Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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.

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

OMB No. 1545-0047

Open to Public

Inspection Internal Revenue Service For the 2023 calendar year, or tax year beginning 2023, and ending 20 National Cambridge Collectors, D Employer identification number Check if applicable: C Name of organization 23-7366120 Address change Doing business as Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite Telephone number P. O. Box 416 (740)432-4245 Initial return Final return/terminated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts Cambridge, OH 43725 411,569. Amended return Application pending F Name and address of principal officer: H(a) Is this a group return for subordinates? Freeman Moore P. O. Box 416 Cambridge, OH 43725H(b) Are all subordinates included? **X** 501(c)(3) 501(c) (4947(a)(1) or If "No," attach a list. See instructions Tax-exempt status: www.cambridgeglass.org Website: H(c) Group exemption number L Year of formation: 1974 Form of organization: X Corporation Trust Association M State of legal domicile: OH Part I Summary Briefly describe the organization's mission or most significant activities: The preservation and study of glass made by the Cambridge Glass Activities & Governance Company. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 12 Number of voting members of the governing body (Part VI, line 1a) 3 12 Number of independent voting members of the governing body (Part VI, line 1b) 4 4 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 50 Total number of volunteers (estimate if necessary) 6 0. Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. Net unrelated business taxable income from Form 990-T, Part I, line 11 7b Prior Year **Current Year** 85,935. 77,188. 105,598. 107,892. Revenue 30,475. 31,262. 10 12,999. 12,780. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 235,007. 229,122. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 21,784. 19,271. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 128,474. 131,678. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 150,949. 150,258. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 78,173.84,749. 19 Beginning of Current Year End of Year Net Assets or Fund Balance 1,495,350. 701,968. 20 Total assets (Part X, line 16) 1,200. 1,200. 21 Total liabilities (Part X, line 26) 1,494,150. 1,700,768. 22 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Here Michael Strebler, Treasurer Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature Paid self-employed Preparer Firm's name Firm's EIN **Use Only** Firm's address Phone no. May the IRS discuss this return with the preparer shown above? See instructions Yes No

Pai	t III	Statement of Program Service Accomplishments
		Check if Schedule O contains a response or note to any line in this Part III
1		escribe the organization's mission:
	The	preservation & study of glass made by the Cambridge Glass Company.
	District.	and the state of t
2		organization undertake any significant program services during the year which were not listed on the rm 990 or 990-EZ?
		describe these new services on Schedule O.
3		organization cease conducting, or make significant changes in how it conducts, any program
•		r:? Tyes X No
		describe these changes on Schedule O.
4		e the organization's program service accomplishments for each of its three largest program services, as measured by
		es. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
		expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$22,801. including grants of \$) (Revenue \$10,106.)
		operates an association of 1,000 members dedicated to the study
		preservation of glassware made by the Cambridge Glass
		pany (1901-1958). The association maintains a website,
		ial media sites, and publishes a newsletter of activities for eral information and other educational material related to
		study of Cambridge Glass. Additionally, the association promotes
		onvention and member meetings in virtual and live formats.
		association is supported by a significant endowment.
4b	(Code:	(Expenses \$ 57,795. including grants of \$) (Revenue \$ 86,764.)
		conducts activities to promote the collecting of Cambridge Glass provide a forum for education. The primary methods are a
		mer annual show and sale held in conjunction with the annual
		vention and a spring auction of Cambridge Glass. Another
		nod is through a gift shop operated in the NCC museum
		se activities promote the exchange of Cambridge Glass among
		ociation members and interested members of the public.
		_
	<u> </u>	\(\(\) \(
4C	(Code:) (Expenses \$61,895. including grants of \$) (Revenue \$11,021.) operates a museum in Cambridge, Ohio for the preservation,
		cation, and promotion of Cambridge Glass. The museum
		plays glass made by the Cambridge Glass Company,
		duction items from factory, other historical materials from the
		pany, and related educational materials. The museum facilities
		lude the formal museum, a storage facility, and a facility working
	act	ivity center.
4d		rogram services (Describe on Schedule O.)
4-	(Expens	140.404
40	rotarpr	ogram service expenses 142,491.

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			l
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"		l	
	complete Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		l	
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
k				٦,
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C				٦,
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
C				
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	_	
6	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	,			v
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a		40-		x
	Schedule D, Parts XI and XII	12a		^
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If	401		x
40	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		^
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	0. 00 0	116		x
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	-	
13	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	13		
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	10		 -
• •	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	—		 -
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10	 	
	If "Yes," complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule.H	20a		X
zua b		20b		-
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
_	, , , , , , , , , , , , , , , , , , ,			

Part IV **Checklist of Required Schedules** (continued) Yes No 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on X 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated X 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b X 24a 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit X 25a 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? X 25b 26 Did the organization report any amount on Part X. line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these Х 27 28 Was the organization a party to a business transaction with one of the following parties (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions). A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If X 28a X 28b A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 28c 29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part L 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," X 32 complete Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 X 34 Did the organization have a controlled entity within the meaning of section 512(b)(13)?............. 35a 35a If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable Х 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization Х and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI. 37 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and X 38 Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response or note to any line in this Part V Yes No 0 1a 0 1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and X 1c

Par	t V	Statements Regarding Other IRS Filings and Tax Compliance (continued)			Yes	No
2a	Enter	the number of employees reported on Form W-3, Transmittal of Wage and Tax				
	State	ments, filed for the calendar year ending with or within the year covered by this return	2a 4			
b	If at le	east one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	Х	
3a	Did th	ne organization have unrelated business gross income of \$1,000 or more during the year?		3a		
b	If "Ye	s," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O \dots		3b		
4a	At an	y time during the calendar year, did the organization have an interest in, or a signature or other authority o	ver,			
	a fina	ncial account in a foreign country (such as a bank account, securities account, or other financial account)	?	4a		X
b	If "Ye	s," enter the name of the foreign country				
	See i	nstructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (F	FBAR).			
5a	Was	the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did a	ny taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
С	If "Ye	s" to line 5a or 5b, did the organization file Form 8886-T?		5c		Х
6a	Does	the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	-	nization solicit any contributions that were not tax deductible as charitable contributions?		6a		Х
b		s," did the organization include with every solicitation an express statement that such contributions or				
		were not tax deductible?		6b		
7	_	nizations that may receive deductible contributions under section 170(c).				
а		ne organization receive a payment in excess of \$75 made partly as a contribution and partly for goods				7,
_		ervices provided to the payor?		7a		Х
b		s," did the organization notify the donor of the value of the goods or services provided?		7b		
С		ne organization sell, exchange, or otherwise dispose of tangible personal property for which it was		-		x
		red to file Form 8282?	1 1 -	7c		Λ
d		s," indicate the number of Forms 8282 filed during the year		7e		X
e f		ne organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e 7f		X
g		organization received a contribution of qualified intellectual property, did the organization file Form 8899 a		7g		X
9 h		organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	•	7h		X
8		soring organizations maintaining donor advised funds. Did a donor advised fund maintained by the				
	-	soring organization have excess business holdings at any time during the year?		8		
9	•	soring organizations maintaining donor advised funds.				
а	Did th	ne sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did th	ne sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Secti	on 501(c)(7) organizations. Enter:				
а	Initiat	ion fees and capital contributions included on Part VIII, line 12	10a			
b	Gross	s receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Secti	on 501(c)(12) organizations. Enter:	1 1			
а		s income from members or shareholders	11a			
b		s income from other sources. (Do not net amounts due or paid to other sources				
	-	st amounts due or received from them.)	[11b			
12a		on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	1 1	12a		
b 42		s," enter the amount of tax-exempt interest received or accrued during the year	12b			
13		on 501(c)(29) qualified nonprofit health insurance issuers. organization licensed to issue qualified health plans in more than one state?		13a		
а		See the instructions for additional information the organization must report on Schedule O.		ısa		
b		the amount of reserves the organization is required to maintain by the states in which	1 1			
		rganization is licensed to issue qualified health plans	13h			
С			13c			
14a		ne organization receive any payments for indoor tanning services during the tax year?		14a		х
b		s," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Ω		14b		
15		organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or				
		ss parachute payment(s) during the year?		15		Х
	If "Ye	s," see the instructions and file Form 4720, Schedule N.				
16	Is the	organization an educational institution subject to the section 4968 excise tax on net investment income?		16		X
	If "Ye	s," complete Form 4720, Schedule O.				
17		on 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities				
		would result in the imposition of an excise tax under section 4951, 4952, or 4953?		17		
	If "Ye	s," complete Form 6069.				

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

<u> </u>	Ction A. Governing Body and Management				
_		10		Yes	No
1a		12			
	If there are material differences in voting rights among members of the governing body, or				
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain on Schedule O.	12			
b		14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			v	
_	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				v
	supervision of officers, directors, trustees, or key employees to a management company or other person?		3		X
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		
6	Did the organization have members or stockholders?	•	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint		_		v
	one or more members of the governing body?	•	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			v	
_	stockholders, or persons other than the governing body?	٠ ١	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during				
_	the year by the following:		0.5	x	
а	The governing body?			X	
b	Each committee with authority to act on behalf of the governing body?	•	8b	Λ_	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at				x
200	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		
) - C	suon b. Foncies (This Section B requests information about policies not required by the internal Nevenue Code.)	<u>'</u>		Yes	No
l0a	Did the organization have local chapters, branches, or affiliates?	Г	10a	163	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	•	IVa		
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
l1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	· h			
l2a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a		х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	·			
-	describe on Schedule O how this was done	_	12c		
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	t	-		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official	. [15a		х
b	Other officers or key employees of the organization		15b		х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	1			
l6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement				
	with a taxable entity during the year?	. [16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the				
	organization's exempt status with respect to such arrangements?		16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed OH				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)				
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.				
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain on Schedule O)				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,				
	and financial statements available to the public during the tax year.	• • •			
20	State the name, address, and telephone number of the person who possesses the organization's books and records. (74				
	National Cambridge Collectors, Inc. P. O. Box 416 Cambridge,	OH	43	725	5

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

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

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

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - · List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees**that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

				(C)					
(A)	(B)				sition			(D)	(E)	(F)
Name and title	Average	'				an one		Reportable	Reportable	Estimated amount
realite data title	hours					both ar trustee)	'	compensation	compensation	of other
	per week					·		from the	from related	compensation
	(list any	or o	ns	Office	Kej	em em	FOI	organization (W-2/ 1099-MISC/	organizations (W-2/ 1099-MISC/	from the organization and
	hours for related	direc	ital	cer	/ em	nest ploye	Former	1099-NEC)	1099-NEC)	related organizations
	organizations	Individual trustee or director	nstitutional trustee		cey employed	ĕ ø				
	below	Istee	trust		Ф	pens				
	dotted line)		Эе			Highest compensated employee				
(1) Freeman Moore	05.00									
BOD/President		X		X						
(2) Ken Filippini	02.00									
Board Member		X								
(3) Douglas Ingraham	03.00									
Board Member		X								
(4) Michael Strebler	10.00									
Treasurer		X		X						
(5) Melinda Thaxton	15.00									
Board Member		Х								
(6) Cindy Arent	20.00									
BOD/VP Museum		Х		X						
(7) Julie Buffenbarger	02.00									
BOD VP/VP Dvelopment		X		X						
(8) Larry Everett	10.00									
BOD/VP Admin.		X		Х						
(9) Christine Smith	02.00									
Secretary		X								
(10) Lynn Welker	02.00									
Board Member		X								
(11) Frank Wollenhaupt	01.00									
Board Member		Х								
(12) Jack Thompson	05.00									
Vice Pres. Education				Х						
(13) Marti DeGraaf	01.00									
Board Member										
(14)										

(A) Name and title	(B) Average hours per week	(do not check more than one box, unless person is both an officer and a director/trustee) week						(D) Reportable compensation from the organization (W-2/	compensati from relate	(E) Reportable compensation from related ganizations (W-2/		(F) ated amount of other npensation rom the	t
	(list any hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-MIS(1099-NEC	C/	orgar	on the nization and I organization	ns
<u>(15)</u>													
(16)													
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
to Subtotal	on A .	 	 					ceived more than	\$100,000	of			_
reportable compensation from the organization	on											Yes N	
 Did the organization list any former officer, director employee on line 1a? If "Yes," complete Schedule For any individual listed on line 1a, is the sum of r 	J for such i	ndivid	ual .								3	Х	
organization and related organizations greater tha	an \$150,000										4	x	
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes	•			•			_				5	х	
Section B. Independent Contractors												•	
Complete this table for your five highest com compensation from the organization. Report	-	-									n's tax	year.	
(A) Name and business address	s							(B) Description of service	es	C	(C) compens	ation	
Total number of independent contractors (increceived more than \$100,000 of compensations)	-				hos	e liste	ed a	bove) who					

		Check if Schedule O contains a resp	onse	or note to any lir	ne in this Part VIII			
				-	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
								sections 512-514
	1a	Federated campaigns	1a					
	b	Membership dues	1b					
ants ints	С	Fundraising events	1c					
ָהָ פַר פֿיַ פֿר	d	Related organizations	1d					
ifts ar A	е	Government grants (contributions)	1e					
inis, o	f	All other contributions, gifts, grants,						
er S		and similar amounts not included above	1f	77,188.				
	g							
Contributions, Gifts, Grants and Other Similar Amounts	١.	lines 1a-1f	1g		77 100			
	h	Total. Add lines 1a-1f			77,188.			
		Admissions to museum		Business Code	11,021.	11,021.		
မ္	2a	Collector events	—		42,586.	42,586.		+
ē Š	D	Collector exchange	—		43,997.	43,997.		+
onu	C	Association meetings			10,106.	10,106.		
yram Serv Revenue	a	Other			182.	182.		
Program Service Revenue	e e	All other program service revenue	_		102.	102.		
₾.		Total. Add lines 2a-2f			107,892.			
	3	Investment income (including dividends, inte						
	•	other similar amounts)			23,322.			23,322.
	4	Income from investment of tax-exempt bond			_			-
	5	Royalties	•					
		(i) Real		(ii) Personal				
	6a	Gross rents 6a 12,78	0.					
	b	Less: rental expenses 6b						
	С	Rental income or (loss) 6c 12,78	0.					
	d	Net rental income or (loss)			12,780.			12,780.
	7a	Gross amount from (i) Securities	3	(ii) Other				
		sales of assets						
		other than inventory 7a 190,38	<u>7.</u>					
	b	Less: cost or other basis	_					
ne		and sales expenses 7b 182,44						
venue	1	Gain or (loss)						
Other Re	1	Net gain or (loss)	<u></u>		7,940.			7,940.
her	8a	Gross income from fundraising						
ŏ		events (not including \$						
		of contributions reported on line						
	Ι.	1c). See Part IV, line 18	8a					
	1	Less: direct expenses	8b					
	1	Net income or (loss) from fundraising events	· —					
	ya	Gross income from gaming	00					
	۱ ۵	activities. See Part IV, line 19	9a 9b					
	1	Less: direct expenses		•				
			Ė					
	IUa	Gross sales of inventory, less returns and allowances	10a					
	Ь	Less: cost of goods sold	10b					
	1	Net income or (loss) from sales of inventory						
		, ,		Business Code				
<u>s</u>	11a	Other						
Miscellanous Revenue	b							
ella ver	С							
Aisc Re	1	All other revenue						
		Total. Add lines 11a-11d			220 122	107 000		44 040
	12	Total revenue. See instructions			229,122.	TU / , 892.	1	44,042.

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). Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses Do not include amounts reported on lines 6b, 7b, Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Compensation of current officers, directors, Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 13,619. 18,104. 4,485. 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 1,167. 1,539. -372. 10 11 Fees for services (nonemployees): Legal...... С Professional fundraising services. See Part IV, line 17. . е 8,458. 8,458. f Other, (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) . . 6,862. 5,551. 1,311. 12 Advertising and promotion 2,837. 45. 2,792. 13 2,860. 2,639. 221. 14 15 27,179. 27,179. 16 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 13,265. 13,265. 19 Conferences, conventions, and meetings 20 21 11,754. 11,754. 22 Depreciation, depletion, and amortization 9,154. 7,804. 1,350. 23 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) Exchange events 29,050. 29,050. 5,792. 5,792. Glass related sale items 14,022.14,022. Newsletter All other 445. 445. d All other expenses 150,949. 132,704. 16,934. 1,311. Total functional expenses. Add lines 1 through 24e . . 25 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)

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Part	X	Balance Sheet					
		Check if Schedule O contains a response or note	to any	line in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			72,453.	1	58,813.
	2	Savings and temporary cash investments		ı		2	
	3	Pledges and grants receivable, net	ı		3		
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any current or former		•			
		trustee, key employee, creator or founder, substantial co					
		controlled entity or family member of any of these person				5	
	6	Loans and other receivables from other disqualified per					
	_	under section 4958(f)(1)), and persons described in sec		6			
S	7	Notes and loans receivable, net		i		7	
Assets	8	Inventories for sale or use				8	
ĕ	9	Prepaid expenses and deferred charges	 i			9	
	10a	Land, buildings, and equipment: cost or other		C70 E70			
		•		672,578.	20F C71		272 017
	b	Less: accumulated depreciation		398,661.	285,671.	10c	273,917.
	11	Investments - publicly traded securities			839,613.	11	1,071,625.
	12	Investments - other securities. See Part IV, line 11	ı		12		
	13	Investments - program-related. See Part IV, line 11 .		13			
	14	Intangible assets		207 612	14	207 612	
	15	Other assets. See Part IV, line 11			297,613. 1,495,350.	15	297,613. 1,701,968.
	16	Total assets. Add lines 1 through 15 (must equal line 3)			1,495,350.	16	1,/01,900.
	17	Accounts payable and accrued expenses			17		
	18	Grants payable		18			
	19	Deferred revenue		19	_		
	20	Tax-exempt bond liabilities		20	_		
	21	Escrow or custodial account liability. Complete Part IV o		21			
Liabilities	22	Loans and other payables to any current or former offic					
ij		trustee, key employee, creator or founder, substantial or				22	
Lia	23	controlled entity or family member of any of these person				23	
	23 24	Secured mortgages and notes payable to unrelated thir Unsecured notes and loans payable to unrelated third p		ı		24	
	25	Other liabilities (including federal income tax, payables				24	
	23	parties, and other liabilities not included on lines 17-24).					
		of Schedule D			1,200.	25	1,200.
	26	Total liabilities. Add lines 17 through 25			1,200.	26	1,200.
		Organizations that follow FASB ASC 958, check here]				
		and complete lines 27, 28, 32, and 33.	==				
ces	27				1,357,163.	27	1,564,134.
ılan	28				136,987.	28	136,987.
B		Organizations that do not follow FASB ASC 958, chec					
ou n		and complete lines 29 through 33.					
Ē	29	Capital stock or trust principal, or current funds				29	
ts c	30	Paid-in or capital surplus, or land, building, or equipmen				30	
sse	31	Retained earnings, endowment, accumulated income, or		1		31	
Net Assets or Fund Balances	32	Total net assets or fund balances			1,494,150.	32	1,701,121.
Š	33	Total liabilities and net assets/fund balances			1,495,350.	33	1,702,321.
					,	, ,,,	

Form **990** (2023)

Form	n 990 (2023) National Cambridge Collectors, Inc.	23-7	3661	20	Page '	12
Pa	rt XI Reconciliation of Net Assets		•			
	Check if Schedule O contains a response or note to any line in this Part XI				🗆	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	29,	122.	•
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	50,	949.	•
3	Revenue less expenses. Subtract line 2 from line 1	3		78,	173.	•
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			150.	
5	Net unrealized gains (losses) on investments	5	1	28,	445.	•
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	1,7	00,	768.	•
Pa	rt XII Financial Statements and Reporting	'				
	Check if Schedule O contains a response or note to any line in this Part XII				🖂	
	•			Y	es No	_ >
1	Accounting method used to prepare the Form 990: 🔀 Cash 🗌 Accrual 🔲 Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2	а	x	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both.					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		. 2	b	х	
	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 Consolidated basis Both consolidated and separate basis					
С						
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2	c		
	If the organization changed either its oversight process or selection process during the tax year, explain on					
	Schedule O.					
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3	a	x	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					_
-	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3	ь		

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SCHEDULE A

(Form 990)

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.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

Inspection Employer identification number Name of the organization 23-7366120 National Cambridge Collectors, Inc. 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 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 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 name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 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). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. **b** Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **d** Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 other support (see listed in your governing support (see document? above (see instructions)) instructions) instructions) Yes (A) (B) (C) (D)

(E) Total

National Cambridge Collectors, Inc	National	Cambridge	Collectors,	Inc.
------------------------------------	----------	-----------	-------------	------

	1,00201101 0011011030 00110000127 11101	
Part II	Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and	1 170(b)(1)(A)(vi)
	(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization	on failed to qualify under
	Part III. If the organization fails to qualify under the tests listed below, please comple	ete Part III.)

Section	on A. Public Support	<u> </u>		•	•	,	
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a governmental						
	unit or publicly supported organization)						
	included on line 1 that exceeds 2%						
	of the amount shown on line 11,						
	column (f)						
6 Sooti	Public support. Subtract line 5 from line 4. on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(a) 2022	(f) Total
7	Amounts from line 4	(a) 2019	(b) 2020	(6) 2021	(u) 2022	(e) 2023	(I) I Olai
8	Gross income from interest, dividends,						
0	payments received on securities loans,						
	rents, royalties, and income from similar						
	sources						
9	Net income from unrelated business						
Ū	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	. (see instructi	ions)			12	
13	First 5 years. If the Form 990 is for the o						1(c)(3)
	organization, check this box and stop he	re					
Secti	on C. Computation of Public Suppo	rt Percentaç	ge				
14	Public support percentage for 2023 (line 6	6, column (f),	divided by line	11, column (f)))	14	%
15	Public support percentage from 2022 Sch					15	%
16a	33 1/3 % support test-2023. If the organi						
	box and stop here. The organization qua	-		-			_
b	33 1/3 % support test-2022. If the organ						
	check this box and stop here. The organi	-			-		
17a	10%-facts-and-circumstances test–202	•					
	10% or more, and if the organization me						
	Part VI how the organization meets the fa			-	-		
_	organization.						
b	10%-facts-and-circumstances test–202	•					
	15 is 10% or more, and if the organization					_	
	Explain in Part VI how the organization m				~	-	
10	supported organization						_
18	instructions						
		<u> </u>					

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Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 48,665. 89,538. 85,935. 77,188.383,980. 82,654. 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 27,447. 95,415.105,598.107,891.447,451. 111,100. 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 The value of services or facilities 5 furnished by a governmental unit to the organization without charge 159,765.110,101.184,953.191,533.185,079.831,431. **Total.** Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons. . . . **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year **c** Add lines 7a and 7b. Public support. (Subtract line 7c from 831,431. Section B. Total Support Calendar year (or fiscal year beginning in) (d) 2022 (a) 2019 **(b)** 2020 (c) 2021 (e) 2023 (f) Total Amounts from line 6 159,765. 110,101. 184,953. 191,533. 185,079. 831,431. 10a Gross income from interest, dividends, payments received on securities loans, rents. 28,821. 32,482. 36,103.159,652. royalties, and income from similar sources . . 29,793. 32,453. **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 **c** Add lines 10a and 10b 29,793. 28,821. 32,453. 32,482. 36,103.159,652. Net income from unrelated business activities not included on 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 VI.) Total support. (Add lines 9, 10c, 11, 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 14 organization, check this box and stop here. Section C. Computation of Public Support Percentage Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)). . . . 15 83.89% Public support percentage from 2022 Schedule A, Part III, line 15 16 84.18% Section D. Computation of Investment Income Percentage Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)). . . . 16.11% Investment income percentage from 2022 Schedule A, Part III, line 17. 15.82% 19a 331/3 % support tests-2023. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 17 is not more than 331/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization. • X b 331/3 % support tests-2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3 %, and

line 18 is not more than 331/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . .

Part IV Supporting Organizations

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

Section	A. All	Supporting	Organizations

1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated by class or purpose, describe the designation. If historic and continuing relationship, explain. 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI on the organization determined that the supported organization was described in section 509(a)(1) or (2). 3 Did the organization are supported organization dualified under section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below. 4 Did the organization end that each supported organization qualified under section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below. 5 Did the organization end that each supported organization are supported organization. 6 Did the organization are that all support to such organizations was used exclusively for section 170(c)(2)(B) supported organization and surported organization. 7 "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below. 8 Did the organization and unitimate control and discretion in deciding whether to make grants to the foreign supported organization had such control and discretion in deciding whether to make grants to the foreign supported organization had such control and discretion in deciding whether to make grants to the foreign supported organization had such control and discretion in deciding whether to make grants to the foreign supported organization had such control and discretion in deciding whether to make grants to the foreign supported organization had such control and discretion in deciding whether to make grants to the foreign supported organization had such control and discretion in deciding whether to make grants to the foreign supported organization had such as supported organization and the supported organization and such as supported organiza				Yes	No
documents? If "No." describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. 2 Did the organization have any supported organization that does not have an IRS determination of status under section 503(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization have a supported organization described in section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(1) or (2). 3 Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. 2 Did the organization oconfirm that each support to such organizations was used exclusively for section 170(c)(2)(8) purposes? If "Yes," explain in Part VI what controls the organization was used exclusively for section 170(c)(2)(8) purposes? If "Yes," explain in Part VI what controls the organization have under section 501(c) 40 or 60 o	1	Are all of the organization's supported organizations listed by name in the organization's governing			
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). 3 Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. 5 Did the organization confirm that each support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. 4 Was any supported organization to troganized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12 or 12 b in Part I, answer lines 4b and 4c below. 5 Did the organization and utilitization control and discretion despite being controlled or supervised by or in connection with its supported organizations. 6 Did the organization support any foreign supported organizations had such control and discretion despite being controlled or supervised by or in connection with its supported organization used to ensure that all support any foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 5 Did the organization add, substitute, or remove any supported organizations benefits or ensure that all supported organizations and the supported organization was used exclusively for section 170(c)(2)(B) purposes. 5 Did the organization and, substitute, or remove any supported organizations during the tax year? If "Yes," and if you checked box 12 or 12 b in Part VI. 6 Did the organization should be used to the organization was used exclusively for section 170(c)(2)(B) purposes. 5 Did the organization should be		documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
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under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizating document). 5b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5c Substitutions only. Was the substitution the result of an event beyond the organization's control? 5b Did the organization provide supported organizations, or (iii) other supporting organizations that also support or benefit one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 7 Did the organization make a loan to a disqualified person (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990). 7 Did the organization make a loan to a disqualified person (as defined in section 4948) not de			4b		
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disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI. c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9b 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below. 10a 10a 10b 10c 10c 10d 10d 10d 10d 10d 10d		If "Yes," complete Part I of Schedule L (Form 990).	8		
in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI. c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9b 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below. 10a 10a	9a				
 b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI. c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9c Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below. b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to 					
the supporting organization had an interest? If "Yes," provide detail in Part VI. c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9c 9c 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below. 10a 10a			9a		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below. 10a 10a	b				
from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below. b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to		•	9b		
Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below. 10a 10a	С				
4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i> b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			9с		
supporting organizations)? If "Yes," answer line 10b below. b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	I0a				
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to					
			10a		
	b		10h		

Part	Supporting Organizations (continued)			
4.4			Yes	No
11 a	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
-		11a		
b	· · · · · · · · · · · · · · · · · · ·	11b		
		11c		
Section	on B. Type I Supporting Organizations			
1	Did the governing body, members of the governing body, officers acting in their official capacity, or memberships of one or		Yes	No
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organizations's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively			
	operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
_		1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
	·		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
	·		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Section	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	struc	tions	;).
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i> ☐ The organization supported a governmental entity. <i>Describe in Part VI how you supported a governmental entity.</i>	ntitu	(000	
С	instructions).	rility (see	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	61		
2	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>	2b		
3 a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
~	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Ves " describe in Part VI the role played by the organization in this regard	2h		l

Schedule A (Form 990) 2023 National Cambridge Collectors	3,	Inc. 23	-7366120 Page C
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgar	nizations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	trus	t on Nov. 20, 1970 <i>(expla</i>	ain in Part VI).
See instructions. All other Type III non-functionally integrated supporting of	orgar	nizations must complete S	Sections A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		, , ,
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 	6		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

UYA Schedule A (Form 990) 2023

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continu	ued)
	on D - Distributions	1	Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8	
9	Distributable amount for 2023 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	
S	ection E - Distribution Allocations (see instructions) (i) Excess Distributions Underdistributions	ns	(iii) Distributable

10	Line 8 amount divided by line 9 amount		10	
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required- explain in Part VI). See instr.			
3	Excess distributions carryover, if any, to 2023			
a	From 2018			
b	From 2019			
C	From 2020			
d	From 2021			
e	From 2022			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI.</i> See instructions.			
7	Excess distributions carryover to 2024. Add lines 3j			
'	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2019			
b	Excess from 2020			
	Excess from 2021			
d	Excess from 2022			
е	Excess from 2023			

UYA Schedule A (Form 990) 2023

SCHEDULE D (Form 990)

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification number Name of the organization

	ional Cambridge Collectors, 1			<u>3-736</u>	
Part				or Acc	ounts
	Complete if the organization answered "	es" on Form 990), Part IV, line 6.		
		(a) Donor	advised funds	(b)	Funds and other accounts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in	writing that the assets	s held in donor advised fund	ds are the	organization's
	property, subject to the organization's exclusive legal control	-			
6	Did the organization inform all grantees, donors, and donor				
	purposes and not for the benefit of the donor or donor advisor	=	=		aa
	private benefit?				Yes No
Part					
r are	Complete if the organization answered ")	es" on Form 990) Part IV line 7		
1	Purpose(s) of conservation easements held by the organizar	`	<u>~</u>		when the notion of the notion
	Preservation of land for public use (for example, recreat	ion or education)	Preservation of historic		
	Protection of natural habitat		Preservation of a certif	ied histor	ic structure
_	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a quali	ified conservation conf	tribution in the form of a cor	nservation	
	of the tax year.				Held at the End of the Tax Year
а	Total number of conservation easements				
b	Total acreage restricted by conservation easements			. 2b	
С	Number of conservation easements on a certified historic st	ructure included on lin	ie 2a	. 2c	
d	Number of conservation easements included on line 2c acqu				
	structure listed in the National Register			. 2d	
3	Number of conservation easements modified, transferred, re	eleased, extinguished,	or terminated by the		
	organization during the tax year				
4	Number of states where property subject to conservation ea	sement is located			
5	Does the organization have a written policy regarding the pe	riodic monitoring, insp	ection, handling of violation	ıs,	
	and enforcement of the conservation easements it holds? .				Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations,	and enforcing conservation	n easeme	nts during the year
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and	l enforcing conservation ea	sements o	during the year
	,		•		
8	Does each conservation easement reported on line 2d above	e satisfy the requireme	ents of section 170(h)(4)(B)	(i)	
	and section 170(h)(4)(B)(ii)?		() () (` '	
9	In Part XIII, describe how the organization reports conservation				- -
•	include, if applicable, the text of the footnote to the organizat		•		•
	conservation easements.	oa.ro.a. o tato	one mar accombce and orga		accounting to
Part		s of Art. Historic	al Treasures, or Ot	her Sin	nilar Assets
	Complete if the organization answered ")				
	If the organization elected, as permitted under FASB ASC 9			ance shee	at works
ıu	of art, historical treasures, or other similar assets held for pu	•			
	service, provide in Part XIII the text of the footnote to its final			nce or pur	Olic
	**				aulan af
b	If the organization elected, as permitted under FASB ASC 9				
	art, historical treasures, or other similar assets held for publicate itself and for publicate i	ic exhibition, education	i, or research in furtherance	e or public	S SEI VICE,
	provide the following amounts relating to these items.			_	
	(i) Revenue included on Form 990, Part VIII, line 1				
	(ii) Assets included in Form 990, Part X				
2	If the organization received or held works of art, historical tre	easures, or other simila	ar assets for financial gain,	provide th	ne following amounts
	required to be reported under FASB ASC 958 relating to the				
а	Revenue included on Form 990, Part VIII, line 1			\$ _	
h	Assets included in Form 990, Part X			•	

Schedule D (Form 990) 2023 UYA

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))

273,917.

Schedule D (Form 990) 2023 National Cambridge Collection	ctors, Inc.	2	3-7366120 Page
Part VII Investments — Other Securities	n 000 Port IV line	11h Soo Form	000 Port V line 12
Complete if the organization answered "Yes" on Form (a) Description of security or category	(b) Book value		thod of valuation:
(including name of security)	(b) Book value	, ,	nd-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C) (D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments — Program Related Complete if the organization answered "Yes" on Form	m 000 Port IV line	110 Coo Form	000 Port V line 12
(a) Description of investment	(b) Book value		thod of valuation:
(a) Description of investment	(b) Book value	• •	nd-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u> (8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes" on Forn	n 990, Part IV, line	e 11d. See Form	
(a) Description			(b) Book value
(1) Museum exhibition collection			297,613
(<u>2</u>) (<u>3</u>)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))			207 612
Part X Other Liabilities			297,613
Complete if the organization answered "Yes" on Form	n 990, Part IV, line	e 11e or 11f. See	Form 990, Part X,
line 25.			·
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) Tenant occupancy deposit			1,200
(3)			
(4)			
(5) (6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))			1,200

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

Part	XI Reconciliation of Revenue per Audited Financial Stateme	nts '	With Revenue per I	Retu	rn
	Complete if the organization answered "Yes" on Form 990, Pa	art I\	/, line 12a.		
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:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1		;	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	
Part				er Re	turn
	Complete if the organization answered "Yes" on Form 990, Pa	art I\	/, line 12a.		
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	
	XIII Supplemental Information				
Provide	the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1, and 1, 1, an	es 1b	and 2b; Part V, line 4; Pa	rt X, lir	ne 2;
Part XI,	lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ad	dition	al information.		

Schedule D (Form 990) 2023 National Cambridge Collectors, Inc. 23-7366120 Page 5 Part XIII Supplemental Information (continued)	Schedule D (Form 990) 2023	National	Cambridge	Collectors,	Inc.	23-7366120	Page 5
	Part XIII	Supplemen	ntal Informatio	n (continued)				

SCHEDULE M (Form 990)

Noncash Contributions

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

2023
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990.

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

National Cambridge Collectors, Inc.

23-7366120

Employer identification number

Part	Types of Property			1	
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art – Works of art				
2	Art – Historical treasures				
3	Art – Fractional interests				
4	Books and publications				
5	Clothing and household				
	goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities – Publicly traded				
10	Securities – Closely held stock				
11	Securities – Partnership, LLC,				
	or trust interests				
12	Securities – Miscellaneous				
13	Qualified conservation				
	contribution – Historic				
	structures				
14	Qualified conservation				
	contribution – Other				
15	Real estate – Residential				
16	Real estate – Commercial				
17	Real estate – Other				
18	Collectibles	х	100		Not valued
19	Food inventory.				
20	Drugs and medical supplies				
21	Taxidermy.				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ()				
26	Other ()				
27	Other ()				
28	Other (
29	Number of Forms 8283 received by the	organization	during the tax year for contributi	ions for which the	
	organization completed Form 8283, Part				29 0
	,	,	3		Yes No
30a	During the year, did the organization rec	eive by contr	ibution any property reported in	Part I, lines 1 through 28,	
	that it must hold for at least 3 years from			_	empt
	purposes for the entire holding period?				
b	If "Yes," describe the arrangement in Pa				
31	Does the organization have a gift accept		hat requires the review of any no	onstandard	
•	contributions?		•		31 X
32a	Does the organization hire or use third p				· · · · · · · · • · • · • · • · • · • · • · • · • · · · ·
o_u	contributions?		· · ·	,	32a X
b	If "Yes," describe in Part II.				21
33	If the organization didn't report an amount	nt in column	(c) for a type of property for which	ch column (a) is checked	
55	describe in Part II.	ik iii ooluliiii	(o) for a type of property for will	on column (a) is unconcu,	
	GCCC.IDO III I GIVIII				

Schedule M	(Form 990) 2023	National	Cambridge	Collectors,	Inc.	23-7366120	Page 2
Part II	Supplemental In	formation. Prov	ide the informa	tion required by Pa	rt I, lines 30b	23-7366120 o, 32b, and 33, and who	ether
	the organization is	s reporting in Part	t I, column (b), t	he number of contri	ibutions, the	number of items receive	∕ed,
	or a combination	of both. Also com	plete this part fo	or any additional inf	ormation.		
				,			

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

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 Form 990-EZ.

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

OMB No. 1545-0047

2023
Open to Public Inspection

Name of the organization	Employer identification number
National Cambridge Collectors, Inc.	23-7366120
1.400101141 0411011141	

Name of the organization	Employer identification number
National Cambridge Collectors, Inc.	23-7366120
Part VI Line 2	
Two board members are siblings.	
Part VI Line 6	
Members	
Part VI Line 7a	
Members elect the board of directors.	
Part VI Line 7b	
Constitution and bylaw changes approvd by membership	
Part VI Line 11b	
The Form 990 is reviewed by the Finance Committee, then	submitted to the
Part VI Line 11b	
to the Board of Directors	
Part VI Line 19	
Governing documents, applicable policies, and financial	statements are
Part VI Line 19	
are available on request.	