

Forms 990 / 990-EZ Return Summary

For calendar year 2024, or tax year beginning _____, and ending _____

Society for Creative Anachronism, 45-3458268
New York, Inc.

Net Asset / Fund Balance at Beginning of Year		<u>216,944</u>
Revenue		
Contributions	<u>11,563</u>	
Program service revenue	<u>131,552</u>	
Investment income	<u>22</u>	
Capital gain / loss	<u> </u>	
Fundraising / Gaming:		
Gross revenue	<u> </u>	
Direct expenses	<u> </u>	
Net income	<u> </u>	
Other income	<u>173</u>	
Total revenue		<u>143,310</u>
Expenses		
Program services	<u> </u>	
Management and general	<u> </u>	
Fundraising	<u> </u>	
Total expenses		<u>123,367</u>
Excess / (deficit)		<u>19,943</u>
Changes		<u> </u>
Net Asset / Fund Balance at End of Year		<u><u>236,887</u></u>

Reconciliation of Revenue

Total revenue per financial statements	<u> </u>
Less:	
Unrealized gains	<u> </u>
Donated services	<u> </u>
Recoveries	<u> </u>
Other	<u> </u>
Plus:	
Investment expenses	<u> </u>
Other	<u> </u>
Total revenue per return	<u><u> </u></u>

Reconciliation of Expenses

Total expenses per financial statements	<u> </u>
Less:	
Donated services	<u> </u>
Prior year adjustments	<u> </u>
Losses	<u> </u>
Other	<u> </u>
Plus:	
Investment expenses	<u> </u>
Other	<u> </u>
Total expenses per return	<u><u> </u></u>

		Balance Sheet		
		Beginning	Ending	Differences
Assets		<u>217,269</u>	<u>239,055</u>	
Liabilities		<u>325</u>	<u>2,168</u>	
Net assets		<u><u>216,944</u></u>	<u><u>236,887</u></u>	<u>19,943</u>

Miscellaneous Information

Amended return _____

Return / extended due date 11/17/25

Failure to file penalty _____

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2024

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

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

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form990EZ for instructions and the latest information.

A For the 2024 calendar year, or tax year beginning , and ending

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Society for Creative Anachronism, New York, Inc.		D Employer identification number 45-3458268
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite PO Box 66347		E Telephone number 408-263-9305
	City or town, state or province, country, and ZIP or foreign postal code Scotts Valley CA 95067		F Group Exemption Number 5802
	G Accounting Method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual Other (specify) _____		H Check <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990).
I Website: <u>www.sca.org</u>			
J Tax-exempt status (check only one) — <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			

K Form of organization: Corporation Trust Association Other _____

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ \$ 143,310

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

		1	2	3	4	5a	5b	5c	6a	6b	6c	6d	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21
Revenue	1	Contributions, gifts, grants, and similar amounts received																11,563											
	2	Program service revenue including government fees and contracts																131,552											
	3	Membership dues and assessments																											
	4	Investment income																22											
	5a	Gross amount from sale of assets other than inventory																											
	5b	Less: cost or other basis and sales expenses																											
	5c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)																											
	6	Gaming and fundraising events:																											
		a	Gross income from gaming (attach Schedule G if greater than \$15,000)																										
		b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)																										
		c	Less: direct expenses from gaming and fundraising events																										
	6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)																											
	7a	Gross sales of inventory, less returns and allowances																											
	7b	Less: cost of goods sold																											
7c	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)																												
8	Other revenue (describe in Schedule O)																173												
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8																143,310												
Expenses	10	Grants and similar amounts paid (list in Schedule O)																											
	11	Benefits paid to or for members																											
	12	Salaries, other compensation, and employee benefits																											
	13	Professional fees and other payments to independent contractors																											
	14	Occupancy, rent, utilities, and maintenance																50,728											
	15	Printing, publications, postage, and shipping																774											
	16	Other expenses (describe in Schedule O)																71,865											
17	Total expenses. Add lines 10 through 16																123,367												
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 9)																19,943											
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)																216,944											
	20	Other changes in net assets or fund balances (explain in Schedule O)																											
	21	Net assets or fund balances at end of year. Combine lines 18 through 20																236,887											

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2024)

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	209,676	22	231,664
23 Land and buildings	0	23	
24 Other assets (describe in Schedule O)	7,593	24	7,391
25 Total assets	217,269	25	239,055
26 Total liabilities (describe in Schedule O)	325	26	2,168
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	216,944	27	236,887

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose?
Recreation and study of Medieval and Renaissance History.

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
 (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

28 Events - Local & regional meetings held by members and open to the public			
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a		116,732
29			
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a		
30			
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a		
31 Other program services (describe in Schedule O)			
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a		
32 Total program service expenses (add lines 28a through 31a)	32		116,732

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC (if not paid, enter -0-))	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Krista Capps Director	0.25	0	0	0
Megan O'Shea Director	0.25	0	0	0
Jonathan Foster Director	0.25	0	0	0
Joan Steurer Director	0.25	0	0	0
Richard Pug Bainter Director	0.25	0	0	0
Katherine Poore Director	0.25	0	0	0
K.T. Sheppard Vice-Chair	0.25	0	0	0
Christopher Mark Faulcon Chair	0.25	0	0	0
Bao Pham President	0.25	0	0	0
Louise Du Cray VP Corp/ Secretary	0.25	0	0	0
Carolyn Richardson Treasurer	0.25	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?
35b If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O
35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N
37a Enter amount of political expenditures, direct or indirect, as described in the instructions
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If "Yes," complete Schedule L, Part II, and enter the total amount involved
39 Section 501(c)(7) organizations. Enter:
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911; section 4912; section 4955
40b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I
40c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
40d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization
40e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T
41 List the states with which a copy of this return is filed: NY
42a The organization's books are in care of: Louise Du Cray Telephone no. 408-263-9305
PO Box 66347
Located at Scotts Valley CA ZIP + 4 95067
42b 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)? If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).
42c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country:
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 43
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44c Did the organization receive any payments for indoor tanning services during the year?
44d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

Table with Yes/No columns and a row for question 46 with 'X' in the No column.

Part VI Section 501(c)(3) Organizations Only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
49a Did the organization make any transfers to an exempt non-charitable related organization?
b If "Yes," was the related organization a section 527 organization?

Table with Yes/No columns and rows for questions 47, 48, 49a, and 49b.

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 5 columns: (a) Name and title of each employee, (b) Average hours per week devoted to position, (c) Reportable compensation, (d) Health benefits, (e) Estimated amount of other compensation.

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 3 columns: (a) Name and business address of each independent contractor, (b) Type of service, (c) Compensation.

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a completed Schedule A

X Yes No

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 Here Signature of officer Louise Du Cray VP Corp/ Secretary Date

Paid Preparer Use Only Print/Type preparer's name, Preparer's signature, Date, Check if self-employed, PTIN, Firm's name, Firm's address, Firm's EIN, Phone no.

May the IRS discuss this return with the preparer shown above? See instructions

X Yes No

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization Society for Creative Anachronism, New York, Inc.	Employer identification number 45-3458268
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Part I 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.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 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:
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 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.**
 - 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.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

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

Section A. Public Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 9 Net income from unrelated business activities; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10.

12 Gross receipts from related activities, etc. (see instructions) 12
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) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) 14 %
15 Public support percentage from 2023 Schedule A, Part II, line 14 15 %
16a 33 1/3% support test — 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
b 33 1/3% support test — 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
17a 10%-facts-and-circumstances test — 2024. 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 VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization
b 10%-facts-and-circumstances test — 2023. 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 VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

(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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	16,510	17,134	11,070	15,805	11,563	72,082
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	17,310	22,222	96,873	100,425	131,725	368,555
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	33,820	39,356	107,943	116,230	143,288	440,637
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						
8 Public support. (Subtract line 7c from line 6.)						440,637

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6	33,820	39,356	107,943	116,230	143,288	440,637
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	41	25	21	21	22	130
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	41	25	21	21	22	130
11 Net income from unrelated business activities not included on line 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 VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	33,861	39,381	107,964	116,251	143,310	440,767
14 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) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	99.97 %
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	99.95 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests — 2024. 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 — 2023. If the organization did not check a box on line 14 or line 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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 on 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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b 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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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 organizing document).</i>		
b 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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>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.</i>		
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? <i>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.</i>		
1		
2		

Section 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)? <i>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).</i>		
1		

Section 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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
1		
2		
3		

Section 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 instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a 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? <i>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 each of its supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>			
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? <i>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.</i>			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
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? <i>If "Yes" or "No," provide details in Part VI.</i>			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
2a			
2b			
3a			
3b			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete 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)	6	
7	Other expenses (see instructions)	7	
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).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D – Distributions	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 2024 from Section C, line 6	9
10 Line 8 amount divided by line 9 amount	10

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, 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 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

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 instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization	Society for Creative Anachronism, New York, Inc.	Employer identification number	45-3458268
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Form 990-EZ, Part I, Line 8 - Other Revenue

Description	Amount
Other sales income	\$ 173
Total	\$ 173

Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
Expenses	
Travel	\$ 300
Bank charges	\$ 175
Equipment rental & mainte	\$ 7,243
Food	\$ 24,113
General supplies	\$ 9,240
Donations other Non Profi	\$ 18,627
Transfers out within King	\$ 8,534
Fees & honoraria	\$ 1,991
Non-investment Depreciation	\$ 1,642
Total	\$ 71,865

Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beg. of Year	End of Year
Accounts Receivable	\$ 182	\$ 882
Prepaid Expenses and Deferred Charges	\$ 2,678	\$ 3,618
	\$ 31,531	\$ 31,531
Less Accumulated Depreciation	\$ 26,998	\$ 28,640
Other Assets	\$ 200	\$ 0
Total	\$ 7,593	\$ 7,391

Form 990-EZ, Part II, Line 26 - Other Liabilities

Description	Beg. of Year	End of Year
Accounts Payable and Accrued Expenses	\$ 196	\$ 598
Deferred Revenue	\$ 129	\$ 1,570
Payables	\$ 0	\$ 0

Form 990-EZ, Part III, Line 31 - All Other Accomplishment

Events - Local & regional meetings held by members and open to the public

Form **4562**

Department of the Treasury
Internal Revenue Service

Depreciation and Amortization
(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2024

Attachment Sequence No. **179**

Name(s) shown on return **Society for Creative Anachronism,
New York, Inc.** Identifying number **45-3458268**

Business or activity to which this form relates
Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,220,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	3,050,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2023 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2025. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	148

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2024	17	1,494
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B—Assets Placed in Service During 2024 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property		27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i	Nonresidential real property		39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2024 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year		30 yrs.	MM	S/L	
d	40-year		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	1,642
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2024)

DAA

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Federal Asset Report

FYE: 12/31/2024

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
<u>Prior MACRS:</u>									
1	Trailer	6/01/07	4,940			4,940	5 HY 200DB	4,940	0
2	Trailer	6/01/02	2,491		X	1,744	5 HY 200DB	2,491	0
3	Pennsic Gate	6/01/02	885		X	619	7 HY 200DB	885	0
4	Pavillion	6/01/97	2,038			2,038	7 HY 200DB	2,038	0
6	Pavillion	6/01/11	935			935	7 HY 200DB	935	0
8	Canopy	6/15/13	2,594		X	1,297	7 HY 200DB	2,594	0
9	Trailer	1/01/14	2,595		X	1,297	7 HY 200DB	2,595	0
11	Ballista	1/01/16	650		X	325	7 HY 200DB	650	0
12	Water Heater	1/01/16	614		X	307	7 HY 200DB	614	0
15	New Trailer	1/01/19	6,364		X	367	5 HY 200DB	5,997	367
16	Marquee Panther 18x24 w/setup pkg	12/31/22	4,075		X	2,495	7 MQ 200DB	1,580	713
17	Pavillion	6/30/23	1,690			1,690	7 HY 200DB	241	414
			<u>29,871</u>			<u>18,054</u>		<u>25,560</u>	<u>1,494</u>
<u>Other Depreciation:</u>									
14	Pavillion Roof	1/01/18	1,660			1,660	7 MO S/L	1,438	148
	Total Other Depreciation		<u>1,660</u>			<u>1,660</u>		<u>1,438</u>	<u>148</u>
	Total ACRS and Other Depreciation		<u>1,660</u>			<u>1,660</u>		<u>1,438</u>	<u>148</u>
	Grand Totals		31,531			19,714		26,998	1,642
	Less: Dispositions and Transfers		0			0		0	0
	Less: Start-up/Org Expense		0			0		0	0
	Net Grand Totals		<u>31,531</u>			<u>19,714</u>		<u>26,998</u>	<u>1,642</u>

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NY Asset Report

FYE: 12/31/2024

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	NY Prior	NY Current	Federal Current	Difference Fed - NY
<u>Prior MACRS:</u>								
1	Trailer	6/01/07	4,940	4,940	4,940	0	0	0
2	Trailer	6/01/02	2,491	1,744	2,491	0	0	0
3	Pennsic Gate	6/01/02	885	619	885	0	0	0
4	Pavillion	6/01/97	2,038	2,038	2,038	0	0	0
6	Pavillion	6/01/11	935	935	935	0	0	0
8	Canopy	6/15/13	2,594	2,594	2,594	0	0	0
9	Trailer	1/01/14	2,595	2,595	2,595	0	0	0
11	Ballista	1/01/16	650	650	650	0	0	0
12	Water Heater	1/01/16	614	614	614	0	0	0
15	New Trailer	1/01/19	6,364	6,364	5,997	367	367	0
16	Marquee Panther 18x24 w/setup pkg	12/31/22	4,075	4,075	1,580	713	713	0
17	Pavillion	6/30/23	1,690	1,690	241	414	414	0
			<u>29,871</u>	<u>28,858</u>	<u>25,560</u>	<u>1,494</u>	<u>1,494</u>	<u>0</u>
<u>Other Depreciation:</u>								
14	Pavillion Roof	1/01/18	1,660	1,660	1,438	148	148	0
	Total Other Depreciation		<u>1,660</u>	<u>1,660</u>	<u>1,438</u>	<u>148</u>	<u>148</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>1,660</u>	<u>1,660</u>	<u>1,438</u>	<u>148</u>	<u>148</u>	<u>0</u>
	Grand Totals		31,531	30,518	26,998	1,642	1,642	0
	Less: Dispositions		0	0	0	0	0	0
	Less: Start-up/Org Expense		0	0	0	0	0	0
	Net Grand Totals		<u>31,531</u>	<u>30,518</u>	<u>26,998</u>	<u>1,642</u>	<u>1,642</u>	<u>0</u>

-*8268

AMT Asset Report

FYE: 12/31/2024

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Prior MACRS:									
1	Trailer	6/01/07	4,940			4,940	5 HY 200DB	4,940	0
2	Trailer	6/01/02	2,491		X	1,744	5 HY 200DB	2,491	0
3	Pennsic Gate	6/01/02	885		X	619	7 HY 200DB	885	0
4	Pavillion	6/01/97	2,038			2,038	10 HY 150DB	2,038	0
6	Pavillion	6/01/11	935			935	7 HY 200DB	935	0
8	Canopy	6/15/13	2,594		X	1,297	7 HY 200DB	2,594	0
9	Trailer	1/01/14	2,595		X	1,297	7 HY 200DB	2,595	0
12	Water Heater	1/01/16	614		X	307	7 HY 200DB	614	0
15	New Trailer	1/01/19	6,364		X	367	5 HY 200DB	5,997	367
16	Marquee Panther 18x24 w/setup pkg	12/31/22	4,075		X	2,495	7 MQ 200DB	1,580	713
17	Pavillion	6/30/23	1,690			1,690	7 HY 200DB	241	414
			<u>29,221</u>			<u>17,729</u>		<u>24,910</u>	<u>1,494</u>
Other Depreciation:									
11	Ballista	1/01/16	0			0	0 HY	0	0
14	Pavillion Roof	1/01/18	1,660			1,660	7 MO S/L	1,438	148
	Total Other Depreciation		<u>1,660</u>			<u>1,660</u>		<u>1,438</u>	<u>148</u>
	Total ACRS and Other Depreciation		<u>1,660</u>			<u>1,660</u>		<u>1,438</u>	<u>148</u>
	Grand Totals		30,881			19,389		26,348	1,642
	Less: Dispositions and Transfers		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	Net Grand Totals		<u>30,881</u>			<u>19,389</u>		<u>26,348</u>	<u>1,642</u>

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Bonus Depreciation Report

FYE: 12/31/2024

Form 990, Page 1

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
2	Trailer	6/01/02	2,491		0	0	747	1,744
3	Pennsic Gate	6/01/02	885		0	0	266	619
8	Canopy	6/15/13	2,594		0	0	1,297	1,297
9	Trailer	1/01/14	2,595		0	0	1,298	1,297
11	Ballista	1/01/16	650		0	0	325	325
12	Water Heater	1/01/16	614		0	0	307	307
15	New Trailer	1/01/19	6,364		0	0	5,997	367
16	Marquee Panther 18x24 w/setup pkg	12/31/22	4,075		0	0	1,580	2,495
Grand Total			<u>20,268</u>		<u>0</u>	<u>0</u>	<u>11,817</u>	<u>8,451</u>

Depreciation Adjustment Report

All Business Activities

Form	Unit	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences
MACRS Adjustments:						
Page 1	1	1	Trailer	0	0	0
Page 1	1	2	Trailer	0	0	0
Page 1	1	3	Pennsic Gate	0	0	0
Page 1	1	4	Pavillion	0	0	0
Page 1	1	6	Pavillion	0	0	0
Page 1	1	8	Canopy	0	0	0
Page 1	1	9	Trailer	0	0	0
Page 1	1	12	Water Heater	0	0	0
Page 1	1	15	New Trailer	367	367	0
Page 1	1	16	Marquee Panther 18x24 w/setup pkg	713	713	0
Page 1	1	17	Pavillion	414	414	0
				<u>1,494</u>	<u>1,494</u>	<u>0</u>

-*8268

Future Depreciation Report **FYE: 12/31/25**

FYE: 12/31/2024

Form 990, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
Prior MACRS:					
1	Trailer	6/01/07	4,940	0	0
2	Trailer	6/01/02	2,491	0	0
3	Pennsic Gate	6/01/02	885	0	0
4	Pavillion	6/01/97	2,038	0	0
6	Pavillion	6/01/11	935	0	0
8	Canopy	6/15/13	2,594	0	0
9	Trailer	1/01/14	2,595	0	0
11	Ballista	1/01/16	650	0	0
12	Water Heater	1/01/16	614	0	0
15	New Trailer	1/01/19	6,364	0	0
16	Marquee Panther 18x24 w/setup pkg	12/31/22	4,075	509	509
17	Pavillion	6/30/23	1,690	296	296
			<u>29,871</u>	<u>805</u>	<u>805</u>
Other Depreciation:					
14	Pavillion Roof	1/01/18	1,660	74	74
	Total Other Depreciation		<u>1,660</u>	<u>74</u>	<u>74</u>
	Total ACRS and Other Depreciation		<u>1,660</u>	<u>74</u>	<u>74</u>
	Grand Totals		<u>31,531</u>	<u>879</u>	<u>879</u>

NY Future Depreciation Report**FYE: 12/31/25**

FYE: 12/31/2024

Form 990, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>NY</u>
<u>Prior MACRS:</u>				
1	Trailer	6/01/07	4,940	0
2	Trailer	6/01/02	2,491	0
3	Pennsic Gate	6/01/02	885	0
4	Pavillion	6/01/97	2,038	0
6	Pavillion	6/01/11	935	0
8	Canopy	6/15/13	2,594	0
9	Trailer	1/01/14	2,595	0
11	Ballista	1/01/16	650	0
12	Water Heater	1/01/16	614	0
15	New Trailer	1/01/19	6,364	0
16	Marquee Panther 18x24 w/setup pkg	12/31/22	4,075	509
17	Pavillion	6/30/23	1,690	296
			<u>29,871</u>	<u>805</u>
<u>Other Depreciation:</u>				
14	Pavillion Roof	1/01/18	1,660	74
	Total Other Depreciation		<u>1,660</u>	<u>74</u>
	Total ACRS and Other Depreciation		<u>1,660</u>	<u>74</u>
	Grand Totals		<u>31,531</u>	<u>879</u>

Federal Statements

Schedule A, Part III, Line 1(e)

Description	Amount
Fund raising - external	\$ 1,053
Direct Contributions	10,125
Other income	385
Total	<u>\$ 11,563</u>

Schedule A, Part III, Line 2(e)

Description	Amount
Events	\$ 123,018
Transfers Within Kingdom	8,534
Other sales income	173
Total	<u>\$ 131,725</u>

Schedule A, Part III, Line 10a(e)

Description	Amount
Interest Income	\$ 22
Total	<u>\$ 22</u>