

PUBLIC DISCLOSURE COPY - STATE REGISTRATION NO. 10-88-15
Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

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.

2023

Open to Public Inspection

A For the **2023** calendar year, or tax year beginning and ending

B Check if applicable: <input 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 BUFFALO & ERIE COUNTY HISTORICAL SOCIETY		D Employer identification number 16-6000166
	Doing business as THE BUFFALO HISTORY MUSEUM		
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite ONE MUSEUM COURT		E Telephone number (716) 873-9644
	City or town, state or province, country, and ZIP or foreign postal code BUFFALO, NY 14216		
	F Name and address of principal officer: KEVIN BRADY SAME AS C ABOVE		

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: **WWW.BUFFALOHISTORY.ORG**

K Form of organization: Corporation Trust Association Other

L Year of formation: **1862** **M** State of legal domicile: **NY**

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: COLLECT & PRESERVE ARTIFACTS; SHARE LOCAL STORIES; CREATE EXHIBITS & PROGRAMS; EDUCATE & ENTERTAIN		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	22
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	22
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	28
	6 Total number of volunteers (estimate if necessary)	6	40
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	1,890,172.	1,074,650.
	9 Program service revenue (Part VIII, line 2g)	127,115.	173,053.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	166,020.	236,048.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	98,456.	115,356.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,281,763.	1,599,107.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,052,071.	1,097,121.
16 a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) 444,817.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,039,901.	1,081,680.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,091,972.	2,178,801.	
19 Revenue less expenses. Subtract line 18 from line 12	189,791.	-579,694.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 8,331,761.	End of Year 8,205,885.
	21 Total liabilities (Part X, line 26)	488,537.	672,117.
	22 Net assets or fund balances. Subtract line 21 from line 20	7,843,224.	7,533,768.

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 Here	Signature of officer	Date			
	KEVIN BRADY, BOARD PRESIDENT Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name ROBERT S. TORELLA	Preparer's signature ROBERT S. TORELLA	Date 08/08/24	Check if self-employed <input type="checkbox"/>	PTIN P03156259
	Firm's name LUMSDEN & MCCORMICK, LLP	Firm's EIN 16-0765486	Firm's address 369 FRANKLIN STREET BUFFALO, NY 14202	Phone no. (716) 856-3300	

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: EXPERIENCING HISTORY WITH YOU, BY REMEMBERING, DISCOVERING, SAFEKEEPING, AND SHARING OUR STORIES; LEARNING AND EXPLORING TOGETHER; SPARKING EMOTIONAL AND SOCIAL CONNECTIONS WITHIN OUR UNIQUE COMMUNITY.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 518,119. including grants of \$) (Revenue \$) MUSEUM COLLECTIONS - CATALOGUE AND SAFEGUARD A VAST ARRAY OF TREASURES. MORE THAN 100,000 PHYSICAL OBJECTS AND OVER 220,000 ARCHIVAL ITEMS COMPRISE OUR COLLECTION AND SHAPE OUR UNDERSTANDING OF WNY'S STORY. CUSTOMIZED ARTIFACT STORAGE UNITS AND CLIMATE CONTROLLED STORAGE AREAS ARE FEATURES OF OUR OFF-SITE COLLECTIONS FACILITY. THREE FULL-TIME STAFF MEMBERS, TOGETHER WITH SPECIALLY TRAINED INTERNS AND VOLUNTEERS, CARE FOR THE COLLECTIONS. THEY PROCESS NEW DONATIONS AND CONDUCT INVENTORY WORK IN ACCORDANCE WITH OUR COLLECTIONS MANAGEMENT POLICY AND PROCESSING MANUAL. COLLECTIONS STAFF ALSO PRIORITIZE AND RECOMMEND ARTIFACTS FOR CONSERVATION TREATMENT. ANNUALLY, WE SPEND AT LEAST \$20,000 ON ARTIFACT CONSERVATION FROM A FUND RESTRICTED FOR COLLECTIONS CARE AUGMENTED BY SPECIAL GRANTS AND DESIGNATED GIFTS.

4b (Code:) (Expenses \$ 545,816. including grants of \$) (Revenue \$ 223,382.) MUSEUM PROGRAM AND EXHIBITS - THE BUFFALO HISTORY MUSEUM PLAYS A CRITICAL ROLE IN BOTH PRESERVING THE LEGACY OF OUR REGION AND UNDERSTANDING THE UNIQUE CHARACTER AND CULTURAL IDENTITIES OF ITS PEOPLE. WE ARE DISTINCTIVELY LOCATED AT THE CROSSROADS OF PAST AND FUTURE A VIBRANT, HISTORIC DESTINATION SET AT THE HEART OF A RE-ENERGIZED CULTURAL CORRIDOR. SINCE 1862, WE HAVE SERVED AS THE COMMUNITY'S HISTORICAL AMBASSADOR, THE DEDICATED SAFEKEEPER AND STORYTELLER OF OUR COLLECTIVE MEMORY. THROUGH A COLLECTION OF NEARLY 500,000 OBJECTS AND AN EVER-CHANGING ARRAY OF EXHIBITS AND PROGRAMS, WE SHARE THE STORIES OF OUR REGION'S TRIUMPHS AND STRUGGLES. OUR 2020-2030 MASTER PLAN BUILDS ON OUR GENERATIONS-LONG COMMITMENT TO WESTERN NEW YORK BY ESTABLISHING A NEW VISION AND BY REFOCUSING ON HOW WE ENGAGE

4c (Code:) (Expenses \$ 101,244. including grants of \$) (Revenue \$) LIBRARY - RESPONSIBLE FOR ALL TWO-DIMENSIONAL ITEMS IN THE COLLECTION: BOOKS, PAMPHLETS, LETTERS, DIARIES, PERSONAL PAPERS, ORGANIZATIONAL & BUSINESS RECORDS, PERIODICALS, NEWSPAPERS, SCRAPBOOKS, PHOTOGRAPHS, POSTCARDS, PRINTS, DRAWINGS, POSTERS, MAPS, ATLASES, MICROFILMS, AND EVEN SOME DVDS.

IN 2023, NEARLY 549 PATRONS USED OUR LIBRARY'S RESOURCES FOR ON-SITE RESEARCH, MANY OF THEM ON MULTIPLE OCCASIONS. THE DIRECTOR OF THE LIBRARY AND 1 PART-TIME ASSISTANT SERVICED THESE GUESTS AND TOURS, ANSWERED HUNDREDS OF TELEPHONE AND EMAIL QUERIES, AND SCANNED HUNDREDS OF ARTIFACTS TO FULFILL REQUESTS.

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 1,165,179.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding organizational reporting, compensation, bond issues, and controlled entities.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (22), 1b (22), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NY
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.
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
LYNN PEISCH - 716-873-9644
ONE MUSEUM COURT, BUFFALO, NY 14216-3119

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 the 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.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MELISSA BROWN EXECUTIVE DIRECTOR	40.00			X			92,388.	0.	10,715.	
(2) KEVIN BRADY PRESIDENT	1.00	X		X			0.	0.	0.	
(3) ANNE CONABLE VICE PRESIDENT	1.00	X		X			0.	0.	0.	
(4) CASSIE IRISH VICE PRESIDENT	1.00	X		X			0.	0.	0.	
(5) MELISSA LEONARD VICE PRESIDENT	1.00	X		X			0.	0.	0.	
(6) JULIAN LOONEY VICE PRESIDENT	1.00	X		X			0.	0.	0.	
(7) BILL O'DONNELL VICE PRESIDENT	1.00	X		X			0.	0.	0.	
(8) ALEXANDER SCHIMERT VICE PRESIDENT	1.00	X		X			0.	0.	0.	
(9) AARON SIEGEL VICE PRESIDENT	1.00	X		X			0.	0.	0.	
(10) BRIAN DEMPSEY TREASURER	1.00	X		X			0.	0.	0.	
(11) SANDY STARKS SECRETARY	1.00	X		X			0.	0.	0.	
(12) GAILE AMIGONE MANAGER	1.00	X					0.	0.	0.	
(13) LISA MARIE ANSELM, PH.D. MANAGER	1.00	X					0.	0.	0.	
(14) MOLLY BOSCARINO MANAGER THROUGH OCT. 2023	1.00	X					0.	0.	0.	
(15) ROSARIO CHETTA MANAGER	1.00	X					0.	0.	0.	
(16) CHRISTOPHER COPELAND MANAGER	1.00	X					0.	0.	0.	
(17) NOEL EMERLING MANAGER	1.00	X					0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) TERRENCE GILBRIDE MANAGER THROUGH DEC. 2023	1.00	X						0.	0.	0.
(19) KARNA HOLMES MANAGER THROUGH MAY 2023	1.00	X						0.	0.	0.
(20) BHARAT KOHLI MANAGER THROUGH MAY 2023	1.00	X						0.	0.	0.
(21) MARK L. MARTIN MANAGER	1.00	X						0.	0.	0.
(22) BARBARA A. SEALS NEVERGOLD, PH. MANAGER	1.00	X						0.	0.	0.
(23) MICHAEL QUINNIEY MANAGER	1.00	X						0.	0.	0.
(24) STUART ROCKEFELLER MANAGER	1.00	X						0.	0.	0.
(25) MARK TAYLOR MANAGER	1.00	X						0.	0.	0.
(26) GREG TRANTER MANAGER THROUGH MAY 2023	1.00	X						0.	0.	0.
1b Subtotal								92,388.	0.	10,715.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								92,388.	0.	10,715.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) RACHEL WEISSFIELD MANAGER THROUGH MAY 2023	1.00	X						0.	0.	0.
(28) JUDGE PENNY WOLFGANG MANAGER	1.00	X						0.	0.	0.
(29) LISA YAEGER MANAGER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line 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	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	70,525.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	508,920.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	495,205.				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f			1,074,650.			
Program Service Revenue	2 a ADMISSIONS	Business Code	713990	113,784.	113,784.		
	b MEMBERSHIPS	Business Code	713990	59,269.	59,269.		
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			173,053.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			77,438.		77,438.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real	98,861.			
			(ii) Personal				
	b Less: rental expenses	6b		0.			
	c Rental income or (loss)	6c		98,861.			
	d Net rental income or (loss)			98,861.		98,861.	
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	338,039.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b		179,429.			
	c Gain or (loss)	7c		158,610.			
	d Net gain or (loss)			158,610.		158,610.	
8 a Gross income from fundraising events (not including \$ 70,525. of contributions reported on line 1c). See Part IV, line 18	8a		33,703.				
b Less: direct expenses	8b		67,537.				
c Net income or (loss) from fundraising events			-33,834.		-33,834.		
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a		83,694.				
b Less: cost of goods sold	10b		33,365.				
c Net income or (loss) from sales of inventory			50,329.	50,329.			
Miscellaneous Revenue	11 a	Business Code					
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			1,599,107.	223,382.	0.	301,075.	

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to 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				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	103,103.	36,086.	15,465.	51,552.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	818,696.	485,653.	88,372.	244,671.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	43,737.	19,325.	16,752.	7,660.
9 Other employee benefits	57,159.	24,929.	20,984.	11,246.
10 Payroll taxes	74,426.	41,962.	9,116.	23,348.
11 Fees for services (nonemployees):				
a Management				
b Legal	3,383.		3,383.	
c Accounting	118,226.		118,226.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	34,513.		34,513.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	159,200.	31,988.	102,297.	24,915.
12 Advertising and promotion	25,768.		699.	25,069.
13 Office expenses	48,200.	8,680.	23,261.	16,259.
14 Information technology				
15 Royalties				
16 Occupancy	137,013.	64,580.	68,328.	4,105.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	9,786.	160.	7,787.	1,839.
20 Interest	28,183.	25,733.	771.	1,679.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	315,338.	284,579.	12,190.	18,569.
23 Insurance	58,921.	53,799.	1,612.	3,510.
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.)				
a CONSERVATION AND ACQUIS	41,502.	41,502.		
b EXHIBIT PRODUCTION	26,156.	26,156.		
c DUES	11,972.	3,728.	3,260.	4,984.
d EQUIPMENT RENTAL AND MA	5,537.	2,121.	3,272.	144.
e All other expenses _____	57,982.	14,198.	38,517.	5,267.
25 Total functional expenses. Add lines 1 through 24e	2,178,801.	1,165,179.	568,805.	444,817.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	106,326.	1	69,534.
	2 Savings and temporary cash investments	233,925.	2	11,482.
	3 Pledges and grants receivable, net	52,618.	3	93,898.
	4 Accounts receivable, net	300.	4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	31,487.	8	30,266.
	9 Prepaid expenses and deferred charges	15,344.	9	29,039.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 13,662,631.		
	b Less: accumulated depreciation	10b 9,064,959.	4,720,615.	10c 4,597,672.
	11 Investments - publicly traded securities	3,171,146.	11	3,373,994.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	8,331,761.	16	8,205,885.	
Liabilities	17 Accounts payable and accrued expenses	179,719.	17	290,063.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	308,818.	23	382,054.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	488,537.	26	672,117.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	6,157,682.	27	6,045,692.
	28 Net assets with donor restrictions	1,685,542.	28	1,488,076.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	7,843,224.	32	7,533,768.
	33 Total liabilities and net assets/fund balances	8,331,761.	33	8,205,885.

Part 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	1,599,107.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,178,801.
3	Revenue less expenses. Subtract line 2 from line 1	3	-579,694.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7,843,224.
5	Net unrealized gains (losses) on investments	5	270,238.
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	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	7,533,768.

Part XII Financial Statements and Reporting

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

- 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?
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?
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
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a 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?
- 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

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2023)

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

2023

Open to Public Inspection

Name of the organization: BUFFALO & ERIE COUNTY HISTORICAL SOCIETY
Employer identification number: 16-6000166

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 [X] 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).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Includes a Total row at the bottom.

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

Calendar 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.")	852,081.	1697845.	2356143.	1890172.	1074650.	7870891.
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	852,081.	1697845.	2356143.	1890172.	1074650.	7870891.
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)						105,655.
6 Public support. Subtract line 5 from line 4.						7765236.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	852,081.	1697845.	2356143.	1890172.	1074650.	7870891.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	148,885.	70,119.	119,326.	143,042.	176,299.	657,671.
9 Net income from unrelated business 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.)	102,179.	10,825.	310,723.	122,248.	104,228.	650,203.
11 Total support. Add lines 7 through 10						9178765.
12 Gross receipts from related activities, etc. (see instructions)					12	804,426.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	84.60	%
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	84.66	%
16a 33 1/3% support test - 2023. 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			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2022. 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			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2023. 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			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2022. 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			<input type="checkbox"/>
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			<input type="checkbox"/>

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) 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 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 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						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included 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.)						

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**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2023. 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 - 2022. 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 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

	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 those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
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 (<i>explain in detail in Part VI</i>):		
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	<input type="checkbox"/> 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 - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). 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 (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2023 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-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 - <i>explain in Part VI</i>). See instructions.			
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: \$			
a 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, <i>explain in Part VI</i> . 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			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

Schedule A (Form 990) 2023

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

GROSS INCOME FROM FUNDRAISING EVENTS

2019 AMOUNT: \$ 102,179.

2020 AMOUNT: \$ 10,825.

2021 AMOUNT: \$ 19,124.

2022 AMOUNT: \$ 122,248.

2023 AMOUNT: \$ 104,228.

EMPLOYEE RETENTION CREDIT

2021 AMOUNT: \$ 291,599.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization BUFFALO & ERIE COUNTY HISTORICAL SOCIETY Employer identification number 16-6000166

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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 held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Revenue, Assets. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	761,757.	956,488.	822,119.	751,691.	737,274.
b Contributions	1,500.	7,000.	100,250.	6,630.	65,500.
c Net investment earnings, gains, and losses	97,379.	-141,864.	91,668.	88,798.	140,216.
d Grants or scholarships					
e Other expenditures for facilities and programs	45,819.	59,867.	57,549.	25,000.	191,299.
f Administrative expenses					
g End of year balance	814,817.	761,757.	956,488.	822,119.	751,691.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment 61.8360%
 - c Term endowment 38.1640%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------------------------|-------------------------------------|
| (i) Unrelated organizations? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) Related organizations? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		9,105,457.	5,196,141.	3,909,316.
c Leasehold improvements				
d Equipment		1,510,769.	1,426,788.	83,981.
e Other		3,046,405.	2,442,030.	604,375.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				4,597,672.

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	1,858,641.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a 270,238.		
b	Donated services and use of facilities	2b 23,809.		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	294,047.
3	Subtract line 2e from line 1		3	1,564,594.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 34,513.		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	34,513.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	1,599,107.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	2,168,097.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a 23,809.		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	23,809.
3	Subtract line 2e from line 1		3	2,144,288.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 34,513.		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	34,513.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	2,178,801.

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 1A:

THE MUSEUM DOES NOT CAPITALIZE ITS COLLECTIONS, CONSISTING OF VARIOUS LITERATURE AND ARTIFACTS RELATED TO THE HISTORY OF WESTERN NEW YORK. PROCEEDS FROM THE SALE OR DISPOSITION OF COLLECTION ITEMS ARE RECORDED AS DEACCESSIONS REVENUE AND ARE USED FOR FURTHER ACQUISITION, REPLACEMENT OR DIRECT CARE, WHICH INCLUDES CONSERVATION AND PRESERVATION, OF COLLECTIONS.

PART III, LINE 4:

THE ENTIRE COLLECTION IS HELD IN TRUST FOR THE PUBLIC AND IS AVAILABLE FOR RESEARCH AND EXHIBITION. OUR COLLECTIONS DELIBERATELY REFLECT OUR MISSION, STEWARDED, MANAGED AND DEVELOPED FOR OVER 150 YEARS. THE ARTIFACTS REPRESENT LOCAL AND REGIONAL CONNECTIONS TO NATIONAL THEMES IN AMERICAN

Part XIII Supplemental Information (continued)

HISTORY. THE HISTORICAL SOCIETY'S COLLECTION HIGHLIGHTS INCLUDE: - THE
NATIVE AMERICAN COLLECTION DOCUMENTS WNY'S FIRST INHABITANTS. - THE
REGION'S IMMIGRATION NARRATIVE IS REPRESENTED BY PERSONAL AND HOUSEHOLD
EFFECTS FROM THE AREA'S DIVERSE ETHNIC AND CULTURAL GROUPS. -
INDUSTRIALIZATION, LONG-DISTANCE TRANSMISSION OF ELECTRICITY, COMMERCE,
TECHNOLOGY, AND POST-INDUSTRIALIZATION ARE EXPRESSED THROUGH ARTIFACTS
FROM THE ERIE CANAL, PAN AMERICAN EXPOSITION, BETHLEHEM STEEL, BELL
AERONAUTICS, SHIPPING, AUTOMOTIVE AND BIOTECH FIRMS. - ARTIFACTS,
BEGINNING WITH THE WAR OF 1812, ILLUSTRATE THE LOCAL CONNECTION TO THE
NATION'S MILITARY HISTORY, AS WELL AS PROTECTION OF OUR INTERNATIONAL
BORDER AND CIVILIAN EFFORTS ON THE HOME FRONT, ARE ABUNDANT. - OBJECTS
FOCUSING ON PRESIDENTIAL HISTORY, MOST NOTABLY FILLMORE, CLEVELAND,
MCKINLEY, AND THEODORE ROOSEVELT, CAN BE FOUND IN THE COLLECTION. - WE
PRESERVE THE LARGEST COLLECTION OF TEXTILES IN WNY, FEATURING QUILTS,
SAMPLERS, LACE AND CLOTHING. - THE GLASS AND CERAMICS COLLECTIONS TRACK
DEVELOPMENTS IN TECHNOLOGY, DESIGN, AND CONSUMER TASTES DURING THE 18TH,
19TH, AND 20TH CENTURIES. - THE PAINTING COLLECTION DOCUMENTS TWO
CENTURIES OF THE REGION'S CHANGING LANDSCAPE, AND THE PEOPLE WHO HELPED
SHAPE THE AREA'S HISTORY. - OUR RESEARCH LIBRARY CONTAINS 20,000 BOOKS;
200,000 IMAGES; 7,000 POSTCARDS; 2,000 MANUSCRIPT COLLECTIONS; 7,000
MICROFILMS; AND 10,000 MAPS, PLANS, AND DRAWINGS.

PART V, LINE 4:

INVESTMENT EARNINGS ON THE ENDOWMENT FUNDS ARE USED FOR OPERATIONS OF THE
MUSEUM ONCE APPROPRIATED BY THE BOARD OF MANAGERS. THE CORPUS OF THE
ENDOWMENT FUNDS ARE INVESTED IN PERPETUITY.

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

2023

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Name of the organization

BUFFALO & ERIE COUNTY HISTORICAL SOCIETY

Employer identification number

16-6000166

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
a Mail solicitations
b Internet and email solicitations
c Phone solicitations
d In-person solicitations
e Solicitation of non-government grants
f Solicitation of government grants
g Special fundraising events
2 a Did the organization have a written or oral agreement with any individual...
b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements...

Table with 6 columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col. (i), (vi) Amount paid to (or retained by) organization. Includes a Total row at the bottom.

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		RED JACKET DINNER	PARTY ON THE PORTICO	3	
	Revenue	(event type)	(event type)	(total number)	
1	Gross receipts	63,320.	31,964.	8,944.	104,228.
2	Less: Contributions	61,150.	8,875.	500.	70,525.
3	Gross income (line 1 minus line 2)	2,170.	23,089.	8,444.	33,703.
Direct Expenses					
4	Cash prizes				
5	Noncash prizes				
6	Rent/facility costs				
7	Food and beverages	23,050.	1,883.	2,256.	27,189.
8	Entertainment	2,767.	5,500.	1,468.	9,735.
9	Other direct expenses	3,455.	21,976.	5,182.	30,613.
10	Direct expense summary. Add lines 4 through 9 in column (d)				67,537.
11	Net income summary. Subtract line 10 from line 3, column (d)				-33,834.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
1	Gross revenue				
Direct Expenses					
2	Cash prizes				
3	Noncash prizes				
4	Rent/facility costs				
5	Other direct expenses				
6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____

c If "Yes," enter name and address of the third party:

Name _____

Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation \$ _____

Description of services provided _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2023

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization **BUFFALO & ERIE COUNTY HISTORICAL SOCIETY** Employer identification number **16-6000166**

Part I Types of Property

	(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	X	14		
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				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts	X	2,359		
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 contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2023

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 33:

PER THE MUSEUM ACCOUNTING ELECTION, IT DOES NOT CAPITALIZE ITS
COLLECTION AND THEREFORE THESE ITEMS ARE NOT VALUED FOR FINANCIAL
REPORTING PURPOSES.

**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

BUFFALO & ERIE COUNTY HISTORICAL SOCIETY

Employer identification number

16-6000166

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

**ACCEPTED 1600 THREE-DIMENSIONAL ITEMS TO BE ACCESSIONED, HIGHLIGHTS
INCLUDING: 1554 BUFFALO BILLS ITEMS AS PART OF THE GREG D. TRANTER
DONATION; NEARLY A DOZEN LOCAL WORKS OF ART, A PHARMACY BOTTLE
COLLECTION, AND CONTEMPORARY MATERIAL ASSOCIATED WITH LOCAL SERVICE
MEMBERS.**

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

**WITH COMMUNITIES TO SHARE THEIR HISTORIES FROM THEIR PERSPECTIVES. OUR
GOAL IS TO FOSTER AN ATMOSPHERE OF STORYTELLING, CONVERSATION, AND
ENGAGEMENT THAT IS BUILT ON INPUT FROM OUR WHOLE COMMUNITY. WE AIM TO
CREATE CONTENT AND CONNECT WITH PEOPLE OF DIVERSE BACKGROUNDS, SHARING
DIFFERENT PERSPECTIVES ON HISTORY AND HOW IT CONNECTS WITH CONTEMPORARY
ISSUES. WE BELIEVE SHARING IN LOCAL HISTORY BUILDS AND FOSTERS
COMMUNITY, CREATING A STRONGER SENSE OF PLACE AND IMPROVING QUALITY OF
LIFE. IN A RECENT SURVEY, ALMOST 60% OF OUR VISITORS SAID THAT THE
MUSEUM CONTRIBUTES TO THEIR QUALITY OF LIFE.**

CREATING ACCESS FOR ALL TO EXPERIENCE HISTORY

**-COMPLETE COLLECTIONS STUDIES AND PLAN FOR CENTRALIZING COLLECTIONS AT
OUR RESOURCE CENTER.**

**-OFFER VIRTUAL AND IN-PERSON EDUCATIONAL EXPERIENCES PROVIDING LOCAL
STUDENTS THE CHANCE TO DISCOVER THEIR HISTORY, SUPPORTING AND
REINFORCING THE WORK OF LOCAL EDUCATORS.**

-AWARD-WINNING PODCAST REACHING AUDIENCES FAR BEYOND OUR WALLS WITH

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

Schedule O (Form 990) 2023

LHA 332211 11-14-23

Name of the organization BUFFALO & ERIE COUNTY HISTORICAL SOCIETY	Employer identification number 16-6000166
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OVER 50,000 DOWNLOADS TO DATE AND LISTENERS IN EVERY STATE AND OVER 30 COUNTRIES.

-DIGITIZING MORE COLLECTIONS RECORDS WITH TRANSITION TO PASTPERFECT ONLINE EDITION

-WORKED WITH UB IDEA CENTER TO DEVELOP UNIVERSAL ACCESS PLAN

COLLECT AND PRESERVE OUR COMMUNITY'S STORIES

-CONTINUE DEVELOPING OUR NEW CONTEMPORARY COLLECTING INITIATIVES, INCLUDING: COVID PANDEMIC AND BLIZZARDS OF 1977/2022.

-CONFRONT WHITE SUPREMACY AND SYSTEMIC RACISM WITH OUR PARTNERS IN THE MAY 14TH BUFFALO MASSACRE COMMUNITY MEMORY COALITION

-CONTINUE TO BUILD PASTPERFECT ONLINE ARTIFACT DATABASE, PROVIDING REMOTE ACCESS TO COLLECTIONS BY ADDING MORE RECORDS AND VIDEO/AUDIO CONTENT WHEREVER POSSIBLE.

-CREATE ACCESS TO RESOURCES DIGITALLY INCLUDING A PERSONAL NAME INDEX TO OUR COLLECTION OF ERIE COUNTY CLERK RECORDS

-CONTINUE DIGITAL PRESERVATION INITIATIVE WITH NEWSPAPERS.COM CREATING ACCESS TO OUR VAST NEWSPAPER COLLECTION.

-CONTINUE TO FOSTER RELATIONSHIPS WITH UNIVERSITY OF BUFFALO, BUFFALO STATE UNIVERSITY, AND OTHER HIGHER EDUCATION PROGRAMS, CREATING INTERNSHIP OPPORTUNITIES FOR THEIR STUDENTS TO DEVELOP RESEARCH AND COLLECTIONS MANAGEMENT SKILLS.

-STEWARD THE ONLY STANDING STRUCTURE FROM THE 1901 PAN AMERICAN EXPOSITION, A NATIONAL HISTORIC LANDMARK BUILDING OVERLOOKING MIRROR LAKE AND OLMSTED'S DELAWARE PARK.

EXHIBITS, PROGRAMS ATTRACT DIVERSE AUDIENCES

-TO RESCUE THE COLOR: SALVAGED RENDERINGS OF THE RAINBOW CITY

Name of the organization BUFFALO & ERIE COUNTY HISTORICAL SOCIETY	Employer identification number 16-6000166
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FEATURED MORE THAN A HALF-DOZEN COLORIZED RENDERINGS OF THE 1901 PAN-AMERICAN EXPOSITION. THE RENDERINGS REVEAL AN IMPORTANT FEATURE OF THE EXPOSITION THAT BLACK-AND-WHITE PHOTOS AND FILM FOOTAGE NEVER COULD, THE DAZZLING COLOR SCHEME AT THE FAIR DESIGNED BY ARTIST AND ILLUSTRATOR C.Y. TURNER, THE DIRECTOR OF COLOR FOR THE PAN-AM. THE RENDERINGS WERE ORIGINALLY NOT INTENDED TO LAST AND WERE NEARLY DISCARDED IN THE FALL OF 1901. ARTIST CARL HIRSCHBERG, A COLLEAGUE OF TURNER'S, SALVAGED THEM, RECOGNIZED THEIR HISTORIC IMPORTANCE AS ONE OF THE FEW INDICATORS OF THE EXPOSITION'S NOTED COLOR SCHEME, AND DONATED THEM TO THE BUFFALO HISTORICAL SOCIETY TO ENSURE THEIR CARE. THE MUSEUM INVESTED MORE THAN \$50,000 OVER A SEVEN-YEAR SPAN TO CONSERVE AND FRAME THE RENDERINGS, WHICH DEPICT THE EXPOSITION'S HORTICULTURAL, GRAPHIC ARTS, AND FORESTRY BUILDINGS.

-HISTORY MAKERS II INTRODUCES GUESTS TO THE STORIES OF EIGHTEEN OF OUR COMMUNITY'S MOST NOTABLE OR IMPACTFUL MEN AND WOMEN PAIRED WITH OBJECTS AND PORTRAITS ILLUMINATING THEIR STORY. FEATURED SUBJECTS INCLUDE JOHN ALBRIGHT, GLENN CURTISS, WINIFRED STANLEY, EVA NOLES, WILLIAM WELLS BROWN, WILLIAM FARGO, AND MORE THAN A DOZEN ADDITIONAL FIGURES FROM THE 18TH, 19TH, AND 20TH CENTURIES.

-ONE OF THE MOST ICONIC PIECES IN THE BUFFALO HISTORY MUSEUM'S COLLECTION, A MASTERWORK FROM A NATIONALLY SIGNIFICANT ARTIST, IS BACK ON DISPLAY INSIDE THE MUSEUM FOR THE FIRST TIME IN OVER A DECADE. IN 1868, ARTIST JOHN MIX STANLEY COMPLETED HIS MONUMENTAL CANVAS, THE TRIAL OF RED JACKET. THE 9-BY-6 FOOT OIL PAINTING FEATURES SEVENTY-FOUR FIGURES AT THE BUFFALO CREEK RESERVATION. AT THE CENTER IS SENECA ORATOR SAGOYEWATHA, ALSO KNOWN AS RED JACKET, WHO IS SHOWN DEFENDING HIMSELF AGAINST CHARGES OF WITCHCRAFT. IN THIS EXHIBIT, GUESTS DISCOVER THE STORY BEHIND THE PAINTING, ITS SUBJECTS, AND ITS ARTIST. CO-CURATED

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BY DR. JOE STAHLMAN, THE DISPLAY ALSO PROVIDES THE HISTORIC CONTEXT FOR THE BUFFALO CREEK RESERVATION DURING THE EARLY NINETEENTH CENTURY.

- SAY THEIR NAMES: HONOR THEIR LEGACIES EXPANDED ON OUR RELATIONSHIP WITH THE UNCROWNED QUEENS INSTITUTE TO FEATURE THE BIOGRAPHIES OF ERIE COUNTY'S AFRICAN AMERICAN COMMUNITY ELDER. THE MUSEUM AND THE UNCROWNED QUEENS PARTNERED TO CREATE CURRICULUM BASED ON THE EXHIBIT TO BE SHARED WITH THE BUFFALO PUBLIC SCHOOLS.

-ON THE SHOULDERS OF GIANTS: INNOVATION IN AMERICAN STAINED GLASS CURATED BY THE STAINED GLASS ASSOCIATION OF AMERICA (SGAA) IN COLLABORATION WITH JUDSON STUDIOS PAID HOMAGE TO GENERATIONS OF STAINED-GLASS ARTISTS WHO HAVE PUSHED THE BOUNDARIES OF THE MEDIUM. THE EXHIBIT MARKED THE SGAA'S 120TH ANNIVERSARY AND FEATURED WORKS BY AMIR FALLAH, JAMES JEAN, NARCISSUS QUAGLIATA, JUDITH SCHAECHTER, AND MORE.

-THE ANNUAL CHERRY BLOSSOM FESTIVAL, A WEEK-LONG CELEBRATION OF THE JAPANESE GARDENS AND MULTICULTURALISM IN BUFFALO IN PARTNERSHIP WITH OLMSTED PARKS CONSERVANCY, MUSIC IS ART, FRIENDS OF THE JAPANESE GARDEN, AND CHERRY BLOSSOM FESTIVAL VOLUNTEERS.

-M&T FREE THIRD FRIDAYS OFFER FREE GENERAL ADMISSION EACH MONTH

-EXHIBITS IN DEVELOPMENT INCLUDE: ERIE CANAL 2025 AT CANALSIDE AND THE RETURN OF THE RAINBOW CITY

DOUBLING OUR CAPACITY FOR YOUTH EDUCATION AND ENRICHMENT THE CONTINUUM EXHIBIT IS FOUNDATIONAL TO LOCAL HISTORY EDUCATION. THE EXHIBIT EXTENDS OUR INTERPRETATIONS OF LOCAL INDIGENOUS PEOPLES, SETTLEMENT, IMMIGRATION, INDUSTRIALIZATION, PAN AMERICAN EXPOSITION, ARCHITECTURE, ERIE CANAL, AND THE CONTINUING EVOLUTION OF ERIE COUNTY. EXHIBIT CONTENT ALIGNS WITH SOCIAL STUDIES CURRICULUM AND CREATES ACCESS FOR ALL STUDENTS TO HAVE ENGAGING, PERSONAL MOMENTS WITH

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HISTORY.

REACTIVATED EDUCATIONAL PROGRAMMING OUR EDUCATION COORDINATOR INCREASED THE NUMBER OF BUFFALO PUBLIC SCHOOL FIELD TRIPS FROM 9 SCHOOLS IN 2022 TO 30 SCHOOLS IN 2023. WE REINVIGORATED THE DOCENT AND VOLUNTEER PROGRAM, ADDING NEW TRAININGS AND ACTIVITIES TO REENGAGE OUR VOLUNTEER BASE. WE ALSO CREATED A NEW CHILDREN'S PROGRAM FOR M&T THIRD FRIDAYS, JUNIOR HISTORY BUFFS, THAT INCLUDES A STORY-TIME ACTIVITY WITH MUSIC AND A HISTORY LESSON.

DEAI INITIATIVES FORM A PRACTICE, TAKING ACTION

-CO-CREATE EXPERIENCES TO AMPLIFY DIVERSE VOICES FROM THE COMMUNITY ABOUT ISSUES THAT AFFECT BUFFALO'S FUTURE.

-SUPPORT THE MISSIONS OF PARTNER COMMUNITY ORGANIZATIONS BY SHARING OUR RESOURCES TO DELIVER COLLABORATIVE PROGRAMS.

-OFFER NEW WAYS FOR GUESTS AND PARTNERS TO PARTICIPATE THROUGH VIRTUAL AND ON-SITE FREE PROGRAMMING.

-SUSTAIN RELATIONSHIPS WITH ESTABLISHED COMMUNITY PARTNERS, SEEKING 1-2 ADDITIONAL COMMUNITY PARTNERS TO CREATE COLLABORATIVE EXHIBITS AND PROGRAMS.

-CONTINUE TO FOSTER THE DYNAMIC OF THE MUSEUM'S DEAI COMMITTEE AT BOTH THE BOARD AND STAFF LEVELS, REALIZING KEY GOALS AND NEW OPPORTUNITIES.

LOCAL HISTORY FEEDS DEVELOPMENT AND PLACEMAKING WORK IN WESTERN NEW YORK

LOCAL HISTORY SHAPES AND CONTRIBUTES TO THE REVITALIZATION OF WESTERN NEW YORK. MANY RECENT DEVELOPMENT PROJECTS ARE DISTINCTIVE BECAUSE THEY CELEBRATE OUR LOCAL STORY, I.E., CANALSIDE, LARKINVILLE, RICHARDSON

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OLMSTED COMPLEX, AND BUFFALO RIVERWORKS. WE ARE THE TRUSTED SOURCE FOR AUTHENTIC, UNIQUE RESOURCES. POTENTIAL AUDIENCES INCLUDE THE GROWING COMMUNITY OF PRESERVATIONISTS, GENEALOGISTS, AND CASUAL RESEARCHERS.

REMOVING BARRIERS TO ACCESS AND PARTICIPATION - IN 2023, THE MUSEUM SERVED A TOTAL OF OVER 35,000 INDIVIDUALS. THE MUSEUM TRACKED 14,425 GENERAL ADMISSION GUESTS TO THE MUSEUM FOR A VISIT. IN ADDITION, THE MUSEUM SAW OVER 2,000 ATTENDEES TO OUR PROGRAMS IE. HAPPY HOUR HISTORY LECTURES, M&T THIRD FRIDAYS, AND FAMILY PROGRAMMING. 1,000 GUESTS ATTENDED EDUCATIONAL PROGRAMMING, BOTH ON AND OFF SITE, AND 8,300 ATTENDED OUR SPECIAL EVENTS IE. CHERRY BLOSSOM FESTIVAL, PAINT THE TOWN, PARTY ON THE PORTICO, AND RED JACKET AWARDS CEREMONY.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

DIGITAL PRESERVATION MAKES COLLECTIONS ACCESSIBLE- TODAY, MOST OF BUFFALO'S ENGLISH-LANGUAGE, PUBLIC DOMAIN NEWSPAPERS FROM 1811-1923 ARE SEARCHABLE ONLINE AT NEWSPAPERS.COM. THIS PARTNERSHIP PROVIDES ACCESS, OTHERWISE COST-PROHIBITIVE, FOR MUSEUM/RESEARCH LIBRARY USERS.

2023 ARCHIVAL ACQUISITIONS INCLUDE:

STAFFING CAPACITY IN THE ARCHIVES REMAINED REDUCED. FROM THE GREG D. TRANTER COLLECTION, HUNDREDS OF PAPER COLLECTIONS WERE REHOUSED AND NUMBERED. OVER 773 DONATIONS WERE ADDED TO THE COLLECTION, WITH NEARLY 300 TO OUR DIGITAL CONTEMPORARY COLLECTIONS.

FORM 990, PART VI, SECTION A, LINE 6:

LOCAL RESIDENTS CAN BECOME MEMBERS OF THE MUSEUM FOR A YEARLY FEE. THE FOLLOWING TYPES OF MEMBERSHIPS EXIST: STUDENT, INDIVIDUAL, FAMILY,

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GRANDPARENT, SUSTAINING, COLLECTOR, CONSERVATOR, CURATOR, AND LIFE MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A:

ALL MEMBERS ARE ENTITLED TO VOTE FOR MEMBERS OF THE BOARD OF MANAGERS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE AUDIT COMMITTEE, AUTHORIZED BY THE BOARD OF MANAGERS, REVIEWS THE 990 AND RECOMMENDS THE DRAFT TO THE BOARD. THE BOARD IS PROVIDED A COPY OF THE 990 FOR THEIR OWN REVIEW PRIOR TO A BOARD MEETING. THE FORM 990 RECOMMENDED BY THE AUDIT COMMITTEE IS DISCUSSED AT THE NEXT BOARD MEETING AND IS APPROVED WITH AMENDMENTS, IF ANY.

FORM 990, PART VI, SECTION B, LINE 12C:

BOARD MEMBERS ARE REQUIRED TO COMPLETE, SIGN, AND DATE A STATEMENT DISCLOSING ANY CONFLICTS ON AN ANNUAL BASIS. THE STATEMENTS ARE REVIEWED BY THE AUDIT COMMITTEE OF THE BOARD. BOARD MEMBERS WITH ANY CONFLICTS ARE EXCUSED FROM THE PORTION OF ANY MEETING WHERE DISCUSSION AND/OR VOTING ON ISSUES RELATED TO THEIR DECLARED CONFLICT(S) TAKE PLACE.

FORM 990, PART VI, SECTION B, LINE 15A:

RAISES ARE APPROVED BY THE BOARD ANNUALLY FOR ALL EMPLOYEES OF THE ORGANIZATION, INCLUDING THE EXECUTIVE DIRECTOR.

FORM 990, PART VI, SECTION C, LINE 19:

ALL DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2C:

NO CHANGES FROM THE PRIOR YEAR.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization **BUFFALO & ERIE COUNTY HISTORICAL SOCIETY** Employer identification number **16-6000166**

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
BHM DEVELOPMENT LLC - 92-3255220 ONE MUSEUM COURT BUFFALO, NY 14216	REDEVELOPMENT OF HISTORIC BUILDING	NEW YORK	0.	0.	THE BUFFALO HISTORY MUSEUM

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

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

Schedule R (Form 990) 2023

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
1a		
1b		
1c		
1d		
1e		
1f		
1g		
1h		
1i		
1j		
1k		
1l		
1m		
1n		
1o		
1p		
1q		
1r		
1s		

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

