

Return of Organization Exempt From Income Tax

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

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2011 calendar year, or tax year beginning Jul 1, 2011, and ending Jun 30, 2012

Form header section containing organization name (WESTERN RESERVE HISTORICAL SOCIETY), EIN (34-0714724), address (10825 EAST BOULEVARD, CLEVELAND, OH 44106), and principal officer (GAINOR B. DAVIS WRHS).

Part I Summary

Summary table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Rows include mission statement, member counts, revenue breakdown, and total assets.

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.

Signature block section with fields for officer signature (MARY THOBURN, CPA), preparer signature, and firm information.

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [] No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III. [X]

1 Briefly describe the organization's mission:

REFER TO SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior

Form 990 or 990-EZ? [] Yes [X] No

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 [X] 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 and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4 a (Code:) (Expenses \$ 2,674,962. including grants of \$ 0.) (Revenue \$ 1,825,165.)

HISTORY LIBRARY AND MUSEUMS - SEE SCHEDULE O

4 b (Code:) (Expenses \$ 1,043,953. including grants of \$ 0.) (Revenue \$ 643,137.)

HALE FARM & VILLAGE - SEE SCHEDULE O

4 c (Code:) (Expenses \$ 92,775. including grants of \$ 0.) (Revenue \$ 6,500.)

OTHER PROPERTIES - SEE SCHEDULE O

4 d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4 e Total program service expenses 3,811,690.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

BAA

Form 990 (2011)

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

Table with columns for question ID, question text, and Yes/No response boxes. Includes questions 1a through 14b regarding IRS filings and tax compliance.

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 in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year... 24; 1b Enter the number of voting members included in line 1a, above, who are independent... 24; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a 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?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?; b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13.; 12b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done.; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 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? a The organization's CEO, Executive Director, or top management official; b Other officers of key employees of the organization. If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b 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 taken steps to safeguard the organization's exempt status with respect to such arrangements?.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed Ohio
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. [X] Own website [] Another's website [X] Upon request
19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: MARY M. THOBURN CPA CFO 10825 EAST BOULEVARD CLEVELAND OH 44106 (216) 721-5722

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

Check if Schedule O contains a response to any question in this Part VII.

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

1 a 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 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DONALD J. DAILEY CHAIRMAN	1.00	X		X			0.	0.	0.	
(2) GLENN G. ANDERSON, JR. VICE CHAIRMAN	1.00	X		X			0.	0.	0.	
(3) GREGORY M. JELINEK SECRETARY	1.00	X		X			0.	0.	0.	
(4) MARK W. BICHE TREASURER	1.00	X		X			0.	0.	0.	
(5) GREGORY R. BEAN DIRECTOR	1.00	X					0.	0.	0.	
(6) CYNTHIA BRUML DIRECTOR	1.00	X					0.	0.	0.	
(7) GROSVIE R. COOLEY DIRECTOR	1.00	X					0.	0.	0.	
(8) EDWARD C. CRAWFORD DIRECTOR	1.00	X					0.	0.	0.	
(9) GINA K. GUNNING DIRECTOR	1.00	X					0.	0.	0.	
(10) GINA HAMISTER DIRECTOR	1.00	X					0.	0.	0.	
(11) EDITH F. HIRSCH DIRECTOR	1.00	X					0.	0.	0.	
(12) ROBERT H. JACKSON DIRECTOR	1.00	X					0.	0.	0.	
(13) HENRI PELL JUNOD, JR. DIRECTOR	1.00	X					0.	0.	0.	
(14) BETTY J. KEMPER DIRECTOR	1.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Sch O)	(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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(15) JOHN KOKINCHAK DIRECTOR	1.00	X					0.	0.	0.
(16) J. RODERICK MACDONALD DIRECTOR	1.00	X					0.	0.	0.
(17) LEE POSEIDON DIRECTOR	1.00	X					0.	0.	0.
(18) SHIRLEY SMITH SEATON DIRECTOR	1.00	X					0.	0.	0.
(19) DAVID L. STASHOWER DIRECTOR	1.00	X					0.	0.	0.
(20) CONGRESSMAN LOUIS STOKES DIRECTOR	1.00	X					0.	0.	0.
(21) DAVID TILK DIRECTOR	1.00	X					0.	0.	0.
(22) THOMAS V. H. VAIL, JR. DIRECTOR	1.00	X					0.	0.	0.
(23) MYRON T. VERNIS DIRECTOR	1.00	X					0.	0.	0.
(24) CRAIG OWEN WHITE DIRECTOR	1.00	X					0.	0.	0.
(25) GAINOR B. DAVIS, PHD PRESIDENT/CEO	35.00			X			141,504.	0.	0.
1 b Sub-total							141,504.	0.	0.
c Total from continuation sheets to Part VII, Section A									
d Total (add lines 1b and 1c)							141,504.	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 **1**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
WESTON HURD FALLON PAISLEY & HOWLEY D.1301 EAST 9TH ST. STE 1900 CLEVELAND OH 44114	PROFESSIONAL FEES	104,000.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **1**

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns	1 a					
	b Membership dues	1 b 136,027.					
	c Fundraising events	1 c					
	d Related organizations	1 d					
	e Government grants (contributions) . . .	1 e 2,952,202.					
	f All other contributions, gifts, grants, and similar amounts not included above . . .	1 f 2,572,380.					
	g Noncash contributions included in lns 1a-1f: \$						
	h Total. Add lines 1a-1f ▶		5,660,609.				
PROGRAM SERVICE REVENUE			Business Code				
	2 a <u>ADMISSIONS & PARKING</u>	900099	402,614.	402,614.	0.	0.	
	b <u>FEE FOR SERVICE</u>	900099	113,270.	113,270.	0.	0.	
	c <u>MISCELLANEOUS</u>	900099	62,348.	62,348.	0.	0.	
	d _____						
	e _____						
	f All other program service revenue . . .						
	g Total. Add lines 2a-2f ▶		578,232.				
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts) ▶		367,117.	0.	0.	367,117.	
	4 Income from investment of tax-exempt bond proceeds . . ▶						
	5 Royalties ▶						
	6 a Gross rents	(i) Real	(ii) Personal				
		139,702.					
		b Less: rental expenses					
		c Rental income or (loss)	139,702.				
	d Net rental income or (loss) ▶			139,702.	0.	0.	139,702.
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		1,971,702.	34,559.				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)	59,751.	34,559.			
	d Net gain or (loss) ▶			94,310.	34,559.	0.	59,751.
	8 a Gross income from fundraising events (not including: \$ _____ of contributions reported on line 1c). See Part IV, line 18.	a	225,054.				
		b Less: direct expenses	b	116,251.			
		c Net income or (loss) from fundraising events ▶			108,803.	0.	108,803.
	9 a Gross income from gaming activities. See Part IV, line 19.	a					
		b Less: direct expenses	b				
c Net income or (loss) from gaming activities ▶							
10 a Gross sales of inventory, less returns and allowances	a	145,599.					
	b Less: cost of goods sold	b	85,202.				
	c Net income or (loss) from sales of inventory ▶			60,397.	60,397.	0.	0.
Miscellaneous Revenue		Business Code					
11 a <u>FOOD SERVICE REVENUE</u>	722320	43,552.	0.	43,552.	0.		
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d ▶		43,552.					
12 Total revenue. See instructions ▶		7,052,722.	673,188.	43,552.	675,373.		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
 All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	253,733.	0.	253,733.	0.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,862,360.	1,430,343.	153,807.	278,210.
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	170,470.	126,510.	18,026.	25,934.
10 Payroll taxes	145,645.	108,147.	16,424.	21,074.
11 Fees for services (non-employees):				
a Management				
b Legal	30,706.	9,492.	21,214.	0.
c Accounting	18,500.	0.	18,500.	0.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	225,159.	196,892.	28,267.	0.
12 Advertising and promotion	59,975.	52,838.	2,855.	4,282.
13 Office expenses	79,085.	23,973.	53,413.	1,699.
14 Information technology	45,943.	29,011.	16,410.	522.
15 Royalties				
16 Occupancy	525,171.	475,455.	25,763.	23,953.
17 Travel	11,621.	9,913.	852.	856.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	9,352.	2,887.	1,229.	5,236.
20 Interest	2,883.	2,220.	663.	0.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	800,399.	749,953.	32,815.	17,631.
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>DIRECTORS EXPENSE</u>	12,379.	4,936.	6,918.	525.
b <u>REPAIRS & MAINTENANCE</u>	113,486.	105,810.	3,838.	3,838.
c <u>SECURITY</u>	50,811.	46,135.	2,338.	2,338.
d <u>POSTAGE & SHIPPING</u>	18,735.	4,144.	6,117.	8,474.
e All other expenses	509,009.	433,031.	11,297.	64,681.
25 Total functional expenses. Add lines 1 through 24e.	4,945,422.	3,811,690.	674,479.	459,253.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
ASSETS	1	Cash — non-interest-bearing	480,197.	1	148,330.
	2	Savings and temporary cash investments	1,220,177.	2	1,184,378.
	3	Pledges and grants receivable, net	686,363.	3	1,275,922.
	4	Accounts receivable, net	133,802.	4	26,169.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions).		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	105,053.	8	106,154.
	9	Prepaid expenses and deferred charges	50,115.	9	14,162.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 20,392,325.		
	b	Less: accumulated depreciation	10b 8,731,692.	10c	11,660,633.
	11	Investments — publicly traded securities	14,481,636.	11	13,694,170.
	12	Investments — other securities. See Part IV, line 11		12	
	13	Investments — program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	7,122,451.	15	7,143,404.
16	Total assets. Add lines 1 through 15 (must equal line 34)	33,633,181.	16	35,253,322.	
LIABILITIES	17	Accounts payable and accrued expenses.	355,292.	17	160,185.
	18	Grants payable.		18	
	19	Deferred revenue	67,095.	19	58,297.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	217,903.	23	339,617.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	60,864.	25	809,852.
	26	Total liabilities. Add lines 17 through 25	701,154.	26	1,367,951.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.				
	27	Unrestricted net assets	9,970,816.	27	11,983,702.
	28	Temporarily restricted net assets	7,884,739.	28	7,374,522.
	29	Permanently restricted net assets	15,076,472.	29	14,527,147.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances.	32,932,027.	33	33,885,371.
	34	Total liabilities and net assets/fund balances	33,633,181.	34	35,253,322.

BAA

Form 990 (2011)

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI.

1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,052,722.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,945,422.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,107,300.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	32,932,027.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-1,153,956.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	33,885,371.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII.

		Yes	No
1	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 in Schedule O.		
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2 b	Were the organization's financial statements audited by an independent accountant?	X	
2 c	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d	If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued 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		
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3 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 in Schedule O and describe any steps taken to undergo such audits		

BAA

Form 990 (2011)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization WESTERN RESERVE HISTORICAL SOCIETY	Employer identification number 34-0714724
---	---

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III — Functionally integrated
 - d Type III — Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11 g (i)	
(ii) A family member of a person described in (i) above?	11 g (ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11 g (iii)	

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		(v) Did you notify the organization in column (i) of your support?		(vi) Is the organization in column (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.)	2,472,864.	1,701,506.	2,901,327.	2,743,053.	5,660,609.	15,479,359.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge.						
4 Total. Add lines 1 through 3	2,472,864.	1,701,506.	2,901,327.	2,743,053.	5,660,609.	15,479,359.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						15,479,359.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	2,472,864.	1,701,506.	2,901,327.	2,743,053.	5,660,609.	15,479,359.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,954,333.	2,060,062.	4,830,875.	1,138,317.	594,718.	11,578,305.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	38,253.	0.	0.	31,354.	43,552.	113,159.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	854,520.	1,305,857.	1,066,894.	829,729.	753,843.	4,810,843.
11 Total support. Add lines 7 through 10						31,981,666.
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	48.40 %
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	40.91 %
16a 33-1/3% support test – 2011. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
b 33-1/3% support test – 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test – 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test – 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lns 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2010 Schedule A, Part III, line 15.	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	%

19a 33-1/3% support tests — 2011. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33-1/3% support tests — 2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Other Income Part II, Line 10

Description: PROGRAM SERVICE

2007: 711483.

2008: 858961.

2009: 526904.

2010: 501037.

2011: 402614.

Description: SPECIAL EVENTS, NET

2007: 61834.

2008: 110393.

2009: 100697.

2010: 136709.

2011: 115214.

Description: RETAIL SALES, NET

2007: 81203.

2008: 113576.

2009: 62641.

2010: 79263.

2011: 60397.

Description: OTHER REVENUE

2007: 0.

2008: 222927.

2009: 376652.

2010: 112720.

2011: 175618.

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2011

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below.**

▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization WESTERN RESERVE HISTORICAL SOCIETY	Employer identification number 34-0714724
---	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4 a Was a correction made? Yes No
- b If 'Yes,' describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c) , except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)	-----			
(2)	-----			
(3)	-----			
(4)	-----			
(5)	-----			
(6)	-----			

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and 'limited control' provisions apply.

Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1 a Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

BAA

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
<i>For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.</i>			
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		104,000.
j Total. Add lines 1c through 1i.			104,000.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912.			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) Part III-A, line 3, is answered 'Yes.'

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1. Also, complete this part for any additional information.

Pt I-A Line 1 THE SOCIETY HAS ENGAGED THE SERVICES OF STATE LOBBYISTS
 DURING THE FISCAL YEAR TO LOBBY IN SUPPORT OF THE
 SOCIETY'S REQUEST FOR SUPPORT THROUGH THE STATE OF OHIO
 CAPITAL BUDGET AND ANY OTHER MATTERS AFFECTING THE
 SOCIETY

Pt II-B Line 1i THE SOCIETY PAID \$104,000 IN FEES TO STATE LOBBYISTS.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. See separate instructions.

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization

Employer identification number

WESTERN RESERVE HISTORICAL SOCIETY

34-0714724

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

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate contributions, aggregate grants, aggregate value, and two questions about donor informed consent.

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

Form for Part II Conservation Easements. Includes questions about purpose of easements, total acreage, number of easements, and monitoring expenses. Includes a table for 'Held at the End of the Tax Year' with rows 2a, 2b, 2c, 2d.

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

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting requirements and amounts for revenues and assets.

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a 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 programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 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' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1 a 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 XIV and complete the following table:
- | | Amount |
|---|--------|
| c Beginning balance | 1 c |
| d Additions during the year | 1 d |
| e Distributions during the year | 1 e |
| f Ending balance | 1 f |
- 2 a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If 'Yes,' explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance	14,284,990.	12,226,126.	11,168,446.	14,502,089.	
b Contributions		2,000.	478,590.	9,331.	
c Net investment earnings, gains, and losses	-146,419.	2,722,022.	1,648,769.	-2,316,694.	
d Grants or scholarships					
e Other expenditures for facilities and programs	622,840.	665,158.	1,069,679.	1,026,280.	
f Administrative expenses					
g End of year balance	13,515,731.	14,284,990.	12,226,126.	11,168,446.	

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment ▶ 3.00 %
 - b Permanent endowment ▶ 37.00 %
 - c Temporarily restricted endowment ▶ 60.00 %
- The percentages in lines 2a, 2b, and 2c should equal 100%.

- 3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----|
| (i) unrelated organizations | X | |
| (ii) related organizations | | X |
| b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? | | |

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. 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
1 a Land		1,123,973.		1,123,973.
b Buildings		15,506,608.	8,295,107.	7,211,501.
c Leasehold improvements				
d Equipment		815,209.	436,585.	378,624.
e Other		2,946,535.		2,946,535.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				11,660,633.

Part VII Investments – Other Securities. 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) -----		
(I) -----		
Total. (Column (b) must equal Form 990 Part X, column (B) line 12.) . . ▶		

Part VIII Investments – Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) . . ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) BENEFICIAL INTERESTS IN TRUSTS	6,560,258.
(2) CAPITAL ACCOUNTS RECEIVABLE	583,146.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B), line 15.) ▶	7,143,404.

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ANNUITY OBLIGATIONS	53,428.
(3) CAPITAL ACCOUNTS PAYABLE	756,424.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) ▶	809,852.

2 FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)		7,052,722.
2	Total expenses (Form 990, Part IX, column (A), line 25)		4,945,422.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		2,107,300.
4	Net unrealized gains (losses) on investments		-591,763.
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV.)		-562,193.
9	Total adjustments (net). Add lines 4 through 8		-1,153,956.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		953,344.

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

1	Total revenue, gains, and other support per audited financial statements		1	5,898,766.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains on investments	2 a		-591,763.
	b Donated services and use of facilities	2 b		
	c Recoveries of prior year grants	2 c		
	d Other (Describe in Part XIV.)	2 d		-562,193.
	e Add lines 2 a through 2 d		2 e	-1,153,956.
3	Subtract line 2 e from line 1		3	7,052,722.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
	b Other (Describe in Part XIV.)	4 b		
	c Add lines 4 a and 4 b		4 c	
5	Total revenue. Add lines 3 and 4 c . (This must equal Form 990, Part I, line 12.)		5	7,052,722.

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

1	Total expenses and losses per audited financial statements		1	4,945,422.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2 a		
	b Prior year adjustments	2 b		
	c Other losses	2 c		
	d Other (Describe in Part XIV.)	2 d		
	e Add lines 2 a through 2 d		2 e	
3	Subtract line 2 e from line 1		3	4,945,422.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
	b Other (Describe in Part XIV.)	4 b		
	c Add lines 4 a and 4 b		4 c	
5	Total expenses. Add lines 3 and 4 c . (This must equal Form 990, Part I, line 18.)		5	4,945,422.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Pt III Line 1a "THE SOCIETY'S COLLECTIONS OF HISTORICALLY SIGNIFICANT
 ARTIFACTS, ART OBJECTS, AND OTHER MATERIALS ARE HELD FOR
 EDUCATION, RESEARCH, AND PUBLIC EXHIBITION, AND ARE NOT
 CAPITALIZED BY THE SOCIETY. THE BOARD OF TRUSTEES
 CONSIDER STAFF RECOMMENDATIONS REGARDING COLLECTION
 ITEMS TO BE DEACCESSIONED AND SOLD, WHICH MAY OCCUR
 BECAUSE THE ITEMS ARE DUPLICATES OR NO LONGER MEET THE
 MISSION OR PURPOSES OF THE SOCIETY. NET SALES PROCEEDS

Part XIV Supplemental Information (continued)

----- ARE USED TO ADDRESS SPECIFIC NEEDS OF THE SOCIETY,
----- INCLUDING DEBT RETIREMENT AS DEEMED WARRANTED. SUCH
----- ACTIVITY IS REFLECTED IN THE STATEMENT OF ACTIVITIES AS
----- PROCEEDS FROM THE SALES OF GIFTS-IN-KIND, UNDER
----- NON-OPERATING CHANGES."

Pt III Line 4 THE SOCIETY'S COLLECTIONS OF HISTORICALLY SIGNIFICANT
----- ARTIFACTS, ART OBJECTS, AND OTHER MATERIALS ARE HELD FOR
----- EDUCATION, RESEARCH, AND PUBLIC EXHIBITION.

Pt V Line 4 THE SOCIETY HAS ADOPTED INVESTMENT AND SPENDING POLICIES
----- FOR ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE FUNDS FOR
----- VARIOUS OPERATING AND MAINTENANCE EXPENSES WHILE SEEKING
----- TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS.

Pt X "THE SOCIETY WAS REQUIRED TO ADOPT CERTAIN PROVISIONS
----- OF GAAP REGARDING TAX UNCERTAINTIES ON JULY 1, 2009.
----- HOWEVER, THE ADOPTION OF THESE PROVISIONS HAD NO EFFECT
----- ON NET ASSETS OR THE RESULTS OF OPERATIONS. BASED ON
----- IRC RULES REGARDING THE STATUTE OF LIMITATIONS OF
----- EXAMINING HISTORICAL INCOME TAX RETURNS, THE SOCIETY'S
----- FORMS 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME
----- TAX, ARE NO LONGER SUBJECT TO EXAMINATION BY TAX
----- AUTHORITIES FOR YEARS ENDING BEFORE JUNE 30, 2009.
----- THE SOCIETY CURRENTLY HAS NO UNCERTAIN TAX POSITIONS
----- THAT IT HAS TAKEN AND BELIEVES THAT IT CAN DEFEND THE
----- SOCIETY'S TAX RETURNS TO ANY JURISDICTION."

Pt XI Line 8 CHANGE IN BENEFICIAL INTEREST IN TRUSTS

Pt XII Line 2d CHANGE IN BENEFICIAL INTEREST IN TRUSTS

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

REVENUE	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
	<u>SOMEWHERE IN TIME</u> (event type)	<u>HALE LEGACY</u> (event type)	<u>TWO EVENTS</u> (total number)	(add column (a) through column (c))	
1	Gross receipts	206,824.	18,230.	225,054.	
2	Less: Charitable contributions				
3	Gross income (line 1 minus line 2).	206,824.	18,230.	225,054.	
DIRECT EXPENSES	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	109,840.	6,411.	116,251.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			116,251.
11	Net income summary. Combine line 3, column (d), and line 10			108,803.	

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

REVENUE	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
				(add column (a) through column (c))
1	Gross revenue			
DIRECT EXPENSES	2	Cash prizes		
	3	Non-cash prizes		
	4	Rent/facility costs		
	5	Other direct expenses		
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)			
8	Net gaming income summary. Combine lines 1, column (d) and line 7			

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

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

b If 'No,' explain: _____

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

b If 'Yes,' explain: _____

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

2011

**Open To Public
Inspection**

Name of the organization

WESTERN RESERVE HISTORICAL SOCIETY

Employer identification number

34-0714724

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art – Works of art				
2 Art – Historical treasures				
3 Art – Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities – Publicly traded				
10 Securities – Closely held stock				
11 Securities – Partnership, LLC, or trust interests				
12 Securities – Miscellaneous				
13 Qualified conservation contribution – Historic structures				
14 Qualified conservation contribution – Other				
15 Real estate – Residential				
16 Real estate – Commercial				
17 Real estate – Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts	X	75	0.	
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (<u>MANUSCRIPT COLLECTIONS</u>)	X	124	0.	
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 1.

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

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

Schedule M (Form 990) 2011

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

Pt I col(b) 75 HISTORIC OBJECTS/ARTIFACTS FROM 15 DONORS,
124 NEW MANUSCRIPT COLLECTIONS, TOTALING 642 LINEAR
SQUARE FEET.

Pt I Line 33 COLLECTION ASSETS ARE NOT CAPITALIZED.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2011

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

**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 990-EZ.**

Name of the organization

WESTERN RESERVE HISTORICAL SOCIETY

Employer identification number

34-0714724

Pt VI, Line 11a THE BOARD OF DIRECTORS FORMALLY DELEGATED THE REVIEW
OF THE DRAFT FORM OF THE 990 TO THE AUDIT COMMITTEE.
THE AUDIT COMMITTEE REVIEWED AND APPROVED THE DRAFT
PRIOR TO FILING.

Pt VI, Line 12c EACH DIRECTOR MUST SIGN AN ANNUAL STATEMENT AFFIRMING
THEY HAVE READ THE CONFLICT OF INTEREST POLICY AND
ARE IN COMPLIANCE WITH THE POLICY.

Pt VI, Line 15 THE EXECUTIVE COMMITTEE IS AUTHORIZED TO MAKE
RECOMMENDATIONS TO THE BOARD REGARDING EXECUTIVE
COMPENSATION. ONLY THOSE MEMBERS OF THE EXECUTIVE
COMMITTEE WHO ARE FREE OF CONFLICTS OF INTEREST MAY BE
INVOLVED IN THE EVALUATION OF EXECUTIVE COMPENSATION.
THE EXECUTIVE COMMITTEE, TO THE EXTENT REASONABLY
AVAILABLE, TAKES INTO ACCOUNT APPROPRIATE DATA AS TO
COMPARABILITY PRIOR TO MAKING ITS RECOMMENDATION, AND
CONTEMPORANEOUSLY PLACES SUCH DATA AND OTHER
REASONS FOR ITS RECOMMENDATION IN THE MINUTES. ONLY
THOSE DIRECTORS WHO ARE FREE FROM CONFLICTS OF
INTEREST MAY VOTE ON EXECUTIVE COMPENSATION. THE BOARD
REVIEWS AND APPROVES EXECUTIVE COMPENSATION AFTER A
REVIEW OF COMPARABILITY DATA OR OTHER EVIDENCE THAT
COMPENSATION IS REASONABLE, AND CONTEMPORANEOUSLY
SUBSTANTIATES ITS DELIBERATION AND DECISION IN THE
MINUTES.

Pt III, Line 1 THE WESTERN RESERVE HISTORICAL SOCIETY PRESERVES
AND USES ITS COLLECTIONS, HISTORIC SITES, AND

Name of the organization

Employer identification number

WESTERN RESERVE HISTORICAL SOCIETY

34-0714724

MUSEUMS TO INSPIRE PEOPLE TO DISCOVER THE AMERICAN EXPERIENCE BY EXPLORING THE TANGIBLE HISTORY OF NORTHEAST OHIO.

Pt III, Line 4a THE WESTERN RESERVE HISTORICAL SOCIETY HISTORY CENTER IN CLEVELAND'S UNIVERSITY CIRCLE HOUSES THE INSTITUTION'S ADMINISTRATIVE HEADQUARTERS, HISTORY MUSEUM, LIBRARY/ARCHIVES & GENEALOGY CENTER, CRAWFORD AUTO AVIATION COLLECTION, CHISHOLM HALLE COSTUME WING, KIDZIBITS FAMILY EDUCATION CENTER, AND TWO EARLY 20TH CENTURY HISTORIC HOMES - THE HAY MCKINNEY AND BINGHAM-HANNA MANSIONS. THE COLLECTIONS AND ARCHIVES ARE AMONG THE MOST EXTENSIVE OF ANY REGIONAL HISTORY CENTER IN THE UNITED STATES - A REFLECTION OF MORE THAN 140 YEARS OF COLLECTING. WRHS WAS FOUNDED IN 1867 TO PRESERVE THE HISTORY OF THE CONNECTICUT WESTERN RESERVE - THE NAME FOR THE LAND ON THE WESTERN EDGE OF THE CONNECTICUT TERRITORY WHICH IS NOW NORTHEAST OHIO. TODAY, WRHS COLLECTS, PRESERVES, AND PRESENTS THE HISTORY OF NORTHEAST OHIO TO CONNECT WITH PEOPLE, INSPIRING THEM TO DISCOVER THEMSELVES, THEIR FAMILIES AND COMMUNITIES BY EXPLORING THE PAST AND IMAGINING THE FUTURE. THIS IS ACHIEVED THROUGH A COMBINATION OF EXHIBITS, PROGRAMS AND EVENTS FOR ALL AGES AND INTERESTS. THE WRHS COLLECTIONS ARE VAST AND VARIED. THE LIBRARY/ARCHIVES HOLD MILLIONS OF ITEMS INCLUDING BOOKS, PHOTOGRAPHS, MANUSCRIPTS AND DOCUMENTS, MAKING

Name of the organization WESTERN RESERVE HISTORICAL SOCIETY	Employer identification number 34-0714724
--	--

IT A PREMIER RESEARCH INSTITUTE FOR SCHOLARS, THE
GENERAL PUBLIC AND GENEALOGISTS. HIGHLIGHTS OF THE
COLLECTIONS INCLUDE CIVIL WAR MATERIALS, VARIOUS
ETHNIC AND COMMUNITY COLLECTIONS SUCH AS THOSE OF THE
AFRICAN-AMERICAN, JEWISH, ITALIAN, AND IRISH HISTORIES
OF THE REGION, AND EXTENSIVE BUSINESS, INDUSTRIAL,
ENTREPRENEURIAL, AND POLITICAL RECORDS.
THE WRHS HISTORIC COSTUME AND TEXTILE COLLECTION IS
ONE OF THE LARGEST IN THE UNITED STATES.
THE INSTITUTION'S COLLECTIONS OF ITEMS RELATED
TO THE SHAKER COMMUNITIES IS, IN FACT,
THE LARGEST IN THE U.S. THE DECORATIVE ARTS
COLLECTION INCLUDES ABOUT 3,500 ARTIFACTS OWNED BY
EARLY RESIDENTS OF THE WESTERN RESERVE, AND
APPROXIMATELY 800 PAINTINGS REFLECTING THE HISTORY
OF THE REGION. THE CRAWFORD AUTO AVIATION COLLECTION
CONTAINS MORE THAN 157 CARS, 10 AIRPLANES, AND
NUMEROUS MOTORCYCLES, BICYCLES AND OTHER AUTOMOTIVE-
RELATED ITEMS. ALONG WITH THE LIBRARY'S AUTOMOTIVE
MARQUE FILES, THE CRAWFORD COLLECTION TELLS THE STORY
OF THE AUTOMOTIVE INDUSTRY, PARTICULARLY IN
NORTHEAST OHIO.

Pt III, Line 4b HALE FARM & VILLAGE, IN SCENIC CUYAHOGA VALLEY SOUTH
OF CLEVELAND, IS AN OUTDOOR LIVING HISTORY MUSEUM OF
THE WESTERN RESERVE HISTORICAL SOCIETY. AT HALE, 19TH
CENTURY LIFE IS PRESENTED TO ENGAGE, STIMULATE AND
CHALLENGE VISITORS TO SUSPEND THEIR DISBELIEF, STEP

Name of the organization

Employer identification number

WESTERN RESERVE HISTORICAL SOCIETY

34-0714724

----- BACK IN TIME, AND USE THE LESSONS OF THE PAST TO MAKE -----
 ----- INFORMED DECISIONS ABOUT THE PRESENT AND THE FUTURE. -----
 ----- THE 90 ACRE SITE IS COMPRISED OF 32 HISTORIC, RESTORED -----
 ----- 19TH CENTURY STRUCTURES; A MODERN VISITOR'S CENTER -----
 ----- WITH GIFT SHOP AND CAFE; SEVERAL GARDENS; HERITAGE -----
 ----- LIVESTOCK BREEDS; AND THE EARLY AMERICAN CRAFT AND -----
 ----- TRADE PROGRAM THAT FEATURES GLASSBLOWING, -----
 ----- BLACKSMITHING, POTTERY, CANDLE, BROOM AND BASKET -----
 ----- MAKING; AND HEARTH AND WOODSTOVE COOKING. -----
 ----- FOUR GENERATIONS OF THE HALE FAMILY USED THE LAND -----
 ----- AND RESOURCES TO CARVE OUT A NICHE FOR THEMSELVES -----
 ----- IN THE CUYAHOGA VALLEY. THE MUSEUM BUILDS ITS -----
 ----- PROGRAMMING AND OPERATIONS WITH REVERANCE FOR THE -----
 ----- HALES' ENTREPRENEURIAL SPIRIT COMBINED WITH A DEEP -----
 ----- RESPECT FOR THE PAST. THE GOAL IS TO BUILD -----
 ----- SUSTAINABLE OPERATIONS THROUGH ENGAGING -----
 ----- EDUCATIONAL, FAMILY, AND COMMUNITY PROGRAMS. -----
 ----- THE YEAR 'ROUND PROGRAM CALENDAR FOLLOWS THE SEASONAL -----
 ----- CYCLE OF RURAL LIFE IN NORTHEAST OHIO. ANNUAL PROGRAM -----
 ----- HIGHLIGHTS INCLUDE THE SUMMER CIVIL WAR ENCAMPMENT -----
 ----- WHICH DRAWS HUNDREDS OF CIVIL WAR RE-ENACTORS AND -----
 ----- THOUSANDS OF VISITORS. CIVIL WAR-ERA HISTORY AND -----
 ----- INTERPRETATION IS A HALLMARK OF HALE PROGRAMMING -----
 ----- FEATURED IN ANNUAL HOLIDAY LANTERN TOURS OF THE -----
 ----- VILLAGE AND THE UNDERGROUND RAILROAD EDUCATION -----
 ----- PROGRAM. HARVEST FESTIVAL IS ANOTHER ANNUAL EVENT -----
 ----- DRAWING THOUSANDS OF VISITORS PARTICIPATING IN HARVEST -----

Name of the organization

Employer identification number

WESTERN RESERVE HISTORICAL SOCIETY

34-0714724

SEASON ACTIVITIES.

HALE INCREASINGLY CONSIDERS THE CONNECTION BETWEEN

ENTREPRENEURSHIP AND SUSTAINABILITY IN ITS

PROGRAMMING. STUDENT EDUCATION PROGRAMS TEACH THE

PRINCIPLES OF ECONOMICS IN EVERYDAY LIFE BY EXPLORING

THE ROOTS OF ENTREPRENEURSHIP IN NORTHEAST OHIO

AND CONSIDERING WISE USE OF LIMITED RESOURCES.

THE PHRASE "COME HOME TO HALE" APTLY DESCRIBES THE

VISITOR EXPERIENCE AT HALE FARM & VILLAGE - WHERE ONE

MAY CONNECT WITH THE PAST AND FIND ITS RELEVANCE FOR

THE PRESENT AND THE FUTURE.

Pt III, Line 4C SHANDY HALL IS AN 1815 HOME ON 115 ACRES OF LAND IN

ASHTABULA COUNTY, AND CONSISTS OF A MAIN HOUSE AND

SEVERAL OUTBUILDINGS. THE HOME WAS OCCUPIED BY SEVEN

GENERATIONS OF THE SAME FAMILY AND CONTAINS ORIGINAL

FURNISHINGS - MAKING IT A TRUE GEM OF THE WRHS

COLLECTION. THE SITE IS OPEN TO THE PUBLIC FOR TOURS

BY APPOINTMENT ONLY. LOGHURST, IN MAHONING COUNTY,

SITS ON 7.5 ACRES AND INCLUDES A CIRCA 1805 LOG

HOUSE - BELIEVED TO BE THE OLDEST SUCH STRUCTURE IN

NORTHEAST OHIO. WRHS ENJOYS A CO-STEWARDSHIP

ARRANGEMENT WITH THE CANFIELD HERITAGE FOUNDATION TO

OPERATE THE PROPERTY ON A SEASONAL BASIS.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ **Complete if the organization answered 'Yes' to Form 990, Part IV, line 33, 34, 35, 36, or 37.**
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization

WESTERN RESERVE HISTORICAL SOCIETY

Employer identification number

34-0714724

Part I Identification of Disregarded Entities (Complete if the organization answered 'Yes' to Form 990, Part IV, line 33.)

(a) Name, address, and EIN 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
(1) ----- ----- -----					
(2) ----- ----- -----					
(3) ----- ----- -----					

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered 'Yes' to 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) Sec 512(b)(13) controlled entity?	
						Yes	No
(1) <u>CLIFFSIDE ARTISTS COLLABORATIVE</u> <u>4070 CENTER RD.</u> <u>BRUNSWICK, OH 44212</u> <u>20-8081213</u>	ARTS EDUCATION	OH	501(C)(3)	TYPE I	N/A		
(2) ----- ----- -----							
(3) ----- ----- -----							
(4) ----- ----- -----							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) ----- ----- -----												
(2) ----- ----- -----												
(3) ----- ----- -----												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) COHODAS VINEYARDS INC. 34-6513631 10825 EAST BOULEVARD CLEVELAND, OH 44106	VINEYARD PRODUCE	OH	N/A	S	-3,399.	26,713.	100.00
(2) ----- ----- -----							
(3) ----- ----- -----							

Part V Transactions With Related Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34, 35, 35a, or 36.)

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

	Yes	No
1 During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Gift, grant, or capital contribution to related organization(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c Gift, grant, or capital contribution from related organization(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d Loans or loan guarantees to or for related organization(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e Loans or loan guarantees by related organization(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f Sale of assets to related organization(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g Purchase of assets from related organization(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h Exchange of assets with related organization(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i Lease of facilities, equipment, or other assets to related organization(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
j Lease of facilities, equipment, or other assets from related organization(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
k Performance of services or membership or fundraising solicitations for related organization(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
l Performance of services or membership or fundraising solicitations by related organization(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
n Sharing of paid employees with related organization(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
o Reimbursement paid to related organization(s) for expenses	<input type="checkbox"/>	<input checked="" type="checkbox"/>
p Reimbursement paid by related organization(s) for expenses	<input type="checkbox"/>	<input checked="" type="checkbox"/>
q Other transfer of cash or property to related organization(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
r Other transfer of cash or property from related organization(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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 other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) COHODAS VINEYARDS INC .	NONE	0 .	N/A
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 37.)

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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1) ----- ----- -----													
(2) ----- ----- -----													
(3) ----- ----- -----													
(4) ----- ----- -----													
(5) ----- ----- -----													
(6) ----- ----- -----													
(7) ----- ----- -----													
(8) ----- ----- -----													

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ

Form 990, Page 10, Line 24e All Other Expenses (continued)

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
PRINTING	50,140.	18,752.	624.	30,764.
PROGRAM EXPENSE	187,366.	176,662.	7,753.	2,951.
MISCELLANEOUS	30,358.	25,874.	2,920.	1,564.
FACILITY RENTAL EXPENSE	21,068.	10,429.	0.	10,639.
UNCOLLECTIBLE PLEDGES	55,056.	55,056.	0.	0.
MEMBERSHIP	18,763.	0.	0.	18,763.
LOSS ON RETIREMENT OF ASSETS	146,258.	146,258.		

**Return by a U.S. Transferor of Property
 to a Foreign Corporation**

▶ Attach to your income tax return for the year of the transfer or distribution.

Part I U.S. Transferor Information (see instructions)

Name of transferor	Identifying number (see instructions)
--------------------	---------------------------------------

- 1** If the transferor was a corporation, complete questions 1a through 1d.
- a** If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by 5 or fewer domestic corporations? Yes No
- b** Did the transferor remain in existence after the transfer? Yes No
 If not, list the controlling shareholder(s) and their identifying number(s):

Controlling shareholder	Identifying number

- c** If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation? Yes No
 If not, list the name and employer identification number (EIN) of the parent corporation:

Name of parent corporation	EIN of parent corporation

- d** Have basis adjustments under section 367(a)(5) been made? Yes No

- 2** If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such under section 367), complete questions 2a through 2d.

- a** List the name and EIN of the transferor's partnership:

Name of partnership	EIN of partnership

- b** Did the partner pick up its pro rata share of gain on the transfer of partnership assets? Yes No
- c** Is the partner disposing of its **entire** interest in the partnership? Yes No
- d** Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market? Yes No

Part II Transferee Foreign Corporation Information (see instructions)

3 Name of transferee (foreign corporation)	4 Identifying number, if any
5 Address (including country)	
6 Country code of country of incorporation or organization (see instructions)	
7 Foreign law characterization (see instructions)	
8 Is the transferee foreign corporation a controlled foreign corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Part III Information Regarding Transfer of Property (see instructions)

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash					
Stock and securities					
Installment obligations, account receivables or similar property					
Foreign currency or other property denominated in foreign currency					
Inventory					
Assets subject to depreciation recapture (see Temp. Regs. sec. 1.367(a)-4T(b))					
Tangible property used in trade or business not listed under another category					
Intangible property					
Property to be leased (as described in final and temp. Regs. sec. 1.367(a)-4(c))					
Property to be sold (as described in Temp. Regs. sec. 1.367(a)-4T(d))					
Transfers of oil and gas working interests (as described in Temp. Regs. sec. 1.367(a)-4T(e))					
Other property					

Supplemental Information Required To Be Reported (see instructions):

Part IV Additional Information Regarding Transfer of Property (see instructions)

- 9** Enter the transferor's interest in the foreign transferee corporation before and after the transfer:
(a) Before _____% **(b)** After _____%
- 10** Type of nonrecognition transaction (see instructions) ►
- 11** Indicate whether any transfer reported in Part III is subject to any of the following:
- a** Gain recognition under section 904(f)(3) **Yes** **No**
 - b** Gain recognition under section 904(f)(5)(F) **Yes** **No**
 - c** Recapture under section 1503(d) **Yes** **No**
 - d** Exchange gain under section 987 **Yes** **No**
- 12** Did this transfer result from a change in the classification of the transferee to that of a foreign corporation? **Yes** **No**
- 13** Indicate whether the transferor was required to recognize income under final and temporary Regulations sections 1.367(a)-4 through 1.367(a)-6 for any of the following:
- a** Tainted property **Yes** **No**
 - b** Depreciation recapture **Yes** **No**
 - c** Branch loss recapture **Yes** **No**
 - d** Any other income recognition provision contained in the above-referenced regulations **Yes** **No**
- 14** Did the transferor transfer assets which qualify for the trade or business exception under section 367(a)(3)? **Yes** **No**
- 15a** Did the transferor transfer foreign goodwill or going concern value as defined in Temporary Regulations section 1.367(a)-1T(d)(5)(iii)? **Yes** **No**
- b** If the answer to line 15a is "Yes," enter the amount of foreign goodwill or going concern value transferred ► \$
- 16** Was cash the only property transferred? **Yes** **No**
- 17a** Was intangible property (within the meaning of section 936(h)(3)(B)) transferred as a result of the transaction? **Yes** **No**
- b** If "Yes," describe the nature of the rights to the intangible property that was transferred as a result of the transaction:
