	wledge and	d belief, it	ıs
6		lide correct, and	omplete o	recial attory or prepare	er (omer man on	icer) is bas	ed on all inform	ation of v	vnich prepa	rer nas any	knowledge				
Sig	n	Aus	san	Jonas							9-1	0-09	?		
₹Heĭ	re	Signature of of	fficer							Da	te				
		Susan J		, 						Finar	cial	Busin	ness 1	Manac	ger
		Type or print na	ame and ti	itle											
				\circ	\bigcirc	,		Date	•		neck if	Pre (se	parer's ide	entifying n	umber
Pai		Preparer's	,	110	1/1			_ ا		se er	it nployed	▶ ∏ ```		/	
Pre). .or's	signature		allas.	11 /a	des.	CER	_	ent. 9	2000		_			
Us	rer's	Firm's name (or	WALL	ACE W TAPI	A PC				0						
On		yours if self employed).	РО ВО	OX 5777						Eı	N ►				
	· <i>y</i>	address, and ZtP + 4		INGTON			VT 05	5402	·- · · · ·	Pi	none no	► (802) 863	3-637	0
May	the IR	S discuss this re	eturn wit	h the preparer s	shown above	² (see ir				d .,		,	Ye		No
		Privacy Act and						ruction	s.	·····	TEEA010	04/23/0		rm 990	

	time Museum at Basin Harbor, Inc.	22-2	570380	Pa	age 2
Part III Statement of Program Se	ervice Accomplishments (see instructions)				
1 Briefly describe the organization's mission					
Maritime Museum - Resear	ch_& Education	_			
Through education and re	search, the Lake Champlain Maritime	Museum is			
See Form 990, Page 2, Part III, Line 1 (continued)				
				-	
2 Did the organization undertake any signi	ficant program services during the year which were not lis	sted on the prior			
Form 990 or 990-EZ?			☐ Ye	es X	No
If 'Yes,' describe these new services on :	Schedule O				•••
,	r make significant changes in how it conducts, any progra	am services?	□ v	es X	No
If 'Yes,' describe these changes on Sche		ann services.	LJ '	es A	110
		onware by overence	s Cootion	E01(a)(3)	
and 501(c)(4) organizations and section	nts for each of the organization's three largest program s 4947(a)(1) trusts are required to report the amount of gra	nts and allocations	to others.	the total	
expenses, and revenue, if any, for each	program service reported		•		
4a (Code) (Expenses \$	181,448. including grants of \$	0) (Payanua	¢	70 744	٤ ،
General operation of the	museum including courses		٧	10,14	<u>u.</u>)
oducational programs of the	museum including courses,				
Ecotho 2000	search and children's programs.				
ror the Zuus season, app	roximately 13,000 people visited		- -	-	
the museum including tho	usands of school children.			- -	
			-	. – – – .	- - -
		· · · · · · · · · · · · · · · · · · ·			
4b (Code) (Expenses \$	278, 370. including grants of \$	0.) (Revenue	\$	61,171	
Various educational prog	rams including Champlain Discovery	&			-
Longboats that teach boa	t building, navigation, history				
and ecology to high school	ol students. Other educational				
programs include various	nautical-related courses				
and school outreach.					
				 -	
4c (Code) (Expenses \$	627, 130. including grants of \$	0.) (Revenue	\$	282,256	6.)
Various Archaeology Proje	ects and Special Exhibits - These	 .			 '
include planning for the	management of a Revolutionary				
War Gunboat, the multi-ve	ear Lake Survey, underwater				
preserves management and	d the Burlington Schooner				
				-	
A. O. G. C				-	
				-	
			- 		
				- 	
4d Other program services (Describe in Sch	nedule O)				
(Expenses \$	including grants of \$) (Rev	enue \$)	
	1,086,948. (Must equal Part IX, Line 25, co				

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 1 Schedule A 2 Is the organization required to complete Schedule B, Schedule of Contributors? Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I 3 Х 4 Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II Х Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I 6 Х Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D. Part III 8 Х Did the organization report an amount in Part X, line 21; 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 a Schedule D, Part IV Х Х Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V 10 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable 11 Х Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12 Х Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E Х 14a Did the organization maintain an office, employees, or agents outside of the U.S.? 14a **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? *If 'Yes,' complete Schedule F, Part I* 14b Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II Х 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III Х 16 Х Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I 17 17 18 Х Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II 19 Х Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III 19 Х Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H 20 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 Х 21 Did the organization report more than \$5,000 on Part IX, column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III 22 Х Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J . 23 Х 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K If 'No, 'go to question 25 . 24a Х 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? 24d d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 25a 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 b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I 25b Х Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II

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Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial

contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III

Form 990 (2008) Lake Champlain Maritime Museum at Basin Harbor, Inc.

Part IV | Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively			
	with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		Х
-	b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		Х
	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? 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	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		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	Is any related organization a controlled entity within the meaning of section $512(b)(13)$? If 'Yes,' complete Schedule R, Part V, line 2	35		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

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

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Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. 17 Information Returns Enter -0- if not applicable 1 b 1 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1 c Х (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 40 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by 3 a Х b If 'Yes' has it filed a Form 990-T for this year? If 'No.' provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a Х **b** If 'Yes,' enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Х 5 b Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5 c Х 6a 6a Did the organization solicit any contributions that were not tax deductible? b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not 6b deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization provide goods or services in exchange for any guid pro quo contribution of more than \$75? 7 a Х 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 Form 82827 7 c 7d d If 'Yes,' indicate the number of Forms 8282 filed during the year . e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7 e Х benefit contract? 7 f Х f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? **7** g h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Х Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Х Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. Х a Did the organization make any taxable distributions under section 4966? 92 Х **b** Did the organization make any distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter 10a a Initiation fees and capital contributions included on Part VIII, line 12 b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter 11 a a Gross income from other members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a

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12b

Form 990 (2008) Lake Champlain Maritime Museum at Basin Harbor, Inc.

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

<u> </u>	tion A. Governing Body and Management			,										
	For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances processes, or changes in Schedule O. See instructions	;, <u> </u>	Yes	No										
1 a	Enter the number of voting members of the governing body 1a 10			1										
	Enter the number of voting members that are independent 1 b 10			ı										
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?			i										
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?			x										
4	Did the organization make any significant changes to its organizational documents	4		$\frac{\lambda}{X}$										
•	since the prior Form 990 was filed?													
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х										
6	Does the organization have members or stockholders?	6	Х											
7 a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		х										
b	b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b													
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:													
а	The governing body?	8a	Х											
b	Each committee with authority to act on behalf of the governing body?	8 b	X											
9 a	Does the organization have local chapters, branches, or affiliates?	9a		X										
t	olf 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9 ь												
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	х											
	Is there any officer, director or 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	11		_x										
<u>Sec</u>	tion B. Policies		····											
			Yes											
		[No										
	Does the organization have a written conflict of interest policy? If 'No,' go to line 13	12a		No										
t	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	Х	No										
t	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12b	x											
13	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy?	12b	x	x										
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13 14 15	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision	12b 12c 13 14	X X	x										
13 14 15	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official?	12b 12c 13 14	X X X	x										
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13 14 15 a	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official? Other officers of key employees of the organization? Describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	12b 12c 13 14 15a 15b	X X X	x										
13 14 15 a	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision of the organization's CEO, Executive Director, or top management official? Other officers of key employees of the organization? Describe the process in Schedule O (see instructions)	12b 12c 13 14 15a 15b	X X X	X X										
13 14 15 16 16	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers of key employees of the organization? Describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	12b 12c 13 14 15a 15b	X X X	X X										
13 14 15 16 a t	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers of key employees of the organization? Describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participatic in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exemp status with respect to such arrangements?	12b 12c 13 14 15a 15b	X X X	X X										
13 14 15 16a t	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers of key employees of the organization? Describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exemp status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed Vermont Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only inspection. Indicate how you make these available.	12b 12c 13 14 15a 15b 16a 16a	X X X X	x										
13 14 15 16a t	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers of key employees of the organization? Describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exemp status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed Vermont Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only	12b 12c 13 14 15a 15b 16a 16a	X X X X	x										
13 14 15 16a t Sec 17	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers of key employees of the organization? Describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exemp status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed Vermont Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only inspection. Indicate how you make these available.	12b 12c 13 14 15a 15b 16b 16a available	X X X X for pu	XXX										
13 14 15 16a t 17 18	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers of key employees of the organization? 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 taxabentity during the year? If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exemp status with respect to such arrangements? Ition C. Disclosures List the states with which a copy of this Form 990 is required to be filed Vermont Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only inspection Indicate how you make these available Check all that apply Own website Another's website Another's website W Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest p statements available to the public.	12b 12c 13 14 15a 15b 16a 16b 16a on 16b 17a available	X X X X	X X X										
13 14 15 16a t 17 18	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers of key employees of the organization? 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 taxabentity during the year? If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exemp status with respect to such arrangements? The organization indicate how you make these available Check all that apply Own website Another's website X Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest participation in the public.	12b 12c 13 14 15a 15b 16b 16a n 16b	X X X X	X X X										

Form 990 (2008)

Form 990 (2008) Lake Champlain Maritime Museum at Basin Harbor, Inc.

BAA

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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) or 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 the organization did not		trus	tee, or key employee							
(A)	(B)	_		((•			(D)	(E)	(F)
Name and Title	Average hours per week	or director	o usylnyovaj kazlee		a key employee	High est commensated employee	Forner	Reportable compensation from the organization (W 2/1099-MISC)	Reportable compensation from related organizations (W 2/1099 MISC)	Estimated amount of other compensation from the organization and related organizations
Arthur B. Cohn						_	-		· · · · · · · · · · · · · · · · · · ·	
Executive Director	40.00				Х			79,898.	0.	0.
Sandy Jacobs										
Chairman	4.00			Х				0.	0.	0.
Elliott Bristow										
Vice-Chair	2.00			Х				0.	0.	0.
Peter M. Doremus										
Secretary	2.00			Х				0.	0.	0.
Gary Farrell										
Governing Trustee	2.00	Х				ļ		0.	0.	0.
Robert H. Beach, Jr.										
Governing Trustee	2.00	Х				<u> </u>		0.	0.	0.
Frances Foster										
Governing Trustee	2.00	Х						0.	0.	0.
Darcey Hale										
Governing Trustee	2.00	X					_	0.	0.	0.
<u>John Hoehl</u> Governing Trustee	2.00	x						0.	0.	0.
Jan W. Rozendaal					\vdash					
Governing Trustee	2.00	х			•			0.	0.	0.
Dana vanderHeyden										
Governing Trustee	2.00	Х						0.	0.	0.
Susan Jones Financial Business Manager	40.00				х			48,049.	0.	0.
	 				-					·-

TEEA0107 04/24/09

Part VII Section A. Officers, Directors, Trus		ley	Em			es,	an			<u>ıploy</u>			<u>าt.)</u>
(A) Name and Title	(B) Average hours	Posi	tion (C) call t	hat a	(vlaa	(D)	(E)			(F)	
Name and fille	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organization (W-2/1099-MISC)	5	comp fro orga and	timated nt of oth oensation the enization of related nization	on n d
	-												
	-												
						_							
	1												
	 												
										_			
	-									_			
										<u> </u>	_		
1 b Total	 	—				***	<u> </u>	127,947.		<u>l</u>			0
2 Total number of individuals (including those in 1a) w organization	no recei	ved	mor	re th	ian :	\$100	,000	on reportable cor	mpensation from	the			
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	dıvıdual		-				_				 3	Yes	No X
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the individual	ortable an \$150	com),000	pen)? If	satio 'Ye	on a s' co	ind o	other lete	r compensation fro Schedule J for su	om ch		4		~- X
5 Did any person listed on line 1a receive or accrue correndered to the organization? If 'Yes,' complete Sch	mpensa edule J f	ition for s	fror uch	m ar per:	ny u son	nrel	ated	organization for s	services		5		X
Section B. Independent Contractors 1 Complete this table for your five highest compensate	ed inden	ende	ent c	conti	racto	ors i	hat	received more tha	n \$100,000 of				
compensation from the organization								1	· · · · · · · · · · · · · · · · · · ·				
(A) Name and business addres	<u>s</u>							Description (Co	(C omper	;) nsatio	n
				_									
2 Total number of independent contractors (including t compensation from the organization ► 0	hose in	1) w	ho r	rece	ived	mo	re th	nan \$100,000 in					

Par	τνι	III Statement of Re	evenue						
	•					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u></u>	1 2	Federated campaigns		1a	0.				
E S			⊢	-					ĺ
₹ <u>\$</u>	b	Membership dues	<u> </u>	1 b	32,915.				
일일	С	Fundraising events		1 c	0.				
ĔZ	d	Related organizations		1 d	0.				
ਯੂ≦∣		Government grants (contribution	,,,,	1 e	247,717.				
왕	E	dovernment grants (contribute) -	- 6	241,111.				
토삐	f	All other contributions, gifts, g	rants, and	1					(
필		similar amounts not included	above	1f	463,513.				'
۲	g	Noncash contribns included in	Ins 1a-1f	\$	39,652.				ſ
용취	h	Total. Add lines 1a-1f			•	744,145.	•		
ш			-		Business Code				
ᆲ	22	Research contra	et inco	أمسا	900099	282,256.	282,256.	0.	0.
ا يَيْ				- - -					
<u> </u>	D	Educational - tuition	. & admissi	ons.	900099	131,917.	131,917.	0.	0.
Š	C			↓					
, K	d								
ş	е			T					
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f	All other program service	e revenue	†	•				
Ž		Total. Add lines 2a-2f	o revenue	·	>	414,173.			
			i i			414,175.			
	3	Investment income (incl	uding divid	ends	, interest and	78,470.	о.	0.	78,470.
	_	other similar amounts)				10,470.	· · · · · · · · · · · · · · · · · · ·	٠.	10,470.
	4	Income from investment	t of tax-exe	mpt	bond proceeds				
	5	Royalties			<u> </u>				
- 1			(i) Rea	ıl	(II) Personal				
Ì	6a	Gross Rents	16,	700			1		
	h	Less, rental expenses		817					l ·
		Rental income or (loss)		883					i .
1		, .		003	··	7 002			7 003
	a	Net rental income or (lo				7,883.	0.	0.	7,883.
	7 a	Gross amount from sales of	(ı) Securi		(II) Other				
		assets other than inventory	1,800,	<u>530</u>	. 15,000.				
	ь	Less cost or other basis							
		and sales expenses	2,231,	805	. 20,202.				
		Gain or (loss)	-431,			1			
		Net gain or (loss)	101/		<u>., 3/202.</u> ▶	-436,477.	0.	0.	-436,477.
ш		Gross income from fund	draising eve			-430,477.	0.	0.	-430,477.
NUE		• -		<u>0.</u>					
OTHER REVEN		of contributions reported	d on line 1d	:)					
2 2		See Part IV, line 18			a				
뷛	b	Less direct expenses			ь				ĺ
6	c	Net income or (loss) fro	m fundrais	ına e	vents	1			
				_		··-			<u> </u>
	9 a	Gross income from gam See Part IV, line 19	ning activitie	es	a 45,155.				
					b 12,807.	1			
1		Less direct expenses							
	С	Net income or (loss) fro	m gaming	activ	ities	32,348.	0.	0.	32,348.
	10 a	Gross sales of inventory	y, less retui	rns					
		and allowances			a 53,138.	ł			j
	b	Less cost of goods solo	t		b 32,318.				
	c	: Net income or (loss) fro	m sales of	inve	ntory ►	20,820.	20,820.	0.	0.
		Miscellaneous Rever			Business Code				
	11 a	Miscellaneous			900099	1,851.	0.	0.	1,851.
	u					=,.552.	·	ļ	
	-	·							
	C					1	 		
ļ	_	All other revenue							
	е	Total. Add lines 11a-11	d		•	1,851.			<u> </u>
	12	Total Revenue. Add line	es 1h, 2g, 3	3, 4, 9	5, 6d, 7d, 8c, 9c,	863 213	131 993	_	-315 925

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do I	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	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0.	0.	general expenses	expenses
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0.	0.		1
3	Grants and other assistance to governments, organizations, and individuals outside the				
А	U.S. See Part IV, lines 15 and 16 Benefits paid to or for members	0. 0.	0.		
5	Compensation of current officers, directors, trustees, and key employees	127,947.	72,721.	47,236.	7,990.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	618,516.	515,144.	38,728.	64,644.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	32,773.	25,810.	3,774.	3,189.
10	Payroll taxes	67,340.	59,341.	4,829.	3,170.
	Fees for services (non-employees)				
	n Management	0.	0.	0.	0.
	Legal .	0.	0.	0.	0.
	Accounting	11,065.	0.	11,065.	0.
	Lobbying	0.	<u>U.</u>	0.	0.
	e Prof fundraising svcs See Part IV, In 17 Investment management fees	18,962.	0.	18,962.	0.
	1 Other	84,490.	52,680.	18,842.	12,968.
	Advertising and promotion	48,339.	0.	48,339.	0.
	Office expenses .	93,803.	71,797.	13,135.	8,871.
14	Information technology		. = 7		
15	Royalties				
16	Occupancy	46,641.	39,911.	3,682.	3,048.
17	Travel	18,598.	16,624.	458.	1,516.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.	0.	0.	0.
19	Conferences, conventions, and meetings				
20	Interest .	22,798.	0.	22,798.	0.
21	, , , , , , , , , , , , , , , , , , ,	0.	0.	0.	0.
22		113,257.	89,194.	13,043.	11,020.
	Insurance Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)	60,725.	56,824.	2,114.	1,787.
	Dues & Subscriptions	9,226.	7,266.	1,062.	898.
	Materials, Supplies & Equipment	44,762.	42,867.	1,027.	868.
	Other Expenses	7,415.	6,943.	238.	234.
	Repairs & Maintenance	37,330.	29,399.	4,299.	3,632.
	Training & Education	1,187.	427.	760.	0.
	All other expenses	1,465,174.	1,086,948.	254,391.	122 025
26	Total functional expenses. Add lines 1 through 24f Joint Costs. Check here ► X if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	1,465,174.	1,086,946.	254,391.	123,835.
BAA					Form 990 (2008)

BAA

Form 990 (2008)

Form 990 (2008) Lake Champlain Maritime Museum at Basin Harbor, Inc.

Part X | Balance Sheet

					(A)		(B)					
					Beginning of year		End of year					
	1	Cash — non-interest-bearing			101,140.	1	88,436.					
	2	Savings and temporary cash investments			6,762.	2	315,997.					
	3	Pledges and grants receivable, net			265,700.	3	184,480.					
	4	Accounts receivable, net .			143,625.	4	44,790.					
	5	Receivables from current and former officers, directors or other related parties. Complete Part II of Schedule I	s, truste L	ees, key employees,		5						
	6	Receivables from other disqualified persons (as define	d unde	er section 4958(f)(1))								
Δ		and persons described in section 4958(c)(3)(B) Comp	lete Pa	art II of Schedule L	<u>-</u>	6						
ASSETS	7	Notes and loans receivable, net				7						
Ĕ	8	Inventories for sale or use			36,380.	8	42,210.					
Ś	9	Prepaid expenses and deferred charges				9						
	10 a	Land, buildings, and equipment cost basis	10 a	3,050,533.			ļ					
	b	Less accumulated depreciation Complete Part VI of				a+-	and the second of the second					
		Schedule D	10 b	1,075,097.	2,008,904.	10 c	1,975,436.					
	11	Investments — publicly-traded securities			2,656,419.	11	1,696,775.					
	12	Investments - other securities See Part IV, line 11				12						
	13	Investments - program-related. See Part IV, line 11				13						
	14	Intangible assets				14						
	15	Other assets See Part IV, line 11 .			65,166.	15	50,527.					
	16	Total assets. Add lines 1 through 15 (must equal line	34)		5,284,096.	16	4,398,651.					
	17	Accounts payable and accrued expenses			103,046.	17	89,644.					
	18	Grants payable				18						
	19	Deferred revenue			9,649.	19	20,403.					
Ļ	20	Tax-exempt bond liabilities			•	20						
À	21	Escrow account liability. Complete Part IV of Schedule	D :			21						
I A B I L ! T	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified personal compensated employees.										
Ţ		of Schedule L										
E S	23	Secured mortgages and notes payable to unrelated the	ird part	ties	326,524.	23	313,262.					
	24	Unsecured notes and loans payable				24						
	25	Other liabilities Complete Part X of Schedule D				25						
	26	Total liabilities. Add lines 17 through 25			439,219.	26	423,309.					
Ň		Organizations that follow SFAS 117, check here ▶	X ar	nd complete lines								
N E T		27 through 29 and lines 33 and 34.	_			ll						
Ą	27	Unrestricted net assets			1,992,499.	27	1,160,380.					
ASSET	28	Temporarily restricted net assets			443,403.	28	404,932.					
Ġ	29	Permanently restricted net assets		. [2,408,975.	29	2,410,030.					
R		Organizations that do not follow SFAS 117, check he	re 🕨	and complete								
Б		lines 30 through 34.				l						
FUND	30	Capital stock or trust principal, or current funds				30						
Ŗ	31	Paid-in or capital surplus, or land, building, and equip	ment fu	und		31						
BALAZCES	32	Retained earnings, endowment, accumulated income,	or othe	er funds		32						
N C	33	Total net assets or fund balances.			4,844,877.	33	3,975,342.					
Š	34	Total liabilities and net assets/fund balances			5,284,096.	34	4,398,651.					
Pa	rt X	Financial Statements and Reporting										
							Yes No					
1	Ac	counting method used to prepare the Form 990:	Cash	X Accrual	Other							
2	a We	re the organization's financial statements compiled or r	eviewe	ed by an independent ac	countant?		2a X					
	b We	re the organization's financial statements audited by ar	ındep	endent accountant?			2b X					
	c If "	Yes' to 2a or 2b, does the organization have a committe lew, or compilation of its financial statements and selections.	e that	assumes responsibility	for oversight of the aud	lit,						
							2c X					
3	a As Δι	a result of a federal award, was the organization requir dit Act and OMB Circular A-133?	red to u	ındergo an audıt or audı	its as set forth in the Si	ngle	3a X					
		Yes,' did the organization undergo the required audit or	audite:	7			3b A					
BA		. 00, 5.2 the organization and go the required dudit of	444113		<u> </u>	=	Form 990 (2008)					

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2008

2008

Name o	ame of the organization Employer identification number														
Lak	e (Champlain Mar	citime Museum	at Basin Harbon	c, Ind	· .			22-25	570380	<u> </u>				
Part	:1	Reason for Pul	olic Charity Statu	s (All organizations	must c	omple	te this	part.)	(see i	nstruct	tions)				
The o	rga	nization is not a priv	ate foundation becaus	e it is: (Please check onl	y one or	ganızatı	on)								
1		A church, conventio	n of churches or asso	ciation of churches descr	ibed in s	ection 1	1 70(b)(1)(A)(i).							
2	П	A school described	in section 170(b)(1)(A	(Attach Schedule E)										
3	П	A hospital or coope	rative hospital service	organization described in	n sectio i	n 170(b)	(1)(A)(iii). (Atta	ch Sche	dule H)					
4	П	A medical research	organization operated	d in conjunction with a ho	spital de	scribed	ın secti	on 170(b)(1)(A)(iii) Ente	er the hospital's				
		name, city, and stat	te.	•				,			•				
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(bX1)XAX(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(bX1)XAX(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)														
8															
9		from activities relate investment income	ed to its exempt functi	more than 33-1/3 % of lons — subject to certain as taxable income (less somplete Part III.)	exceptió	ns, and	(2) no n	nore tha	ın 33-1/3	3 % of⊨t	s support from gross				
10		An organization org	anized and operated	exclusively to test for pub	lic safet	y See s	ection 5	09(a)(4)). (see i	nstructio	ons)				
11		more publicly suppo	orted organizations de	exclusively for the benefit escribed in section 509(a) ation and complete lines)(1) or s	ection 5	09(a)(2)	ions of, . See s e	or carry ection 5	out the 09(a)(3).	purposes of one or Check the box that				
		a ☐ Type I	b ☐ Type II	c ☐ Type III		-		ed		dП	Type III- Other				
е		By checking this bo	x, I certify that the org nagers and other than	ganization is not controlle one or more publicly sup	d directl	v or ındı	rectly by	one or	more d in secti	isqualifie on 509(a	ed persons other a)(1) or section				
f		If the organization r	eceived a written dete	ermination from the IRS th	hat is a	Гуре I, Т	Гуре ІІ о	r Type I	II suppo	rting org	ganization,				
g		Since August 17, 20	006, has the organizat	ion accepted any gift or	contribu	tion fron	n any of	the foll	owing p	ersons?					
											Yes No				
		below, the go	verning body of the su	controls, either alone or to ipported organization?	ogether v	vith pers	sons des	scribed i	n (II) an	d (111)	11 g (i)				
		``	ber of a person desci	• • •					•		11 g (ii)				
		• •		described in (i) or (ii) ab							11 g (iii)				
<u>h</u>		Provide the following	g information about th	ne organizations the organ	nization	support	s								
	(i) Name of Supported Organization	(ii) EIN	(III) Type of organization (described on lines 1 9 above or IRC section (see instructions))	organizat	s the ion in col I in your rning ment?	the organ	rou notify sization in (i) of upport?	lorganizát	s the ion in col zed in the S ?	(vii) Amount of Support				
					Yes	No	Yes	No	Yes	No					
		·													
 															
Total															

Part II	Support Sc	hedule	for	Organiza	tions	s [Desc	ribec	lin	Sections	170(b)(1)(A)(iv) and	170(b)(1)(A)(vi)	
	· · · · ·					_	_							

Sec	tion A. Public Support	d the box on line :	5, 7, 01 8 01 Part 1	<u>, </u>								
	ndar year (or fiscal year				<u> </u>							
begıı	nning in) 🖹	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total					
ı	Gifts, grants, contributions and membership fees received (Do not include unusual grants ")	938,455.	276,265.	811,983.	1,110,578.	744,145.	3,881,426.					
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0.	0.	0.	0.	0.	0.					
3	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge	0.	0.	0.	0.	0.	0.					
4	Total. Add lines 1-3	938,455.	276,265.		1,110,578.	744,145.	3,881,426.					
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						723,566.					
6	Public support. Subtract line 5 from line 4						3,157,860.					
Sec	tion B. Total Support				L	<u> </u>	3/13//000.					
Cale	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total					
7	Amounts from line 4	938,455.	276,265.	811,983.	1,110,578.	744,145.	3,881,426.					
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	71,670.	39,982.	95,727.	88,257.	78,470.	374,106.					
9	Net income form unrelated business activities, whether or not the business is regularly carried on	0.	0.	0.	0.	0.	0.					
10	Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV)											
11	Total support. Add lines 7 through 10						4,255,532.					
12	Gross receipts from related activi	ties, etc (see inst	ructions)			12	2,315,084.					
13	First five years. If the Form 990 i organization, check this box and	s for the organizat stop here	tion's first, second	, third, fourth, or	fifth tax year as a	section 501(c)(3)						
Sec	tion C. Computation of Pul		ercentage			·	·					
14	Public support percentage for 200	08 (line 6, column	(f) divided by line	11, column (f)		14	74.21%					
15	Public support percentage for 200	07 Schedule A, Pa	rt IV-A, line 26f			15	71.55%					
16 a	33-1/3 support test — 2008. If the and stop here. The organization (organization did r qualifies as a publ	not check the box	on line 13, and t anization	the line 14 is 33-1/	/3 % or more, che	ck this box					
b	33-1/3 support test — 2007. If the and stop here. The organization of	organization did r qualifies as a publi	not check a box or icly supported orga	n line 13, or 16a, anization	and line 15 is 33-	1/3% or more, che	eck this box					
17 a	17a 10%-facts-and-circumstances test — 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.											
	b 10%-facts-and-circumstances test — 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.											
18 RAA	Private foundation. If the organiz	ation did not chec	k a box on line, 13	3, 16a, 16b, 17a,		box and see instr						

Schedule A (Form 990 or 990-EZ) 2008 Lake Champlain Marıtime Museum at Basın Harbor, Inc. 22-2570380 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part 1) Section A. Public Support Calendar year (or fiscal yr beginning in) (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions and membership fees received (Do not include 'unusual grants') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1-5 7a Amounts included on lines 1, 2, 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal vr heminning in) **(h)** 2005 (4) 2006 (4) 2007 (4) 2009 (A Total (-) 2004

valential year (or natal yr beginning in)	(a) 2004	(6) 2003	(6) 2000	(u) 2007	(6) 2000	(i) rotar
9 Amounts from line 6 10 a Gross income from interest,						
dividends, payments received on securities loans, rents, royalties and income form similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (add Ins 9, 10c, 11, and 12)		•				
14 First five years. If the Form 990 i	s for the organiza	tion's first secon	d third fourth or	fifth tax year as a	section 501(c)(3)	

organization, check this box and stop here

Sec	tion C. Computation of Public Support Percentage		
15	Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%
Sec	tion D. Computation of Investment Income Percentage		
17	Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%
19 a	33-1/3 support tests - 2008. If the organization did not check the box, on line 14, and line 15 is more than 33-1/3%	and line	17 is not

- more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33-1/3 support tests - 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
- 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule_	A (F	orm	990 o	r 990)-EZ)	2008	L	ake (Cham	pla	in M	arıt	ime	Muse	eum .	at Ba	sin	Harb	or,	Inc.	22	-257	038	0		Page 4
Part IV	S	upp art	leme II, lin	enta ne 17	I Info 7a or	orma 17b	tior ; or	n. Co Par	mp t III	lete , lın	thi e 12	s pa 2. Pi	rt to	pro de a	vide ny c	e the	exp add	olana dition	ition al in	requ oform	uired natior	by F า. (รเ	Part I ee in	l, line struc	: 10; tions)	
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TEEA0404 10/07/08

Schedule A (Form 990 or 990-EZ) 2008

BAA

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545 0047

2008

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Name of the organization		E	mployer Identification	number
Lake Champlain Maritime Museum	at Basin Harbor, Inc.	2:	2-2570380	
Part I Organizations Maintaining Dono	r Advised Funds or Other Similar Fun	ds or Accou	nts Complete	e if
the organization answered 'Yes' t	o Form 990, Part IV, line 6.		•	
 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 	(a) Donor advised funds	(b) Fun	ds and other acc	ounts
33 3	or advisors in writing that the assets held in don to the organization's exclusive legal control?	nor advised	Yes	☐ No
used only for charitable purposes and not for t impermissible private benefit??	rs, and donor advisors in writing that grant funds the benefit of the donor or donor advisor or other	· · · · · · · · · · · · · · · · · · ·	Yes	No
Part II Conservation Easements Comple	ete if the organization answered 'Yes'	to Form 990,	Part IV, line	7.
 Purpose(s) of conservation easements held by Preservation of land for public use (e g , reservation of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a of the tax year 	ecreation or pleasure)	of certified histor		
or the tax your			leld at the End o	f the Year
 a Total number of conservation easements b Total acreage restricted by conservation easer c Number of conservation easements on a certified Number of conservation easements included in Number of conservation easements modified. 	ied historic structure included in (a)	2a 2b 2c 2d	ration during the	taxable
vear ►	transferred, released, extinguished, or terminate	a by the organiz	ation daring the	taxable
4 Number of states where property subject to co	- ,, - , , , , , , , , , , , , , , , , 			
enforcement of the conservation easement it h	garding the periodic monitoring, inspection, viola iolds? , inspecting, and enforcing easements during the		Yes	☐ No
-	specting, and enforcing easements during the vi	-		
,	n line 2(d) above satisfy the requirements of sec		Yes	□ No
include, if applicable, the text of the footnote to conservation easements	orts conservation easements in its revenue and of the organization's financial statements that de	scribes the orga	nizátion's accoui	
Part III Organizations Maintaining Collection Complete if the organization ans	ections of Art, Historical Treasures, or wered 'Yes' to Form 990, Part IV, line	r Other Simil 8.	ar Assets	
1 a If the organization elected, as permitted under treasures, or other similar assets held for publi the text of the footnote to its financial stateme	ic exhibition, education, or research in furtheran			
amounts relating to these items	ic exhibition, education, or research in furtheran	nt and balance s nce of public serv	vice, provide the	following
(i) Revenues included in Form 990, Part VIII,	line 1		► \$	4,000.
(ii) Assets included in Form 990, Part X	•			
2 If the organization received or held works of a amounts required to be reported under SFAS	116 relating to these items	r financial gain,		
a Revenues included in Form 990, Part VIII, line	1		►\$	
b Assets included in Form 990, Part X		•	► \$	

Schedule D (Form 990) 2008 Lake C Part III Organizations Maintai					22-2570 Other Similar Ass		Page 2			
3 Using the organization's accession that apply)	n and other recor	ds, check any of t	he follo	wing that are a sign	ificant use of its collect	ion items	(check all			
a X Public exhibition		d ☐ Loa	n or ex	change programs						
b X Scholarly research		e \square Oth		3 1 3						
c X Preservation for future genera	ations									
4 Provide a description of the organ Part XIV		ons and explain ho	w they	further the organiza	tion's exempt purpose	ın				
5 During the year, did the organizat assets to be sold to raise funds ra	ion solicit or rece ather than to be m	eive donations of a naintained as part	rt, histo	orical treasures, or o organization's collec	other similar stion?	Yes	X No			
Part IV Trust, Escrow and Cu IV, line 9, or reported	stodial Arran	gements Com n Form 990, Pa	plete art X,	if organization a line 21.	inswered 'Yes' to F	orm 990), Part			
1 a is the organization an agent, trust included on Form 990, Part X?					assets not	Yes	□No			
b If 'Yes,' explain the arrangement	ın Part XIV and c	omplete the follow	ıng tab	le.	'		ш -			
Amount										
c Beginning balance										
d Additions during the year					1 d					
e Distributions during the year					1 e					
f Ending balance					1f					
•	mount on Form 9	90 Part X line 21	7			Yes	No			
2a Did the organization include an amount on Form 990, Part X, line 21? b If 'Yes,' explain the arrangement in Part XIV										
Part V Endowment Funds Co		nization answ	ered "	Yes' to Form 99	0 Part IV line 10					
1 art v Endowment rands co	(a) Current year			(c) Two years back	(d) Three years back	(a) Fou	r years back			
1 a Beginning of year balance	2,447,37		rear	(c) I WO years back	(u) Tillee years back	(e) 10u	i years back			
• • •	1,05			 		 				
b Contributions	-639,34				-	+				
c Investment earnings or losses	-039,34	* + •		<u> </u>		+				
d Grants or scholarships				 		+	i			
Other expenditures for facilities and programs	112,31	12.				<u> </u>				
f Administrative expenses						-				
g End of year balance	1,696,77			<u></u>						
2 Provide the estimated percentage	-	balance held as								
a Board designated or quasi-endow		<u>0.00</u> %								
b Permanent endowment ►										
c Term endowment ►0	<u>.00</u> %									
3a Are there endowment funds not in organization by	the possession	of the organization	n that a	re held and adminis	tered for the	Y	res No			
(i) unrelated organizations						3a(i)	Х			
(ii) related organizations						3a(ii)	Х			
b If 'Yes' to 3a(II), are the related o	rganizations liste	d as required on S	Schedul	e R ⁷		3b				
4 Describe in Part XIV the intended	-	•								
Part VI Investments-Land, B	uildings, and	Equipment. S	ee Fo	rm 990, Part X,	line 10.					
Description of investment (a) Cost or other basis (b) Cost or other basis (c) Depreciation (d) Book Value basis (other)										
1 a Land		0		25,000.			25,000.			
b Buildings		0		1,705,744.	781,122.		924,622.			
c Leasehold improvements			1	, , , , , , , ,	,					
d Equipment	<u> </u>	0	.1	1,319,789.	293,975.	1.0	025,814.			
e Other			1	, == , , , , ,						
Total. Add lines 1a-1e (Column (d) sho	ould equal Form 9	990. Part X. colum	n (B). II	ne 10(c).)	•	1.	975,436.			
BAA					Sched		m 990) 2008			

Schedule D (Form 990) 2008 Lake Champlain Mariti	me Museum at Basin	Harbor, Inc.	22-2570380	Page 3
Part VII Investments—Other Securities See F		T		
(a) Description of security or category (including name of security)	(b) Book value) Method of valuation end-of-year market value	
Financial derivatives and other financial products				
Closely-held equity interests			 	
Other				
		<u></u>		
	<u> </u>			
Total. (Column (b) should equal Form 990 Part X, col (B) line 12)				
Part VIII Investments—Program Related (See	Form 990. Part X. I	line 13)		
(a) Description of investment type	(b) Book value	(0) Method of valuation	
	''	Cost or	end-of-year market value	}
				
	.			
Total. Column (b)(should equal Form 990, Part X, Col (B) line 13)		 		
Part IX Other Assets (See Form 990, Part X,	line 15)	<u> </u>		
	escription		(b)	Book value
Donated Boats for Sale				10,000.
Prepaid Expenses				26,135.
Construction in Progress				14,392.
	·			
		 		
				0
Total. Column (b) Total (should equal Form 990, Part X, co		·····	<u> </u>	50,527.
Part X Other Liabilities (See Form 990, Part			······································	
(a) Description of Liability Federal Income Taxes	(b) Amount			
Tederal medite Taxes				
		 		
	-	—		
				
		 		
Total Column (b) Total (should equal Form 990, Part X, col (B) line 25)	•			
In Part XIV, provide the text of the footnote to the organization	ion's financial statemen	ts that reports the orga	inization's liability for unce	ertain tax

<u>Sc</u> he	edule D (Form 990) 2008	Lake Champlain Maritime Museum at Ba	sin Harbor, Inc.	22-2570380	Page 4
Pai		of Change in Net Assets from Form 9			
1	Total revenue (Form 990,	Part VIII,column (A), line 12)			
2	Total expenses (Form 990	0, Part IX, column (A), line 25)			
3	Excess or (deficit) for the	year Subtract line 2 from line 1			
4	Net unrealized gains (loss	ses) on investments			
5	Donated services and use	e of facilities			
6	Investment expenses				
7	Prior period adjustments				
8	Other (Describe in Part X	IV)			
9	Total adjustments (net) A	Add lines 4-8 .			
10	Excess or (deficit) for the	year per financial statements. Combine lines 3	and 9		
Pai	t XII Reconciliation	of Revenue per Audited Financial Sta	atements With Revenue per	Return	
1	Total revenue, gains, and	other support per audited financial statements		1	
2	Amounts included on line	1 but not on Form 990, Part VIII, line 12]]	
	Net unrealized gains on it	nvestments	2a		
ı	Donated services and use	e of facilities	2b	_	
(Recoveries of prior year of	grants	2 c		
(Other (Describe in Part X	IV)	2 d		
•	Add lines 2a through 2d			2 e	
3	Subtract line 2e from line	1		3	
4	Amounts included on For	m 990, Part VIII, line 12, but not on line 1.			
	Investments expenses no	t included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part X	IV)	4 b		
(Add lines 4a and 4b			4c	
		3 and 4c. (This should equal Form 990, Part I, I		5	
Pa		of Expenses per Audited Financial S	tatements With Expenses p	er Return	
1		es per audited financial statements		1	
2		1 but not on Form 990, Part IX, line 25	1 1		
	Donated services and use	e of facilities		— [
	Prior year adjustments		2b	—	
	Losses reported on Form		2 c	<u> </u>	
	d Other (Describe in Part X	(IV)	2 d		
,	Add lines 2a through 2d			2 e	
3	Subtract line 2e from line		1 1	3	
4		m 990, Part IX, line 25, but not on line 1:			
		t included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part X	(IV)	4b	- .	
	c Add lines 4a and 4b			4c	
		s 3 and 4c (This should equal Form 990, Part I,	line 18)	5	
Ра	rt XIV Supplemental	Information	······································		
Com	plete this part to provide the 4, Part X, Part XI, line 8, F	ne descriptions required for Part II, lines 3, 5, ar Part XII, lines 2d and 4b, and Part XIII, lines 2d	nd 9, Part III, lines 1a and 4, Part IV and 4b	/, lines 1b and 2b,	Part V,
<u>Pt</u>	_III_Line_4T	he organization holds artwor	k, artifacts, boats ar	<u>nd</u>	
	<u>r</u>	related items for both public	exhibition and resear	<u>ch</u>	
		ctivities in furtherance of	its tax-exempt purpose	2	
<u>Pt</u>	V Line 4	ncome from the permanent end	owment_of_the_organiza	ation	
	<u>i</u>	s available for operations w	ith portions restricte	ed	
	t	o specific educational and o	ther activities.		
					- ·

Schedule D	(Form 990) 2008	Lake Champlaın Maritime M	useum at Basin Harbor, Inc	22-	2570380 Page 5
Part XIV	Supplemental	Lake Champlain Maritime M Information (continued)			
					- <i></i> .
					
	. 				
	_	·			
			. = = = = =	- -	

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service

Must be completed by organizations that answer 'Yes' to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Name of the org	ganization						Employer identifica	tion number		
Lake Ch	amplain Maritime N	Museum at	Basin	Harbon	, Inc.		22-257038	0		
	undraising Activities.					Form	990, Part IV,	line 17.	_	
1 Indica	te whether the organization ra ail solicitations	aised funds thro	ough any o	f the follow	wing activities. Check al	-		1, , <u>2, , , , , , , , , , , , , , , , , </u>	_	
	mail solicitations				Solicitation of gover	-	-			
	hone solicitations				Special fundraising		grants			
	-person solicitations					0.000				
2a Did th	e organization have written or eyees listed in Form 990, Part	r oral agreemer	nt with any	ındıvıdual	l (including officers, dire	ctors, tr	ustees or key	∏Yes ∏	No	
•	s,' list the ten highest paid ind ensated at least \$5,000 by the			•	_		ch the fundraise table			
(i)	Name of individual rentity (fundraiser)	(ii) Activity	(III) Did	fundraiser ly or control ibutions?	(iv) Gross receipts	(v) Ar	mount paid to retained by) aiser listed in col.(i)	(vi) Amount paid to (or retained by) organization	 .o	
		-	Yes	No					_	
			1							
							 			
			 						—	
									_	
		L	1						—	
Total										
3 List all or lice	ll states in which the organiza ensing	ition is registere	ed or licen	sed to soli	cit funds or has been no	otified it	is exempt from	registration		
										

		G (Form 990 or 990-EZ) 2008 Lake Cha						<u>P</u> .	age 2		
Par	t II	Fundraising Events. Complete if reported more than \$15,000 on F	the organization at orm 990-EZ, line 6	nswered 'Yes' to Fo a. List events with	orm 990, Part IV, lii gross receipts grea	ne 18, ater th	or an \$	5,00	0		
	•	-	(a) Event #1	(b) Event #2	(c) Other Events	(Add c	col (a	Even	ts ough		
R			(event type)	(event type)	(total number)		col ((c))			
REVERUE	1	Gross receipts									
Ē	2	Less Charitable contributions									
	3	Gross revenue (line 1 minus line 2)									
	4	Cash prizes .									
D-RECT	5	Non-cash prizes					.				
	6										
EXPEZSES	7 Other direct expenses										
E S	8 Direct expense summary Add lines 4- through 7 in column (d) 9 Net income summary Combine lines 3 and 8 in column (d)										
Par	Part III Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reporte \$15,000 on Form 990-EZ, line 6a.										
********		TO,000 OTT OTT SOU EE, III O GO	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(Add o	Total col (a col.	gamıı a) thro (c))	ng ough		
Ë	1	Gross revenue			45,155.	45,155			.55.		
_	2	Cash prizes			3,000.	3,00			00.		
DIRECT	3	Non-cash prizes .									
C S T E S	4	Rent/facility costs			9,807.	ļ		9,8	807.		
	5	Other direct expenses		N 9	VV 00 00 9						
	6	Volunteer labor	Yes%	Yes%	X Yes 90.00% No						
•	7	Direct expense summary Add lines 2 thro	ough 5 in column (d)		•	<u> </u>		12,8	307.		
	8_	Net gaming income summary Combine li	nes 1 and 7 in column ((d)			_	32,3			
a	Is th	er the state(s) in which the organization op- ne organization licensed to operate gaming o,' Explain				— [9a	YES X	NO		
		e any of the organization's gaming licenseses,' Explain	s revoked, suspended o	r terminated during the	tax year?		10a		X		
11 Does the organization operate gaming activities with nonmembers? 11 X 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to											

Schedule G (Form 990 or 990-EZ) 2008 Lake Champlain Maritime Museum at Basin Harbor, Inc. 22-257038	0	Р	age 3
,	\Box	YES	NO
13 Indicate the percentage of gaming activity operated in:			į
a The organization's facility	.		į
b An outside facility . 13b 100.00%			1
14 Provide the name and address of the person who prepares the organization's gaming/special events books and records			ļ
Name ►Susan Jones			
Address <u>4472 Basin Harbor Road Vergennes</u> , <u>VT 05491</u>			
15a Does the organization have a contact with a third party from whom the organization receives gaming revenue?	15a		X
b If 'Yes,' enter the amount of gaming revenue received by the organization \$ and the amount			
of gaming revenue retained by the third party \$			1
c If 'Yes,' enter name and address:			1
			,
Name. •			
Address <u></u>			
16 Gaming manager information			!
Name ►N/A - This is a once per year "Gala Raffle" administered by staff.			1
Gaming manager compensation ► \$			
Description of services provided			
Director/officer Employee Independent contractor			,
17 Mandatory distributions			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a		<u>X</u>
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the			-
organization's own exempt activities during the tax year ► \$			

SCHEDULE M (Form 990)

Non-Cash Contributions

► To be completed by organizations that answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Lake Champlain Maritime Museum at Basin Harbor, Inc.

Employer identification number 22-2570380

Par	t I Types of Property									
		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Met	(d hod of d rever	letermir	iing		
1	Art-Works of art		·							
2	Art—Historical treasures			· · · · · · · · · · · · · · · · · · ·						
3	Art—Fractional interests			<u> </u>						
4	Books and publications			· ····			•			
5	Clothing and household goods									
6	Cars and other vehicles				·					
7	Boats and planes	Х	4	6,120.	Fetim	ated	EM17			
8	Intellectual property	^_		0,120.	ESCIII	aceu	EMV			
9	Securities—Publicly traded	х	4	29,532.	711077	ao sh	220	Price		
10	Securities—Closely held stock	^	4	29,332.	Avera	ge Si	lare .	rice		
11	Securities—Partnership, LLC, or trust interests									
12										
13	Qualified conservation contribution (historic structures)									
14	Qualified conservation contribution (other)									
15	Real estate—Residential									
16	Real estate—Commercial									
	Real estate—Other									
17 18										
	Collectibles									
	Food inventory									
20	Drugs and medical supplies		-							
21	Taxidermy			4 000	D - b					
22	Historical artifacts	X		4,000.	ESTIN	iated	FMV			
23	Scientific specimens									
24	Archeological artifacts									
25	Other ► ()		-							
26	Other ► ()									
27	Other ► ()									
28	Other ► (l					
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Donee	n during the Acknowledge	tax year for contribution gement	ns for which the	29			0.		
							Yes	No		
30 a	During the year, did the organization receive by co hold for at least three years from the date of the in	ntribution an itial contribu	y property reported in Fition, and which is not re	Part I, lines 1-28 that it equired to be used for e	must xempt		~~~			
	purposes for the entire holding period?					30 a		x		
b	b If 'Yes,' describe the arrangement in Part II.									
	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 X									
32 a	Does the organization hire or use third parties or renoncash contributions?	elated organi	izations to solicit, proce	ess, or sell		32 a		х		
b	If 'Yes,' describe in Part II							1		
33	If the organization did not report revenues in colum describe in Part II	nn (c) for a ty	ype of property for whic	h column (a) is checke	d,					

Schedule	e M (Form 990) 2008	Lake Champla	in Maritime M	Museum at Basin	Harbor, Inc.	22-2570380	Page 2
Part II	Supplemental I and 33. Also co	nformation. Commplete this part	plete this part to for any additiona	o provide the infor al information.	mation required	by Part I, lines 30b	, 32b,
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TEEA4602 07/14/08

Schedule M (Form 990) 2008

BAA

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Name of the organization	Employer identification number						
Lake Champlain Maritime Museum at Basin Harbor, Inc.	22-2570380						
Pt_VI-B, Line 12c The financial business manager monitors and approves							
all disbursements during the year and inquires	o <u>f</u>						
board members of any conflicts of interest.							
Pt VI-A, Line 6 The organization has "members" who receive cer	tain						
benefits but have no role in the governance of	<u>the</u>						
organization.							
Pt VI-A, Line 10 A first draft of the 990 is reviewed by the first	nancial						
business manager and a "final" draft in .pdf fe	ormat						
is circulated to the board of trustees.							
Pt VI-B, Line 15 The board of trustees reviews and approves the	compensation						
of the executive director using formal and inf	ormal						
comparability data with contemporaneous substant	ntiation						
of the deliberation and decision.							
Pt VI-C, Line 19 The organization has never been asked to make	public						
its financial statements, governing documents,	or						
conflict of interest policy and has no formal	policy related						
to the release of these documents.							

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

Briefly describe the organization's mission:

committed to identifying and preserving a central body of knowledge, sites
and artifacts pertinent to the maritime history of the Lake Champlain Region.