

ATLAS CPAS & ADVISORS PLLC  
1230 SPRINGFIELD PIKE  
CINCINNATI, OH 45215

AMERICAN WATCHMAKERS-CLOCKMAKERS  
INSTITUTE  
701 ENTERPRISE DR.  
HARRISON, OH 45030

|||||||

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CLIENT'S COPY

CLIENT COPY



ATLAS CPAs & Advisors PLLC

1230 Springfield Pike  
Cincinnati, OH 45215

It's about time.

January 24, 2024

American Watchmakers-Clockmakers  
Institute  
701 Enterprise Dr.  
Harrison, OH 45030

Dear Jack:

We have prepared the following returns from information provided by you without verification or audit:

2022 Form 990

Each original should be dated, signed and filed in accordance with the filing instructions. The copy should be retained for your files.

Since you have final responsibility for the tax returns, we suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Also enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

This office is committed to using safeguards that protect your information from data theft. To further protect your identity, you can also take steps to stop thieves. IRS publication 4524 outlines simple steps that help you keep your computer secure, avoid phishing and malware, and protect your personal information.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or any correspondence received from taxing authorities.

**Our bill for services rendered is also enclosed. Payment for services is due upon receipt. Tax returns are filed upon receipt of signature forms and payment of your invoice.**

If you have any questions, or if we can be of assistance in any way, please do not hesitate to call.

Sincerely,

ATLAS CPAs & Advisors PLLC



ATLAS CPAs & Advisors PLLC

1230 Springfield Pike  
Cincinnati, OH 45215

It's about time.

January 24, 2024

American Watchmakers-Clockmakers  
Institute  
701 Enterprise Dr.  
Harrison, OH 45030

Dear Jack:

We have prepared the following returns from information provided by you without verification or audit:

2022 Form 990

2022 State Annual Report

Each original should be dated, signed and filed in accordance with the filing instructions. The copy should be retained for your files.

Since you have final responsibility for the tax returns, we suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Also enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

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If you have any questions, or if we can be of assistance in any way, please do not hesitate to call.

Sincerely,

ATLAS CPAs & Advisors PLLC

# TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

June 30, 2023

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**Prepared For:**

American Watchmakers-Clockmakers  
Institute  
701 Enterprise Dr.  
Harrison, OH 45030

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**Prepared By:**

ATLAS CPAS & ADVISORS PLLC  
1230 Springfield Pike  
Cincinnati, OH 45215

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**Amount Due or Refund:**

Not applicable

---

**Make Check Payable To:**

Not applicable

---

**Mail Tax Return and Check (if applicable) To:**

Not applicable

---

**Return Must be Mailed On or Before:**

Not applicable

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**Special Instructions:**

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-TE to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS.

Form **8879-TE****IRS e-file Signature Authorization  
for a Tax Exempt Entity**

OMB No. 1545-0047

For calendar year 2022, or fiscal year beginning JUL 1, 2022, and ending JUN 30, 2023**2022**Department of the Treasury  
Internal Revenue Service**Do not send to the IRS. Keep for your records.****Go to [www.irs.gov/Form8879TE](http://www.irs.gov/Form8879TE) for the latest information.**Name of filer **AMERICAN WATCHMAKERS-CLOCKMAKERS  
INSTITUTE**EIN or SSN  
**31-0731708**Name and title of officer or person subject to tax **JACK KURDZIONAK  
TREASURER****Part I Type of Return and Return Information**

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not complete more than one line in Part I.**

<b>1a</b> Form 990 check here <input checked="" type="checkbox"/>	<b>b</b> Total revenue, if any (Form 990, Part VIII, column (A), line 12) .....	<b>1b</b> <u>1,081,420.</u>
<b>2a</b> Form 990-EZ check here <input type="checkbox"/>	<b>b</b> Total revenue, if any (Form 990-EZ, line 9) .....	<b>2b</b> _____
<b>3a</b> Form 1120-POL check here <input type="checkbox"/>	<b>b</b> Total tax (Form 1120-POL, line 22) .....	<b>3b</b> _____
<b>4a</b> Form 990-PF check here <input type="checkbox"/>	<b>b</b> Tax based on investment income (Form 990-PF, Part V, line 5) .....	<b>4b</b> _____
<b>5a</b> Form 8868 check here <input type="checkbox"/>	<b>b</b> Balance due (Form 8868, line 3c) .....	<b>5b</b> _____
<b>6a</b> Form 990-T check here <input type="checkbox"/>	<b>b</b> Total tax (Form 990-T, Part III, line 4) .....	<b>6b</b> _____
<b>7a</b> Form 4720 check here <input type="checkbox"/>	<b>b</b> Total tax (Form 4720, Part III, line 1) .....	<b>7b</b> _____
<b>8a</b> Form 5227 check here <input type="checkbox"/>	<b>b</b> FMV of assets at end of tax year (Form 5227, Item D) .....	<b>8b</b> _____
<b>9a</b> Form 5330 check here <input type="checkbox"/>	<b>b</b> Tax due (Form 5330, Part II, line 19) .....	<b>9b</b> _____
<b>10a</b> Form 8038-CP check here <input type="checkbox"/>	<b>b</b> Amount of credit payment requested (Form 8038-CP, Part III, line 22) .....	<b>10b</b> _____

**Part II Declaration and Signature Authorization of Officer or Person Subject to Tax**

Under penalties of perjury, I declare that ☒ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

**PIN: check one box only**

☒ I authorize **ATLAS CPAS & ADVISORS PLLC** to enter my PIN **11111**  
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax

Date

**Part III Certification and Authentication**

**ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

**31031145247****Do not enter all zeros**

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature **TYLER M. SCOTT**Date **01/24/24**

**ERO Must Retain This Form - See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2022)

Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**Open to Public  
Inspection**A** For the 2022 calendar year, or tax year beginning **JUL 1, 2022** and ending **JUN 30, 2023****B** Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return/terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization**AMERICAN WATCHMAKERS-CLOCKMAKERS INSTITUTE**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

**701 ENTERPRISE DR.**

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

**HARRISON, OH 45030****F** Name and address of principal officer: **JACK KURDZIONAK****701 ENTERPRISE DR, HARRISON, OH 45030****D** Employer identification number**31-0731708****E** Telephone number**513-367-9800****G** Gross receipts \$**3,135,501.****H(a)** Is this a group returnfor subordinates? ..... ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions

**H(c)** Group exemption number**I** Tax-exempt status: ☐ 501(c)(3) ☒ 501(c) ( **6** ) (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **WWW.AWCI.COM****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Year of formation: **1964** **M** State of legal domicile: **OH****Part I Summary**

Activities & Governance	<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>PROMOTE THE HOROLOGY PROFESSION THROUGH A RANGE OF EDUCATION, CERTIFICATION, COMMUNICATIONS, AND</b>
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a) <b>8</b>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b) <b>8</b>
	<b>5</b>	Total number of individuals employed in calendar year 2022 (Part V, line 2a) <b>3</b>
	<b>6</b>	Total number of volunteers (estimate if necessary) <b>3</b>
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12 <b>0.</b>
<b>7b</b>	Net unrelated business taxable income from Form 990-T, Part I, line 11 <b>0.</b>	
Revenue	<b>8</b>	Contributions and grants (Part VIII, line 1h) <b>163,478.</b>
	<b>9</b>	Program service revenue (Part VIII, line 2g) <b>240,496.</b>
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d) <b>648,546.</b>
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <b>44,609.</b>
	<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) <b>1,097,129.</b>
	Expenses	<b>13</b>
<b>14</b>		Benefits paid to or for members (Part IX, column (A), line 4) <b>0.</b>
<b>15</b>		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) <b>246,587.</b>
<b>16a</b>		Professional fundraising fees (Part IX, column (A), line 11e) <b>0.</b>
<b>b</b>		Total fundraising expenses (Part IX, column (D), line 25) <b>0.</b>
<b>17</b>		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) <b>497,297.</b>
<b>18</b>		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) <b>743,884.</b>
<b>19</b>		Revenue less expenses. Subtract line 18 from line 12 <b>353,245.</b>
Net Assets or Fund Balances		<b>20</b>
	<b>21</b>	Total liabilities (Part X, line 26) <b>442,135.</b>
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20 <b>8,137,445.</b>

**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		
	<b>JACK KURDZIONAK, TREASURER</b>				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	<b>TYLER M. SCOTT</b>	<b>TYLER M. SCOTT</b>	<b>01/24/24</b>		<b>P01047519</b>
Preparer Use Only	Firm's name	Firm's EIN	Phone no.		
	<b>ATLAS CPAS &amp; ADVISORS PLLC</b>	<b>47-2544071</b>	<b>513-771-4100</b>		
	Firm's address				
	<b>1230 SPRINGFIELD PIKE</b>				
	<b>CINCINNATI, OH 45215</b>				

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

AMERICAN WATCHMAKERS-CLOCKMAKERS  
INSTITUTE

Form 990 (2022)

31-0731708 Page 2

**Part III** Statement of Program Service Accomplishments

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

**1** Briefly describe the organization's mission:  
**PROMOTE THE HOROLOGY PROFESSION THROUGH A RANGE OF EDUCATION, CERTIFICATION, COMMUNICATIONS, AND BUSINESS SERVICES AND PROVIDE A MEMBER DIRECTORY OF PROFESSIONAL CLOCKMAKERS/WATCHMAKERS TO CONNECT WITH REPAIR/RETAIL SOURCES.**

**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 ☒ No  
If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No  
If "Yes," describe these changes on Schedule O.

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: ) (Expenses \$ **615,252.** including grants of \$ ) (Revenue \$ )  
**PROMOTE THE TIMEKEEPING OR HOROLOGY PROFESSION THROUGH A RANGE OF EDUCATION, CERTIFICATION, COMMUNICATIONS, AND BUSINESS SERVICES AND PROVIDE A MEMBER DIRECTORY OF PROFESSIONAL CLOCKMAKERS AND WATCHMAKERS TO CONNECT CONSUMERS WITH REPAIR AND RETAIL SOURCES.**

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

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

**4e** Total program service expenses **615,252.**

**AMERICAN WATCHMAKERS-CLOCKMAKERS  
INSTITUTE**

Form 990 (2022)

31-0731708 Page **3**

**Part IV Checklist of Required Schedules**

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

**AMERICAN WATCHMAKERS-CLOCKMAKERS  
INSTITUTE**

Form 990 (2022)

31-0731708 Page **4**

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	<b>22</b>	<b>X</b>
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	<b>23</b>	<b>X</b>
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....	<b>24a</b>	<b>X</b>
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	<b>24b</b>	
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....	<b>24c</b>	
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....	<b>24d</b>	
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25a</b>	
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25b</b>	
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....	<b>26</b>	<b>X</b>
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....	<b>27</b>	<b>X</b>
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28a</b>	<b>X</b>
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28b</b>	<b>X</b>
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28c</b>	<b>X</b>
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	<b>29</b>	<b>X</b>
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	<b>30</b>	<b>X</b>
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....	<b>31</b>	<b>X</b>
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....	<b>32</b>	<b>X</b>
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....	<b>33</b>	<b>X</b>
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	<b>34</b>	<b>X</b>
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	<b>35a</b>	<b>X</b>
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>35b</b>	<b>X</b>
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>36</b>	
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....	<b>37</b>	<b>X</b>
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O .....	<b>38</b>	<b>X</b>

**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 ☐

	Yes	No
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .....	<b>1a</b>	<b>14</b>
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .....	<b>1b</b>	<b>0</b>
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	<b>1c</b>	<b>X</b>

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

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

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**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**

			Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year	<b>1a</b>	8		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
<b>b</b> Enter the number of voting members included on line 1a, above, who are independent	<b>1b</b>	8		
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	<b>2</b>			X
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	<b>3</b>			X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>			X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>			X
<b>6</b> Did the organization have members or stockholders?	<b>6</b>		X	
<b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	<b>7a</b>		X	
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>		X	
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
<b>a</b> The governing body?	<b>8a</b>		X	
<b>b</b> Each committee with authority to act on behalf of the governing body?	<b>8b</b>		X	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	<b>9</b>			X

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

			Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates?	<b>10a</b>			X
<b>b</b> If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	<b>10b</b>			
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<b>11a</b>			X
<b>b</b> Describe on Schedule O the process, if any, used by the organization to review this Form 990.				
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>12a</b>		X	
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12b</b>		X	
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	<b>12c</b>		X	
<b>13</b> Did the organization have a written whistleblower policy?	<b>13</b>			X
<b>14</b> Did the organization have a written document retention and destruction policy?	<b>14</b>			X
<b>15</b> Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
<b>a</b> The organization's CEO, Executive Director, or top management official	<b>15a</b>		X	
<b>b</b> Other officers or key employees of the organization	<b>15b</b>			X
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.				
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16a</b>			X
<b>b</b> If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	<b>16b</b>			

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed OH

**18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☒ Own website    ☐ Another's website    ☒ Upon request    ☐ Other (explain on Schedule O)

**19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

**20** State the name, address, and telephone number of the person who possesses the organization's books and records  
**JACK KURDZIONAK - 513-367-9800**  
**701 ENTERPRISE DRIVE , HARRISON, OH 45030**

## 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.

[illegible]

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**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			
<b>1b Subtotal</b>								0.	0.	0.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								0.	0.	0.

**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
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		<b>X</b>
<b>4</b> 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>		<b>X</b>
<b>5</b> 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>		<b>X</b>

**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

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**Part VIII Statement of Revenue**

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>	156,430.				
	<b>c</b> Fundraising events .....	<b>1c</b>					
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	2,000.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$				
	<b>h Total.</b> Add lines 1a-1f .....						
<b>Program Service Revenue</b>	<b>2 a</b> ACADEMY TUITION .....	<b>Business Code</b>					
		611519		226,064.	226,064.		
	<b>b</b> DISPLAY ADVERTISING .....	541800		75,801.	75,801.		
	<b>c</b> .....						
	<b>d</b> .....						
	<b>e</b> .....						
	<b>f</b> All other program service revenue .....						
	<b>g Total.</b> Add lines 2a-2f .....			301,865.			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....			187,373.	187,373.		
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....						
	<b>6 a</b> Gross rents .....	<b>6a</b>	(i) Real (ii) Personal				
	<b>b</b> Less: rental expenses ...	<b>6b</b>					
	<b>c</b> Rental income or (loss) .....	<b>6c</b>					
	<b>d</b> Net rental income or (loss) .....						
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	<b>7a</b>	(i) Securities (ii) Other				
				2,408,699.			
	<b>b</b> Less: cost or other basis and sales expenses .....	<b>7b</b>		2,038,344.			
	<b>c</b> Gain or (loss) .....	<b>7c</b>		370,355.			
	<b>d</b> Net gain or (loss) .....			370,355.	370,355.		
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>					
	<b>b</b> Less: direct expenses .....	<b>8b</b>					
	<b>c</b> Net income or (loss) from fundraising events .....						
	<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>					
	<b>b</b> Less: direct expenses .....	<b>9b</b>					
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>10a</b>		78,671.				
<b>b</b> Less: cost of goods sold .....	<b>10b</b>		15,737.				
<b>c</b> Net income or (loss) from sales of inventory .....			62,934.	62,934.			
<b>Miscellaneous Revenue</b>	<b>11 a</b> MISCELLANEOUS INCOME .....	<b>Business Code</b>					
		900099		463.	463.		
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> All other revenue .....						
	<b>e Total.</b> Add lines 11a-11d .....			463.			
<b>12 Total revenue.</b> See instructions .....			1,081,420.	922,990.	0.	0.	

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**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
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....				
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
<b>7</b> Other salaries and wages .....	232,466.	162,726.	69,740.	
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
<b>9</b> Other employee benefits .....	506.	354.	152.	
<b>10</b> Payroll taxes .....	20,646.	14,452.	6,194.	
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....				
<b>b</b> Legal .....				
<b>c</b> Accounting .....	20,077.		20,077.	
<b>d</b> Lobbying .....				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees .....	36,111.		36,111.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)				
<b>12</b> Advertising and promotion .....	1,067.	1,067.		
<b>13</b> Office expenses .....	49,517.	47,871.	1,646.	
<b>14</b> Information technology .....	11,477.	7,460.	4,017.	
<b>15</b> Royalties .....	4,531.	4,531.		
<b>16</b> Occupancy .....	65,355.	65,355.		
<b>17</b> Travel .....	30,371.	3,368.	27,003.	
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....	12,601.	8,881.	3,720.	
<b>20</b> Interest .....	15,881.	15,881.		
<b>21</b> Payments to affiliates .....				
<b>22</b> Depreciation, depletion, and amortization .....	96,611.	96,611.		
<b>23</b> Insurance .....	6,820.	6,820.		
<b>24</b> 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.)				
<b>a</b> <b>MAGAZINE PUBLISHING</b>	42,687.	42,687.		
<b>b</b> <b>BAW SUPPLIES</b>	41,613.	41,613.		
<b>c</b> <b>WRITER FEE</b>	36,753.	36,753.		
<b>d</b> <b>INSTRUCTOR</b>	23,920.	23,920.		
<b>e</b> All other expenses .....	43,483.	34,902.	8,581.	
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e	792,493.	615,252.	177,241.	0.
<b>26</b> <b>Joint costs.</b> 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)				

**AMERICAN WATCHMAKERS-CLOCKMAKERS  
INSTITUTE**

Form 990 (2022)

31-0731708 Page **11**

**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
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	154,146.	<b>1</b>	29,995.
	<b>2</b> Savings and temporary cash investments .....		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>	
	<b>4</b> Accounts receivable, net .....	16,145.	<b>4</b>	116,069.
	<b>5</b> 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....	75,750.	<b>8</b>	80,611.
	<b>9</b> Prepaid expenses and deferred charges .....	0.	<b>9</b>	4,870.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	2,097,410.		
	<b>b</b> Less: accumulated depreciation .....	1,209,925.		
		954,053.	<b>10c</b>	887,485.
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....	7,374,486.	<b>13</b>	7,675,713.
	<b>14</b> Intangible assets .....		<b>14</b>	
<b>15</b> Other assets. See Part IV, line 11 .....	5,000.	<b>15</b>	5,390.	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	8,579,580.	<b>16</b>	8,800,133.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	38,331.	<b>17</b>	38,879.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	2,785.	<b>19</b>	43,503.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....	401,019.	<b>23</b>	175,926.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> 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 .....		<b>25</b>	
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	442,135.	<b>26</b>	258,308.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	8,137,445.	<b>27</b>	8,541,825.
	<b>28</b> Net assets with donor restrictions .....		<b>28</b>	
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> <b>Total net assets or fund balances</b> .....	8,137,445.	<b>32</b>	8,541,825.
	<b>33</b> <b>Total liabilities and net assets/fund balances</b> .....	8,579,580.	<b>33</b>	8,800,133.

Form **990** (2022)

**AMERICAN WATCHMAKERS-CLOCKMAKERS  
INSTITUTE**

Form 990 (2022)

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**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	1,081,420.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	792,493.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	288,927.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	8,137,445.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	115,453.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	8,541,825.

**Part XII Financial Statements and Reporting**

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

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
<b>2a</b> 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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>X</b>	
<b>b</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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<b>X</b>
<b>c</b> 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.	<b>X</b>	
<b>3a</b> 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>X</b>
<b>b</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		

Form **990** (2022)

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

Open to Public  
Inspection

Name of the organization **AMERICAN WATCHMAKERS-CLOCKMAKERS  
INSTITUTE**

Employer identification number  
**31-0731708**

**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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register .....	2d

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? .....

☐ Yes ☐ No

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 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

☐ Yes ☐ No

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.

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.

b 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 ..... \$ .....

<b>Part III</b>	<b>Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets</b> <i>(continued)</i>
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- 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
<b>c</b> Beginning balance .....	<b>1c</b>
<b>d</b> Additions during the year .....	<b>1d</b>
<b>e</b> Distributions during the year .....	<b>1e</b>
<b>f</b> Ending balance .....	<b>1f</b>

- 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 on Part XIII ☐

<b>Part V</b>	<b>Endowment Funds.</b> 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
<b>1a</b> Beginning of year balance .....					
<b>b</b> Contributions .....					
<b>c</b> Net investment earnings, gains, and losses .....					
<b>d</b> Grants or scholarships .....					
<b>e</b> Other expenditures for facilities and programs .....					
<b>f</b> Administrative expenses .....					
<b>g</b> End of year balance .....					

- 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 \_\_\_\_\_%
- c Term endowment \_\_\_\_\_%

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
3a(i)		
3a(ii)		
3b		

- (i) Unrelated organizations .....
- (ii) Related organizations .....
- b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? .....

- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

<b>Part VI</b>	<b>Land, Buildings, and Equipment.</b>
----------------	--

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
<b>1a</b> Land .....		237,566.		237,566.
<b>b</b> Buildings .....		1,107,185.	775,310.	331,875.
<b>c</b> Leasehold improvements .....				
<b>d</b> Equipment .....				
<b>e</b> Other .....		752,659.	434,615.	318,044.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) .....				887,485.

Schedule D (Form 990) 2022

**AMERICAN WATCHMAKERS-CLOCKMAKERS  
INSTITUTE**

Schedule D (Form 990) 2022

31-0731708 Page **3**

**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) .....		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

**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) STOCKS AND BONDS	7,581,793.	END-OF-YEAR MARKET VALUE
(2) MONEY MARKET FUND	69,275.	END-OF-YEAR MARKET VALUE
(3) ACCRUED INCOME	24,645.	COST
(4) .....		
(5) .....		
(6) .....		
(7) .....		
(8) .....		
(9) .....		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	7,675,713.	

**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) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

**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) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

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 ... ☐

**Schedule D (Form 990) 2022**



**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2022**

Open to Public  
Inspection

Name of the organization

AMERICAN WATCHMAKERS-CLOCKMAKERS  
INSTITUTE

Employer identification number  
31-0731708

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

BUSINESS SERVICES AND PROVIDE A MEMBER DIRECTORY OF PROFESSIONAL  
CLOCKMAKERS/WATCHMAKERS TO CONNECT WITH REPAIR/RETAIN SOURCES.

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

CLASSES OF MEMBERS OR STOCKHOLDERS OF THE ORGANIZATION HAS MEMBERS WHO  
RECEIVE BENEFITS ACCORDING TO THE ORGANIZATION'S MISSION.

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

ELECTION OF MEMBERS AND THEIR RIGHTS INDIVIDUAL MEMBERS HAVE THE RIGHT TO  
VOTE FOR UP TO THREE DIRECTORS ON THE AWCI BOARD. COMPANIES, SCHOOLS, AND  
AFFILIATES DO NOT HAVE THE RIGHT TO VOTE.

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

DECISIONS SUBJECT TO APPROVAL OF MEMBERS GOVERNING BODY DECISIONS  
CONCERNING GOVERNING DOCUMENTS ARE SUBJECT TO VOTE APPROVAL BY THE MEMBERS.

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

ORGANIZATION'S PROCESS TO REVIEW FORM 990 DRAFT OF 990 WAS SENT TO THE  
MANAGEMENT AND BOARD PRESIDENT.

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

ENFORCEMENT OF CONFLICTS POLICY THE ORGANIZATION INVESTIGATE AND ENFORCES  
VIOLATIONS OF THE CONFLICT OF THE INTEREST POLICY.

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

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

Schedule O (Form 990) 2022

Name of the organization **AMERICAN WATCHMAKERS-CLOCKMAKERS  
INSTITUTE**

Employer identification number  
**31-0731708**

COMPENSATION PROCESS FOR TOP OFFICIAL RESEARCH IS UNDERTAKEN TO ARRIVE AT  
THE CORRECT COMPENSATION FOR MANAGEMENT. RESULTS ARE REVIEWED BY THE BOARD.  
THIS PROCESS WAS LAST UNDERTAKEN IN 2012.

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

COPIES OF POLICIES ARE AVAILABLE UPON REQUEST.

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

**Open to Public  
Inspection**

Name of the organization <b>AMERICAN WATCHMAKERS-CLOCKMAKERS INSTITUTE</b>	Employer identification number <b>31-0731708</b>
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**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

**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
AMERICAN WATCHMAKERS-CLOCKMAKERS INSTITUTE - 23-7160387, 701 ENTERPRISE DR., HARRISON, OH 45030		OHIO		LINE 7	AMERICAN WATCHMAKERS-CLOCKM AKERS INSTITUTE	X	

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

Schedule R (Form 990) 2022



**AMERICAN WATCHMAKERS-CLOCKMAKERS  
INSTITUTE**

Schedule R (Form 990) 2022

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**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?

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....	<b>1a</b>	<b>X</b>
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	<b>1b</b>	<b>X</b>
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....	<b>1c</b>	<b>X</b>
<b>d</b> Loans or loan guarantees to or for related organization(s) .....	<b>1d</b>	<b>X</b>
<b>e</b> Loans or loan guarantees by related organization(s) .....	<b>1e</b>	<b>X</b>
<b>f</b> Dividends from related organization(s) .....	<b>1f</b>	<b>X</b>
<b>g</b> Sale of assets to related organization(s) .....	<b>1g</b>	<b>X</b>
<b>h</b> Purchase of assets from related organization(s) .....	<b>1h</b>	<b>X</b>
<b>i</b> Exchange of assets with related organization(s) .....	<b>1i</b>	<b>X</b>
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....	<b>1j</b>	<b>X</b>
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....	<b>1k</b>	<b>X</b>
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....	<b>1l</b>	<b>X</b>
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....	<b>1m</b>	<b>X</b>
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	<b>1n</b>	<b>X</b>
<b>o</b> Sharing of paid employees with related organization(s) .....	<b>1o</b>	<b>X</b>
<b>p</b> Reimbursement paid to related organization(s) for expenses .....	<b>1p</b>	<b>X</b>
<b>q</b> Reimbursement paid by related organization(s) for expenses .....	<b>1q</b>	<b>X</b>
<b>r</b> Other transfer of cash or property to related organization(s) .....	<b>1r</b>	<b>X</b>
<b>s</b> Other transfer of cash or property from related organization(s) .....	<b>1s</b>	<b>X</b>

**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
AMERICAN WATCHMAKERS INSTITUTE EDUCATION (1) LIBRARY & MUSEUM TRUST	C	2,000.	CASH
(2)			
(3)			
(4)			
(5)			
(6)			

## Schedule R (Form 990) 2022

Page 4

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

**Part VII** Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

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**2022 DEPRECIATION AND AMORTIZATION REPORT**

FORM 990 PAGE 10

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	OTHER														
1	ACER G223	08/29/12	200DB	5.00		HY17	1,041.			521.	520.	520.		0.	520.
2	HP MXL248	04/15/13	200DB	5.00		HY17	1,214.			607.	607.	607.		0.	607.
3	AV SYSTEM	06/24/11	200DB	5.00		HY17	42,953.			42,953.				0.	
4	LAND	06/30/95	L	.000			237,566.				237,566.			0.	
5	BUILDING	06/30/95	SL	40.00		16	1,105,466.				1,105,466.	746,470.		27,637.	774,107.
6	PENDULUM	06/30/96	SL	40.00		16	1,719.				1,719.	1,160.		43.	1,203.
7	CLOCK TOWER	06/30/96	SL	4.00		16	4,032.				4,032.	4,032.		0.	4,032.
8	IMPROVEMENTS	03/16/06	SL	15.00		16	31,302.				31,302.	31,302.		0.	31,302.
9	TENKOTTE BENCHES	08/31/11	SL	7.00		16	3,724.				3,724.	3,724.		0.	3,724.
10	KAISER CLASSROOM REMODEL	09/12/11	SL	15.00		16	12,103.				12,103.	8,705.		807.	9,512.
11	ADT CLASSROOM	09/22/11	SL	7.00		16	2,630.				2,630.	2,630.		0.	2,630.
12	CASKER BENCHES	10/18/11	SL	7.00		16	3,355.				3,355.	3,355.		0.	3,355.
13	ROOFTOP A/C	09/03/13	SL	10.00		16	7,515.				7,515.	6,639.		752.	7,391.
14	NEC PHONE SYSTEM	10/31/13	SL	7.00		16	7,058.				7,058.	7,058.		0.	7,058.
15	HDD SURVEILEANCE SYSTEM	08/08/13	SL	7.00		16	319.				319.	319.		0.	319.
16	DVR SECURITY SYSTEM	11/15/13	SL	7.00		16	1,281.				1,281.	1,281.		0.	1,281.
17	DUST COLLECTION MOTORS	02/28/14	SL	7.00		16	2,801.				2,801.	2,801.		0.	2,801.

**2022 DEPRECIATION AND AMORTIZATION REPORT**

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
18	REFRIGERATOR	01/13/14	SL	7.00		16	430.				430.	430.		0.	430.
19	POWERSPORT DESKTOP	08/08/13	SL	5.00		16	686.				686.	686.		0.	686.
20	APPLE TABLET	06/06/14	SL	5.00		16	533.				533.	533.		0.	533.
21	2 POWERED SPEAKERS	08/31/14	SL	7.00		16	896.				896.	896.		0.	896.
22	ROOFTOP A/C UNIT	01/22/15	SL	10.00		16	7,527.				7,527.	5,583.		753.	6,336.
23	DIGITAL MICROSCOPE	01/28/15	SL	7.00		16	4,945.				4,945.	4,945.		0.	4,945.
24	CELL PHONE	02/06/15	SL	5.00		16	801.				801.	801.		0.	801.
25	2 600GB HARD DRIVES	12/05/14	SL	5.00		16	1,695.				1,695.	1,695.		0.	1,695.
26	DELL5810 DESKTOP	01/08/15	SL	5.00		16	1,408.				1,408.	1,408.		0.	1,408.
27	DELL PRECISION M3800	01/08/15	SL	5.00		16	1,808.				1,808.	1,808.		0.	1,808.
28	DELL T SHOMOAKER	04/07/15	SL	5.00		16	976.				976.	976.		0.	976.
29	DIABOLIC-E TESTER	07/15/15	SL	7.00		16	2,175.				2,175.	2,175.		0.	2,175.
30	NATAR-125 TESTER	07/15/15	SL	7.00		16	3,848.				3,848.	3,848.		0.	3,848.
31	REVELATOR-R1 TESTER	07/15/15	SL	7.00		16	3,373.				3,373.	3,373.		0.	3,373.
32	HAND PRESS	10/06/15	SL	7.00		16	807.				807.	778.		29.	807.
33	ELMA WINDER	10/06/15	SL	7.00		16	1,990.				1,990.	1,919.		71.	1,990.
34	DRAGON STEAMER	04/07/16	SL	7.00		16	694.				694.	619.		74.	694.
35	LG 43' TV	05/31/16	SL	7.00		16	479.				479.	416.		63.	479.

**2022 DEPRECIATION AND AMORTIZATION REPORT**

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
36	PARKING LOT	04/13/15	SL	15.00		16	6,500.				6,500.	3,033.		433.	3,466.
37	EXEC DIR LAPTOP	10/04/15	SL	5.00		16	813.				813.	813.		0.	813.
38	MYCLOUDNETWORK STORAGE	01/08/16	SL	5.00		16	826.				826.	826.		0.	826.
39	SCREWDRIVER BLADE SHARPENER	09/19/16	SL	7.00		16	765.				765.	629.		109.	738.
40	2 PROJECTORS EX3240	09/19/16	SL	7.00		16	856.				856.	703.		122.	825.
41	SECURITY SYSTEM	09/30/16	SL	7.00		16	4,500.				4,500.	3,697.		643.	4,340.
42	RAY FOSTER MOTORS	12/28/16	SL	7.00		16	1,274.				1,274.	1,001.		182.	1,183.
43	BATTERY BACKUP HARDWARE	01/31/17	SL	7.00		16	613.				613.	475.		88.	563.
44	CAMERA	03/31/17	SL	7.00		16	751.				751.	563.		107.	670.
45	LANIER COPY MACHINE	04/26/17	SL	7.00		16	9,166.				9,166.	6,765.		1,309.	8,074.
46	BRYANT AIR CONDITIONER	05/11/17	SL	7.00		16	6,677.				6,677.	4,929.		954.	5,883.
47	LG TV 43LJ5000	05/31/17	SL	7.00		16	468.				468.	340.		67.	407.
48	3 TIMER & ANALYZERS	12/20/17	SL	7.00		16	4,631.				4,631.	2,977.		662.	3,639.
49	2 S1 TIMERS	12/20/17	SL	7.00		16	4,495.				4,495.	2,889.		642.	3,531.
50	QUARTZ TESTER	12/20/17	SL	7.00		16	3,374.				3,374.	2,169.		482.	2,651.
51	8 HAND PRESSES BUS	07/01/18	SL	7.00		16	6,385.				6,385.	3,648.		912.	4,560.
52	MC 28 WATCHMAKING KIT	10/22/18	SL	7.00		16	16,292.				16,292.	8,534.		2,327.	10,861.
53	MC VARIOUS EQUIP	12/17/18	SL	7.00		16	24,261.				24,261.	12,131.		3,466.	15,597.

**2022 DEPRECIATION AND AMORTIZATION REPORT**

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
54	EPSON DC-2 HI-DEF DOCUMENT CAM	12/31/18	SL	7.00		16	526.				526.	263.		75.	338.
55	3 VISE'S WERTHER COMPRESSOR	02/28/19	SL	7.00		16	2,122.				2,122.	1,010.		303.	1,313.
56	VACUUM PUMP	02/28/19	SL	7.00		16	2,174.				2,174.	1,036.		311.	1,347.
57	9 VISE'S	03/13/19	SL	7.00		16	1,607.				1,607.	766.		230.	996.
58	LAWN MOWER	04/12/19	SL	7.00		16	3,209.				3,209.	1,490.		458.	1,948.
59	WEED WACKER, BLOWER, WHEEL	04/12/19	SL	7.00		16	372.				372.	172.		53.	225.
60	MC PRESS	04/18/19	SL	7.00		16	722.				722.	326.		103.	429.
61	BERGEON CASE OPENER	05/16/19	SL	7.00		16	733.				733.	323.		105.	428.
62	2-JANETTE BAW	08/31/18	SL	7.00		16	2,140.				2,140.	1,172.		306.	1,478.
63	6 LENOVO LAPTOPS	02/28/19	SL	7.00		16	4,941.				4,941.	2,353.		706.	3,059.
64	MEMBERCLICKS SOFTWARE	02/28/19	SL	7.00		16	6,895.				6,895.	3,283.		985.	4,268.
65	ROOFTOP BRYANT HVAC	02/15/19	SL	7.00		16	9,420.				9,420.	4,598.		1,346.	5,944.
66	MOBILE CLASSROOM VEHICLE	04/29/19	SL	10.00		16	400,308.				400,308.	126,764.		40,031.	166,795.
67	MC GREINER VIBRO	04/15/19	SL	7.00		16	5,680.				5,680.	2,637.		811.	3,448.
68	MC BECO TECHNIC	04/15/19	SL	7.00		16	5,000.				5,000.	2,322.		714.	3,036.
69	MC BERGEON	04/15/19	SL	7.00		16	6,900.				6,900.	3,203.		986.	4,189.
70	MC ELMA	04/15/19	SL	7.00		16	9,779.				9,779.	4,540.		1,397.	5,937.
71	PORTABLE FRIDGE	07/12/19	SL	7.00		16	330.				330.	141.		47.	188.

2022 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
72	REFRIGERATOR	03/10/20	SL	7.00		16	499.				499.	166.		71.	237.
73	NEC SV8100	07/11/19	SL	5.00		16	1,815.				1,815.	1,089.		363.	1,452.
74	EPSON DC20	04/07/20	SL	5.00		16	431.				431.	194.		86.	280.
75	POWERSPEC	08/01/19	SL	5.00		16	482.				482.	281.		96.	377.
76	EXTERIOR SIGN	11/27/19	SL	15.00		16	851.				851.	147.		57.	204.
77	LEICA STEREOZOOM MICROSCOPE	02/10/21	SL	7.00		16	6,634.				6,634.	1,343.		948.	2,291.
78	TRANSPORTABLE BENCHES	07/01/22	SL	7.00		16	13,196.				13,196.			1,885.	1,885.
79	NEW HVAC	09/01/22	SL	10.00		16	16,847.				16,847.			1,404.	1,404.
	* 990 PAGE 10 TOTAL OTHER						2,097,410.			44,081.	2,053,329.	1,069,233.		96,611.	1,165,845.
	* GRAND TOTAL 990 PAGE 10 DEPR						2,097,410.			44,081.	2,053,329.	1,069,233.		96,611.	1,165,845.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						2,067,367.			44,081.	2,023,286.	1,069,233.			1,162,556.
	ACQUISITIONS						30,043.			0.	30,043.	0.			3,289.
	DISPOSITIONS/RETIRED						0.			0.	0.	0.			0.
	ENDING BALANCE						2,097,410.			44,081.	2,053,329.	1,069,233.			1,165,845.
	ENDING ACCUM DEPR											1,209,926.			
	ENDING BOOK VALUE											887,484.			

**Depreciation and Amortization**  
(Including Information on Listed Property)

990

OMB No. 1545-0172

**2022**Attachment  
Sequence No. **179**

Attach to your tax return.

Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

**AMERICAN WATCHMAKERS - CLOCKMAKERS  
INSTITUTE****FORM 990 PAGE 10****31-0731708****Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,080,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,700,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2021 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2023. Add lines 9 and 10, less line 12	13	

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

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

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	96,611.

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

17	MACRS deductions for assets placed in service in tax years beginning before 2022	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

**Section B - Assets Placed in Service During 2022 Tax Year Using the General Depreciation System**

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

**Section C - Assets Placed in Service During 2022 Tax Year Using the Alternative Depreciation System**

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

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	96,611.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

**AMERICAN WATCHMAKERS-CLOCKMAKERS  
INSTITUTE**

Form 4562 (2022)

31-0731708 Page 2

**Part V**

**Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

<b>24a</b> Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No				<b>24b</b> If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>(a)</b> Type of property (list vehicles first)	<b>(b)</b> Date placed in service	<b>(c)</b> Business/investment use percentage	<b>(d)</b> Cost or other basis	<b>(e)</b> Basis for depreciation (business/investment use only)	<b>(f)</b> Recovery period	<b>(g)</b> Method/Convention	<b>(h)</b> Depreciation deduction	<b>(i)</b> Elected section 179 cost
<b>25</b> Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use .....							<b>25</b>	
<b>26</b> Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
<b>27</b> Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
<b>28</b> Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 .....							<b>28</b>	
<b>29</b> Add amounts in column (i), line 26. Enter here and on line 7, page 1 .....								<b>29</b>

**Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	<b>(a)</b> Vehicle		<b>(b)</b> Vehicle		<b>(c)</b> Vehicle		<b>(d)</b> Vehicle		<b>(e)</b> Vehicle		<b>(f)</b> Vehicle	
<b>30</b> Total business/investment miles driven during the year (don't include commuting miles) .....												
<b>31</b> Total commuting miles driven during the year .....												
<b>32</b> Total other personal (noncommuting) miles driven .....												
<b>33</b> Total miles driven during the year. Add lines 30 through 32 .....												
<b>34</b> Was the vehicle available for personal use during off-duty hours? .....	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person? .....												
<b>36</b> Is another vehicle available for personal use? .....												

**Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? .....	<b>Yes</b>	<b>No</b>
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners .....		
<b>39</b> Do you treat all use of vehicles by employees as personal use? .....		
<b>40</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? .....		
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use? .....		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

**Part VI Amortization**

<b>(a)</b> Description of costs	<b>(b)</b> Date amortization begins	<b>(c)</b> Amortizable amount	<b>(d)</b> Code section	<b>(e)</b> Amortization period or percentage	<b>(f)</b> Amortization for this year
<b>42</b> Amortization of costs that begins during your 2022 tax year:					
<b>43</b> Amortization of costs that began before your 2022 tax year .....					<b>43</b>
<b>44</b> <b>Total.</b> Add amounts in column (f). See the instructions for where to report .....					<b>44</b>

2022 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - AMERICAN WATCHMAKERS-CLOCKMAKERS  
INSTITUTE

Asset No.	Description	Date Acquired			Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	OTHER													
1	ACER G223	08	29	12	200DB	5.00	17	1,041.		521.	520.	520.		0.
2	HP MXL248	04	15	13	200DB	5.00	17	1,214.		607.	607.	607.		0.
3	AV SYSTEM	06	24	11	200DB	5.00	17	42,953.		42,953.				0.
4	LAND	06	30	95	L	.000		237,566.			237,566.			0.
5	BUILDING	06	30	95	SL	40.00	16	1105466.			1105466.	746,470.		27,637.
6	PENDULUM	06	30	96	SL	40.00	16	1,719.			1,719.	1,160.		43.
7	CLOCK TOWER	06	30	96	SL	4.00	16	4,032.			4,032.	4,032.		0.
8	IMPROVEMENTS	03	16	06	SL	15.00	16	31,302.			31,302.	31,302.		0.
9	TENKOTTE BENCHES	08	31	11	SL	7.00	16	3,724.			3,724.	3,724.		0.
10	KAISER CLASSROOM REMODEL	09	12	11	SL	15.00	16	12,103.			12,103.	8,705.		807.
11	ADT CLASSROOM	09	22	11	SL	7.00	16	2,630.			2,630.	2,630.		0.
12	CASKER BENCHES	10	18	11	SL	7.00	16	3,355.			3,355.	3,355.		0.
13	ROOFTOP A/C	09	03	13	SL	10.00	16	7,515.			7,515.	6,639.		752.
14	NEC PHONE SYSTEM	10	31	13	SL	7.00	16	7,058.			7,058.	7,058.		0.
15	HDD SURVEILLEANCE SYSTEM	08	08	13	SL	7.00	16	319.			319.	319.		0.
16	DVR SECURITY SYSTEM	11	15	13	SL	7.00	16	1,281.			1,281.	1,281.		0.
17	DUST COLLECTION MOTORS	02	28	14	SL	7.00	16	2,801.			2,801.	2,801.		0.

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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
18	REFRIGERATOR	011314	SL	7.00	16	430.			430.	430.		0.
19	POWERSPORT DESKTOP	080813	SL	5.00	16	686.			686.	686.		0.
20	APPLE TABLET	060614	SL	5.00	16	533.			533.	533.		0.
21	2 POWERED SPEAKERS	083114	SL	7.00	16	896.			896.	896.		0.
22	ROOFTOP A/C UNIT	012215	SL	10.00	16	7,527.			7,527.	5,583.		753.
23	DIGITAL MICROSCOPE	012815	SL	7.00	16	4,945.			4,945.	4,945.		0.
24	CELL PHONE	020615	SL	5.00	16	801.			801.	801.		0.
25	2 600GB HARD DRIVES	120514	SL	5.00	16	1,695.			1,695.	1,695.		0.
26	DELL5810 DESKTOP	010815	SL	5.00	16	1,408.			1,408.	1,408.		0.
27	DELL PRECISION M3800	010815	SL	5.00	16	1,808.			1,808.	1,808.		0.
28	DELL T SHOMOAKER	040715	SL	5.00	16	976.			976.	976.		0.
29	DIABOLIC-E TESTER	071515	SL	7.00	16	2,175.			2,175.	2,175.		0.
30	NATAR-125 TESTER	071515	SL	7.00	16	3,848.			3,848.	3,848.		0.
31	REVELATOR-R1 TESTER	071515	SL	7.00	16	3,373.			3,373.	3,373.		0.
32	HAND PRESS	100615	SL	7.00	16	807.			807.	778.		29.
33	ELMA WINDER	100615	SL	7.00	16	1,990.			1,990.	1,919.		71.
34	DRAGON STEAMER	040716	SL	7.00	16	694.			694.	619.		74.
35	LG 43' TV	053116	SL	7.00	16	479.			479.	416.		63.

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36	PARKING LOT	041315	SL	15.00	16	6,500.			6,500.	3,033.		433.
37	EXEC DIR LAPTOP	100415	SL	5.00	16	813.			813.	813.		0.
38	MYCLOUDNETWORK STORAGE	010816	SL	5.00	16	826.			826.	826.		0.
39	SCREWDRIVER BLADE SHARPENER	091916	SL	7.00	16	765.			765.	629.		109.
40	2 PROJECTORS EX3240	091916	SL	7.00	16	856.			856.	703.		122.
41	SECURITY SYSTEM	093016	SL	7.00	16	4,500.			4,500.	3,697.		643.
42	RAY FOSTER MOTORS BATTERY BACKUP	122816	SL	7.00	16	1,274.			1,274.	1,001.		182.
43	HARDWARE	013117	SL	7.00	16	613.			613.	475.		88.
44	CAMERA	033117	SL	7.00	16	751.			751.	563.		107.
45	LANIER COPY MACHINE	042617	SL	7.00	16	9,166.			9,166.	6,765.		1,309.
46	BRYANT AIR CONDITIONER	051117	SL	7.00	16	6,677.			6,677.	4,929.		954.
47	LG TV 43LJ5000	053117	SL	7.00	16	468.			468.	340.		67.
48	3 TIMER & ANALYZERS	122017	SL	7.00	16	4,631.			4,631.	2,977.		662.
49	2 S1 TIMERS	122017	SL	7.00	16	4,495.			4,495.	2,889.		642.
50	QUARTZ TESTER	122017	SL	7.00	16	3,374.			3,374.	2,169.		482.
51	8 HAND PRESSES BUS MC 28 WATCHMAKING	070118	SL	7.00	16	6,385.			6,385.	3,648.		912.
52	KIT	102218	SL	7.00	16	16,292.			16,292.	8,534.		2,327.
53	MC VARIOUS EQUIP	121718	SL	7.00	16	24,261.			24,261.	12,131.		3,466.

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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
54	EPSON DC-2 HI-DEF DOCUMENT CAM	123118	SL	7.00	16	526.			526.	263.		75.
55	3 VISE'S WERTHER COMPRESSOR	022819	SL	7.00	16	2,122.			2,122.	1,010.		303.
56	VACUUM PUMP	022819	SL	7.00	16	2,174.			2,174.	1,036.		311.
57	9 VISE'S	031319	SL	7.00	16	1,607.			1,607.	766.		230.
58	LAWN MOWER	041219	SL	7.00	16	3,209.			3,209.	1,490.		458.
59	WEED WACKER, BLOWER, WHEEL	041219	SL	7.00	16	372.			372.	172.		53.
60	MC PRESS	041819	SL	7.00	16	722.			722.	326.		103.
61	BERGEON CASE OPENER	051619	SL	7.00	16	733.			733.	323.		105.
62	2-JANETTE BAW	083118	SL	7.00	16	2,140.			2,140.	1,172.		306.
63	6 LENOVO LAPTOPS	022819	SL	7.00	16	4,941.			4,941.	2,353.		706.
64	MEMBERCLICKS SOFTWARE	022819	SL	7.00	16	6,895.			6,895.	3,283.		985.
65	ROOFTOP BRYANT HVAC	021519	SL	7.00	16	9,420.			9,420.	4,598.		1,346.
66	MOBILE CLASSROOM VEHICLE	042919	SL	10.00	16	400,308.			400,308.	126,764.		40,031.
67	MC GREINER VIBRO	041519	SL	7.00	16	5,680.			5,680.	2,637.		811.
68	MC BECO TECHNIC	041519	SL	7.00	16	5,000.			5,000.	2,322.		714.
69	MC BERGEON	041519	SL	7.00	16	6,900.			6,900.	3,203.		986.
70	MC ELMA	041519	SL	7.00	16	9,779.			9,779.	4,540.		1,397.
71	PORTABLE FRIDGE	071219	SL	7.00	16	330.			330.	141.		47.

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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
72	REFRIGERATOR	031020	SL	7.00	16	499.			499.	166.		71.
73	NEC SV8100	071119	SL	5.00	16	1,815.			1,815.	1,089.		363.
74	EPSON DC20	040720	SL	5.00	16	431.			431.	194.		86.
75	POWERSPEC	080119	SL	5.00	16	482.			482.	281.		96.
76	EXTERIOR SIGN	112719	SL	15.00	16	851.			851.	147.		57.
77	LEICA STEREOZOOM MICROSCOPE	021021	SL	7.00	16	6,634.			6,634.	1,343.		948.
78	TRANSPORTABLE BENCHES	070122	SL	7.00	16	13,196.			13,196.			1,885.
79	NEW HVAC	090122	SL	10.00	16	16,847.			16,847.			1,404.
	* 990 PAGE 10 TOTAL OTHER					2097410.		44,081.	2053329.	1069233.		96,611.
	* GRAND TOTAL 990 PAGE 10 DEPR					2097410.		44,081.	2053329.	1069233.		96,611.
	CURRENT YEAR ACTIVITY											
	BEGINNING BALANCE					2067367.		44,081.	2023286.	1069233.		
	ACQUISITIONS					30,043.		0.	30,043.	0.		
	DISPOSITIONS					0.		0.	0.	0.		
	ENDING BALANCE					2097410.		44,081.	2053329.	1069233.		

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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	ACER G223	082912	200DB	5.00	17	1,041.		521.	520.	520.		0.
2	HP MXL248	041513	200DB	5.00	17	1,214.		607.	607.	607.		0.
3	AV SYSTEM	062411	200DB	5.00	17	42,953.		42,953.				0.
4	LAND	063095	NC	.000	16	237,566.			237,566.			0.
5	BUILDING	063095	SL	40.00	16	1105466.			1105466.	746,470.		27,637.
6	PENDULUM	063096	SL	40.00	16	1,719.			1,719.	1,160.		43.
7	CLOCK TOWER	063096	SL	4.00	16	4,032.			4,032.	4,032.		0.
8	IMPROVEMENTS	031606	SL	15.00	16	31,302.			31,302.	31,302.		0.
9	TENKOTTE BENCHES	083111	SL	7.00	16	3,724.			3,724.	3,724.		0.
10	KAISER CLASSROOM REMODEL	091211	SL	15.00	16	12,103.			12,103.	8,705.		807.
11	ADT CLASSROOM	092211	SL	7.00	16	2,630.			2,630.	2,630.		0.
12	CASKER BENCHES	101811	SL	7.00	16	3,355.			3,355.	3,355.		0.
13	ROOFTOP A/C	090313	SL	10.00	16	7,515.			7,515.	6,639.		752.
14	NEC PHONE SYSTEM	103113	SL	7.00	16	7,058.			7,058.	7,058.		0.
15	HDD SURVEILLEANCE SYSTEM	080813	SL	7.00	16	319.			319.	319.		0.
16	DVR SECURITY SYSTEM	111513	SL	7.00	16	1,281.			1,281.	1,281.		0.
17	DUST COLLECTION MOTORS	022814	SL	7.00	16	2,801.			2,801.	2,801.		0.
18	REFRIGERATOR	011314	SL	7.00	16	430.			430.	430.		0.

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19	POWERSPORT DESKTOP	080813	SL	5.00	16	686.			686.	686.		0.
20	APPLE TABLET	060614	SL	5.00	16	533.			533.	533.		0.
21	2 POWERED SPEAKERS	083114	SL	7.00	16	896.			896.	896.		0.
22	ROOFTOP A/C UNIT	012215	SL	10.00	16	7,527.			7,527.	5,583.		753.
23	DIGITAL MICROSCOPE	012815	SL	7.00	16	4,945.			4,945.	4,945.		0.
24	CELL PHONE	020615	SL	5.00	16	801.			801.	801.		0.
25	2 600GB HARD DRIVES	120514	SL	5.00	16	1,695.			1,695.	1,695.		0.
26	DELL5810 DESKTOP	010815	SL	5.00	16	1,408.			1,408.	1,408.		0.
27	DELL PRECISION M3800	010815	SL	5.00	16	1,808.			1,808.	1,808.		0.
28	DELL T SHOMOAKER	040715	SL	5.00	16	976.			976.	976.		0.
29	DIABOLIC-E TESTER	071515	SL	7.00	16	2,175.			2,175.	2,175.		0.
30	NATAR-125 TESTER	071515	SL	7.00	16	3,848.			3,848.	3,848.		0.
31	REVELATOR-R1 TESTER	071515	SL	7.00	16	3,373.			3,373.	3,373.		0.
32	HAND PRESS	100615	SL	7.00	16	807.			807.	778.		29.
33	ELMA WINDER	100615	SL	7.00	16	1,990.			1,990.	1,919.		71.
34	DRAGON STEAMER	040716	SL	7.00	16	694.			694.	619.		74.
35	LG 43' TV	053116	SL	7.00	16	479.			479.	416.		63.
36	PARKING LOT	041315	SL	15.00	16	6,500.			6,500.	3,033.		433.

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37	EXEC DIR LAPTOP	100415	SL	5.00	16	813.			813.	813.		0.
38	MYCLOUDNETWORK STORAGE	010816	SL	5.00	16	826.			826.	826.		0.
39	SCREWDRIVER BLADE SHARPENER	091916	SL	7.00	16	765.			765.	629.		109.
40	2 PROJECTORS EX3240	091916	SL	7.00	16	856.			856.	703.		122.
41	SECURITY SYSTEM	093016	SL	7.00	16	4,500.			4,500.	3,697.		643.
42	RAY FOSTER MOTORS BATTERY BACKUP	122816	SL	7.00	16	1,274.			1,274.	1,001.		182.
43	HARDWARE	013117	SL	7.00	16	613.			613.	475.		88.
44	CAMERA	033117	SL	7.00	16	751.			751.	563.		107.
45	LANIER COPY MACHINE	042617	SL	7.00	16	9,166.			9,166.	6,765.		1,309.
46	BRYANT AIR CONDITIONER	051117	SL	7.00	16	6,677.			6,677.	4,929.		954.
47	LG TV 43LJ5000	053117	SL	7.00	16	468.			468.	340.		67.
48	3 TIMER & ANALYZERS	122017	SL	7.00	16	4,631.			4,631.	2,977.		662.
49	2 S1 TIMERS	122017	SL	7.00	16	4,495.			4,495.	2,889.		642.
50	QUARTZ TESTER	122017	SL	7.00	16	3,374.			3,374.	2,169.		482.
51	8 HAND PRESSES BUS MC 28 WATCHMAKING	070118	SL	7.00	16	6,385.			6,385.	3,648.		912.
52	KIT	102218	SL	7.00	16	16,292.			16,292.	8,534.		2,327.
53	MC VARIOUS EQUIP	121718	SL	7.00	16	24,261.			24,261.	12,131.		3,466.
54	EPSON DC-2 HI-DEF DOCUMENT CAM	123118	SL	7.00	16	526.			526.	263.		75.

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55	3 VISE'S WERTHER COMPRESSOR	022819	SL	7.00	16	2,122.			2,122.	1,010.		303.
56	VACUUM PUMP	022819	SL	7.00	16	2,174.			2,174.	1,036.		311.
57	9 VISE'S	031319	SL	7.00	16	1,607.			1,607.	766.		230.
58	LAWN MOWER	041219	SL	7.00	16	3,209.			3,209.	1,490.		458.
59	WEED WACKER, BLOWER, WHEEL	041219	SL	7.00	16	372.			372.	172.		53.
60	MC PRESS	041819	SL	7.00	16	722.			722.	326.		103.
61	BERGEON CASE OPENER	051619	SL	7.00	16	733.			733.	323.		105.
62	2-JANETTE BAW	083118	SL	7.00	16	2,140.			2,140.	1,172.		306.
63	6 LENOVO LAPTOPS	022819	SL	7.00	16	4,941.			4,941.	2,353.		706.
64	MEMBERCLICKS SOFTWARE	022819	SL	7.00	16	6,895.			6,895.	3,283.		985.
65	ROOFTOP BRYANT HVAC	021519	SL	7.00	16	9,420.			9,420.	4,598.		1,346.
66	MOBILE CLASSROOM VEHICLE	042919	SL	10.00	16	400,308.			400,308.	126,764.		40,031.
67	MC GREINER VIBRO	041519	SL	7.00	16	5,680.			5,680.	2,637.		811.
68	MC BECO TECHNIC	041519	SL	7.00	16	5,000.			5,000.	2,322.		714.
69	MC BERGEON	041519	SL	7.00	16	6,900.			6,900.	3,203.		986.
70	MC ELMA	041519	SL	7.00	16	9,779.			9,779.	4,540.		1,397.
71	PORTABLE FRIDGE	071219	SL	7.00	16	330.			330.	141.		47.
72	REFRIGERATOR	031020	SL	7.00	16	499.			499.	166.		71.

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