Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

A	For the 2	024 calend	ar year, or tax ye	ar beginning	01/01	/2024	and ending		12/31/2	2024		
В	Check if a	oplicable:	C Name of organizat		CAROLINA R	AILWAY MU	SEUM INC			D Empl	oyer identification	number
	Address cl	nange	Doing business as	1							56-6073399	,
	Name char	nge	Number and stree	t (or P.O. box if	f mail is not deli	vered to street	address)	Room	n/suite	E Telepi	hone number	
1	Initial retur	n	PO Box 40								919-362-5416	
	Final return	/terminated	City or town, state	or province, co	ountry, and ZIP	or foreign post	al code					
	Amended	return	New Hill, NC 275	62						G Gross	receipts \$	559,191
	Application	pending	F Name and address	of principal off	ficer: Robert	Grau			H(a) Is this a gro	oup return fo	or subordinates? Y	es 🗸 No
			PO Box 40, New	Hill, NC 2756	52				H(b) Are all su	ubordinat	tes included? TY	es No
ī	Tax-exemp	ot status:	√ 501(c)(3)	501(c) () (ins	ert no.) 494	7(a)(1) or 527	,	If "No," attach a			
J	Website:	Triangle1	rain.com						H(c) Group ex			
K	Form of org	ganization: 🗸	Corporation Tru	st Associa	ation Other		L Year of for	mation	1983	M State	of legal domicile:	NC
P	art I	Summa	ry									(
	1 E	Briefly des	cribe the organiz	ation's miss	ion or most	significant a	ctivities: Opera	ates a	historical e	ducatio	nal museum an	d
ø	_!	provides ri	des on antique ra	ilroad equipr	ment							
Activities & Governance												
ern			<u></u>									
OV			box I if the org							5% of it	s net assets.	
8			voting members							3	/	9
es	4 N	lumber of	independent vot	ing member	rs of the gov	erning body	(Part VI, line 1	(b) .		4		9
Ϋ́	5 T	otal numb	er of individuals	employed in	n calendar y	ear 2024 (Pa	art V, line 2a)			5		0
cti	6 T	otal numb	er of volunteers	(estimate if	necessary)					6		150
A			ated business re							7a		0
			ed business taxa							7b		0
							,		Prior Year		Current Y	
0	8 0	Contributio	ns and grants (P	art VIII, line	1h)					62,513		42,715
Revenue	9 F	rogram se	ervice revenue (P	art VIII, line	2g)				2	86,063		280,242
eve	10 li	nvestment	income (Part VII	I, column (A), lines 3, 4,	and 7d) .				104		206,054
<u>a</u>	11 (ther reve	nue (Part VIII, col	lumn (A), line	es 5, 6d, 8c,	9c, 10c, and	d 11e)			10,242		11,110
			ue-add lines 8 t						3	58,922		540,121
	13	Grants and	similar amounts	imilar amounts paid (Part IX, column (A), lines 1-3)								0
	1		id to or for mem							0		0
S	45 0		her compensation		,					0		0
Expenses	16a F		al fundraising fee				, ,.	_		0		0
per	b T		aising expenses			25)	0		17 C	2000000	Bergard Bare	
ш	17 0		nses (Part IX, co						2	61,746		330,309
			nses. Add lines 1) line 25)			61,746		330,309
			ss expenses. Su							-2,824		209,812
or es	3		от от рот от от		0 110111 11110			Bea	inning of Curr	-	End of Ye	
ets	20 T	otal asset	s (Part X, line 16))						64,281		573,574
Ass Ba	21 T		ties (Part X, line 2							0		0
Net Assets or Fund Balances	22 N		or fund balances	*	ine 21 from	line 20			3	64,281		573,574
P	art II		re Block							04,201	9	373,374
	The second second	es of perjury,	I declare that I have	examined this	return, including	g accompanying	schedules and st	tateme	nts, and to the	e best of	mv knowledge and	belief, it is
tru	e, correct, a	and complete	e. Declaration of prepare	arer (other than	officer) is base	d on all informa	tion of which prepared	arer ha	s any knowled	lge.		
		Kalker	tymu							6-3	-25	
Sig	gn	Signature	of officer			:			Dat	е		
	ere	Robert G	rau, Treasurer									
			int name and title									
_	: -1	Preparer's	name		Preparer's sig	nature		Date		Check	if PTIN	
Pa										self-emp	L "	
	eparer	Firm's nan	ne.						Firm's			
Us	e Only	Firm's add							Phone			
Ma	y the IRS		his return with th	e preparer	shown abov	e? See instr	uctions		FIIOTE	. 110.	. Yes	No
	-											

Page **2**

Part			s Part III	
1	Briefly describe the organization's mis-	sion: Operates a historical educational	museum and provides rides on antique	railroad
	equipment			
2	Did the organization undertake any sig prior Form 990 or 990-EZ?			Yes ☑ No
	If "Yes," describe these new services of			
3				Yes ☑ No
	If "Yes," describe these changes on So			
4	Describe the organization's program s expenses. Section 501(c)(3) and 501(c the total expenses, and revenue, if any	c)(4) organizations are required to rep	port the amount of grants and allocat	
4a	(Code:) (Expenses \$	189,375 including grants of \$	0) (Revenue \$	280,242)
	Repair of railroad track, repair of diesel			
	visitors, insurance We attracted 16,954 v	doltoro		
4b) (Revenue \$	0)
	Continued rebuild process on antique s	team locomotives		
4c	(Code:) (Expenses \$	12,200 including grants of \$	0) (Revenue \$	0)
	Rebuild / refurbish 1884 freight depot			'
4d	Other program services (Describe on S			
	(Expenses \$ 0 including		ue \$ 0)	
40	Total program service expenses	330 300		

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

Part	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		~
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		/
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		>
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		'
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? If "Yes," complete Schedule L, Part I	25b		>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		>
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		V
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		~
c b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV </i>	28b 28c		\(\times \)
29 30	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30		V
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31		<i>V</i>
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>	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		~
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		V
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>	37		~
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	~	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			Na
1a b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		,
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		_
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		V
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		~
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		~
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b				
12a	against amounts due or received from them.)	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note: See the instructions for additional information the organization must report on Schedule O.	100		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		~
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Form 990 (2024) Page **6**

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management Yes No **1a** Enter the number of voting members of the governing body at the end of the tax year. . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 1 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? 7a 1 Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 1 8a 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No **10a** Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on 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* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 1 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 14 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? The organization's CEO, Executive Director, or top management official 15a 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a 16a 1 b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NC Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Own website ☐ Another's website Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records. 20 Cynthia Grau, (919)624-2369

Part VI

Form 990 (2024) Page -

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

		1 0.9	ui iiz			ompe	1136	Tod arry current	officer, director,	or trustee.
					C) sition					
(A)	(B)	(do n	ot ch			e than o	one	(D)	(E)	(F)
Name and title	Average hours	box, unless person is both an officer and a director/trustee)			n an	Reportable compensation from the	Reportable compensation	Estimated amount of other		
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
Chris Tilley	6.00									
President		~		~				0	0	С
John Morck	2.00									
Vice-President	0.00	~		~				0	0	С
Jim Jatko	7.00									
Board member	0.00	1						0	0	С
Tim Carroll	6.00									
Board member		~						0	0	С
Kevin Edwards	4.00									
Board member	0.00	~						0	0	С
Art Kotz	2.00									
Board member	0.00	~						0	0	С
Dennis Winchell	4.00									
Board member		~						0	0	С
Nate DeWitt	2.00									
Board member		~						0	0	С
Kyle Obermiller	2.00									
Board member	0.00	1						0	0	С
Cynthia Grau	8.00									
Secretary	0.00			~				0	0	С
Robert Grau	10.00									
Treasurer	0.00			~				0	0	С

Part	VII Section A. Officers, Directors, 7	Trustees,	Key I	Em	plo	yee	s, an	d F	lighest Compe	nsated E	mplo	yees (continued)
	(A) Name and title	(B) Average hours per week	Position (do not check more the box, unless person is officer and a director/					n an	(D) Reportable compensation from the	(E) Reportable compensatior from related		(F) Estimated amount of other compensation
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizatior 1099-M 1099-N	s (W-2/ SC/	from the organization and related organizations
			-									
			-									
1b c	Subtotal	 VII Sectio	 .n Δ						0		0	0
d 2	Takal (add the call to add 4 a)	but not				thos	e list	ted	above) who re	eceived n	0 nore t	0 han \$100,000 of
3	Did the organization list any former of employee on line 1a? <i>If</i> "Yes," <i>complete</i> s								loyee, or highes	-		Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of re	portal	ble	con	npe	nsatio	n a	ınd other compe	nsation fro	om the	
5	Did any person listed on line 1a receive of for services rendered to the organization											
Secti	on B. Independent Contractors	: 11 103, 0	Joinpi	CiC	001	icai	110 0 1	0, 0	such person .		<u> </u>	5 🗸
1	Complete this table for your five high compensation from the organization. Repo											
	(A) Name and business add	Iress							(B) Description of serv	vices		(C) Compensation
None												
2	Total number of independent contractor received more than \$100,000 of compens						ed to	th	nose listed abov	e) who		

Part VIII Statement of Revenue

		Check if Schedule O conta	ains a respo	onse or note to a	ny line in this Pa	art VIII		🗆
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts, ts	1a	Federated campaigns	1	a 0				
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues	1b	5,688				
Ω, M	С	Fundraising events	10	0				
ifts ır A	d	Related organizations	10	0 E				
ું હાં	е	Government grants (contrib		e 0				
Sir	f	All other contributions, gifts,						
utic Ter		and similar amounts not include		f 37,027				
를 돌	g	Noncash contributions inclu						
ont		lines 1a–1f		g \$ 0				
O a	h	Total. Add lines 1a-1f			42,715			
o)	_			Business Code				
Program Service Revenue	2a	Ride income		712110	280,242	280,242	0	0
er ue	b							
n S /en	C							
gram Ser Revenue	d							
rog I	e	All albay and average a series we						
Ф	f g	All other program service re Total. Add lines 2a–2f			280,242		0	0
	3	Investment income (includ	ina dividen		200,242			
					122	122	0	0
	4	Income from investment of t	ax-exempt l	bond proceeds	0	0	0	0
	5	Royalties			0	0	0	0
		7	(i) Real	(ii) Personal		_	-	_
	6a	Gross rents 6a		0 0	-			
	b	Less: rental expenses 6b		0 0				
	С	Rental income or (loss) 6c		0 0				
	d	Net rental income or (loss)			0	0	0	0
	7a	Gross amount from	(i) Securities	(ii) Other				
		sales of assets		0 209.898				
		other than inventory 7a		0 209,898	_			
ne	b	Less: cost or other basis						
'en		and sales expenses . 7b		0 3,966	_			
Revenue		Gain or (loss) 7c		0 205,932				
		= : :			205,932	205,932	0	0
Other	8a	Gross income from fund	raising					
•		events (not including \$	0					
		of contributions reported of 1c). See Part IV, line 18 .	8					
	h	Less: direct expenses			4			
		Net income or (loss) from fu		_	0		0	0
		Gross income from g		vento	0		0	0
		activities. See Part IV, line 1		a 0				
	b	Less: direct expenses			-			
		Net income or (loss) from ga			0	0	0	0
		Gross sales of inventory						
		returns and allowances .	10	a 26,214				
		Less: cost of goods sold .		b 15,104				
	С	Net income or (loss) from sa	ales of inver	ntory	11,110	11,110	0	0
ns				Business Code				
eo ne	11a							
Miscellaneous Revenue	b							
sce 3ev	C	Λ II _ + Ib _ u u · · · · · · · · ·						
Mis	d				_			
_	е 12	Total. Add lines 11a-11d . Total revenue. See instruct			540.121		0	0
	14	i otal revellue, occ mstruci			1 540.171	497.406	i ()	i ()

Part IX Statement of Functional Expenses

fection 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).	
Check if Schedule O contains a response or note to any line in this Part IX	ī

	t include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		·	goneral expenses	олроносс
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign	0	0		
Ū	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0	0	0	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)	0	0	0	0
7	Other salaries and wages	0	0	0	0
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	0	0	0	0
11	Fees for services (nonemployees):				•
a b	Management	0	0	0	0
C	Accounting	0	0	0	0
d	Lobbying	0	0	0	0
е	Professional fundraising services. See Part IV, line 17	0	-	-	0
f	Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)				
10	- 1	0	0	0	0
12 13	Advertising and promotion	17,287 100	17,287 100	0	0
14	Information technology	0	0	0	0
15	Royalties	0	0	0	0
16	Occupancy	21,601	21,601	0	0
17	Travel	0	0	0	0
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	0	0	0	0
20	Interest	0	0	0	0
21 22	Payments to affiliates	1 272	1 272	0	0
23	Insurance	1,372 20,550	1,372 20,550	0	0
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)	20,530	20,550	v	<u> </u>
_		444 (00	444 (00		
a b	Maintenance of track/cars/engines/etc. Rebuild historic steam locomotives	111,682	111,682	0	0
C	Rebuild/refurbish historic 1884 freight depot	128,734 12,200	128,734 12,200	0	0
d		12,200	12,200		
е	All other expenses	16,783	16,783	0	0
25	Total functional expenses. Add lines 1 through 24e	330,309	330,309	0	0
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 if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	rt X		📙
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	146,603	1	161,977
	2	Savings and temporary cash investments	123,414	2	315,279
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0
S	7	Notes and loans receivable, net	0	7	0
Assets	8	Inventories for sale or use	5,427	8	8,000
As	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 168,429			
	b	Less: accumulated depreciation 10b 87,081	81,348	10c	81,348
	11	Investments—publicly traded securities	7,489		6,970
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments – program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 33)	364,281	16	573,574
	17	Accounts payable and accrued expenses	0	17	0
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
S	22	Loans and other payables to any current or former officer, director,			
itie		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons	0	22	0
Lia	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	0	25	0
	26	Total liabilities. Add lines 17 through 25	0	26	0
S		Organizations that follow FASB ASC 958, check here 🗸			
nce		and complete lines 27, 28, 32, and 33.			
alaı	27	Net assets without donor restrictions	364,281	27	573,574
B	28	Net assets with donor restrictions	0	28	0
pur		Organizations that do not follow FASB ASC 958, check here			
F		and complete lines 29 through 33.			
o	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
\ss	31	Retained earnings, endowment, accumulated income, or other funds .		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	364,281	32	573,574
ž	33	Total liabilities and net assets/fund balances	364,281	33	573,574
					Farm QQQ (2024)

Form 990 (2024) Page **12**

Part	XI Reconciliation of Net Assets		-	
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)		540	0,121
2	Total expenses (must equal Part IX, column (A), line 25)		33	0,309
3	Revenue less expenses. Subtract line 2 from line 1		20	9,812
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4		36	4,281
5	Net unrealized gains (losses) on investments			-519
6	Donated services and use of facilities			0
7	Investment expenses			0
8	Prior period adjustments			0
9	Other changes in net assets or fund balances (explain on Schedule O)			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))		57:	3,574
Part	XII Financial Statements and Reporting			_
	Check if Schedule O contains a response or note to any line in this Part XII			Ц
			Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🗌 Accrual 🔲 Other If the organization changed its method of accounting from a prior year or checked "Other," explain on			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		~
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both.			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		~
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
	separate basis, consolidated basis, or both.			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
С	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? .	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on			
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.	3b		

Form **990** (2024)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

Employer identification number Name of the organization NORTH CAROLINA RAILWAY MUSEUM INC 56-6073399 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 331/8% 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 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III е functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (v) Amount of monetary (i) Name of supported organization (iii) Type of organization (iv) Is the organization (vi) Amount of listed in your governing (described on lines 1-10 support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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) 2020 **(b)** 2021 (c) 2022 (d) 2023 (e) 2024 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . 91,308 37,268 84,121 62.513 42.715 317,925 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 0 0 0 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge 0 0 0 0 0 0 Total. Add lines 1 through 3 37,268 91,308 84,121 62,513 42,715 317,925 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) 35,425 **Public support.** Subtract line 5 from line 4 282,500 Section B. Total Support (c) 2022 Calendar year (or fiscal year beginning in) (a) 2020 **(b)** 2021 (d) 2023 (e) 2024 (f) Total 7 Amounts from line 4 37,268 91,308 84,121 62,513 42,715 317,925 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 75 81 86 104 122 468 9 Net income from unrelated business activities, whether or not the business is regularly carried on 0 0 0 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 4,551 13,928 6,249 46,080 10,242 11,110 Total support. Add lines 7 through 10 11 364,473 Gross receipts from related activities, etc. (see instructions) 12 12 286,063 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) 77.51 % 14 14 Public support percentage from 2023 Schedule A, Part II, line 14 15 15 16a 331/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this ~ 331/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here**. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

	If the organization fails to qualify	unaer the te	ests listed bel	ow, piease co	omplete Part	11.)	
	on A. Public Support			1		1	
	dar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise						
2	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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
C1:	line 6.)						
	on B. Total Support	() 0000	(1) 0004	() 0000	/ IN 2000	() 000 ((0 T
	dar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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						
L	•						
D	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
•							
_							
11	Net income from unrelated business activities not included on line 10b, whether						
	or not the business is regularly carried on						
10	· ·		+				
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
.5	and 12.)						
14	First 5 years. If the Form 990 is for the	organization'	s first, second	L. d. third. fourth	or fifth tax ve	L Par as a sectio	n 501(c)(3)
	organization, check this box and stop he	•			-		
Secti	on C. Computation of Public Suppor					<u> </u>	<u> </u>
15	Public support percentage for 2024 (line 8		<u> </u>	13. column (fl)		15	%
16	Public support percentage from 2023 Scl		•				
	on D. Computation of Investment In					1.0	70
17	Investment income percentage for 2024 (by line 13, colu	ımn (fl)	17	%
18	Investment income percentage from 2027 (-			<u>%</u>
19a	331/3% support tests—2024. If the organ						
.ou	17 is not more than 331/3%, check this box						
b	331/3% support tests—2023. If the organiz	_	-	-		-	_
~	line 18 is not more than 33 ¹ / ₃ %, check this						
20	Private foundation. If the organization di	_	_	-			_

Schedule A (Form 990) 2024 Page **4**

Part IV Supporting Organizations

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

Section A. All Supporting Organiz	ations
-----------------------------------	--------

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

Schedule A (Form 990) 2024 Page 5 Part IV Supporting Organizations (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? 11 A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations Yes No Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). ☐ The organization satisfied the Activities Test. Complete **line 2** below. The organization is the parent of each of its supported organizations. *Complete line 3 below.* ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions). С Activities Test. Answer lines 2a and 2b below. 2 Yes No a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b Parent of Supported Organizations. Answer lines 3a and 3b below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI. За

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

3b

Schedule A (Form 990) 2024 Page **6**

Pari	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ıan ⁱ	izations	1 490
1	☐ Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	tru:	st on Nov. 20, 1970 (exp.	
Sect	ion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	allv i	integrated Type III suppo	rting organization

(see instructions).

Schedule A (Form 990) 2024 Page **7**

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 Distributable amount for 2024 from Section C. line 6 9 Line 8 amount divided by line 9 amount 10 10 (ii) (iii) (i) Section E-Distribution Allocations (see instructions) **Underdistributions** Distributable **Excess Distributions** Pre-2024 Amount for 2024 Distributable amount for 2024 from Section C, line 6 2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2024 a From 2019 From 2020 **c** From 2021 **d** From 2022 From 2023 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2024 distributable amount Carryover from 2019 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2024 from Section D, line 7: Applied to underdistributions of prior years Applied to 2024 distributable amount Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2025. Add lines 3 and 4c. Breakdown of line 7: Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . . Excess from 2023 . . . Excess from 2024 . . .

Schedule A (Form 990) 2024 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) Schedule A, Part II, Line 10 - Gift shop sales after paying for goods sold

SCHEDULE D (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name o	of the organization		Employer identification number
NORT	H CAROLINA RAILWAY MUSEUM INC		56-6073399
Par	t I Organizations Maintaining Donor Advi	sed Funds or Other Similar Fund	s or Accounts
	Complete if the organization answered "		
	Complete if the organization answered		(In) Francisco and otherwise constraints
_		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor a	dvisors in writing that the assets held	in donor advised
	funds are the organization's property, subject to the	organization's exclusive legal control	? · · · · · □ Yes □ No
6	Did the organization inform all grantees, donors, an		
	only for charitable purposes and not for the benefit		
	conferring impermissible private benefit?		
Danie			
Par			
	Complete if the organization answered "		
1	Purpose(s) of conservation easements held by the o		
	Preservation of land for public use (for example, recre	ation or education) $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	f a historically important land area
	☐ Protection of natural habitat	☐ Preservation or	f a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contribution	in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а			_
_	Total acreage restricted by conservation easements		
b			. 20 . 2c
c d	Number of conservation easements on a certified hi Number of conservation easements included on line		
u	on a historic structure listed in the National Register		
_	-		2d
3	Number of conservation easements modified, tran		
4	Number of states where property subject to conserve		
5	Does the organization have a written policy rega		_
	violations, and enforcement of the conservation eas		
6	Staff and volunteer hours devoted to monitoring,	inspecting, handling of violations, ar	nd enforcing
	conservation easements during the year		
7	Amount of expenses incurred in monitoring, in	specting, handling of violations, ar	nd enforcing
	conservation easements during the year		\$
8	Does each conservation easement reported on line	2d above satisfy the requirements of s	ection 170(h)(4)(B)
	(i) and section 170(h)(4)(B)(ii)?		· · · · · · · Tyes I No
9	In Part XIII, describe how the organization reports of		
	sheet, and include, if applicable, the text of the foot		
	organization's accounting for conservation easemen	nts.	
Part	Organizations Maintaining Collections	of Art Historical Treasures or (Other Similar Assets
	Complete if the organization answered "		Stror Girmar Accord
4.	If the organization elected, as permitted under FAS	· · · · · · · · · · · · · · · · · · ·	a statement and balance about works
ıa	of art, historical treasures, or other similar assets		
	service, provide in Part XIII the text of the footnote t		
	, ,		
b	If the organization elected, as permitted under FAS		
	art, historical treasures, or other similar assets held		earch in furtherance of public service,
	provide the following amounts relating to these item		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art,	historical treasures, or other similar	assets for financial gain, provide the
	following amounts required to be reported under FA	SB ASC 958 relating to these items.	
а	Revenue included on Form 990, Part VIII, line 1 .		\$
	Assets included in Form 990, Part X		\$

Schedu	ıle D (Form 990) (Rev. 12-2024)							Page 2
Par	t III Organizations Maintaining	Collect	ons of Art, His	torical Treasu	es, or O	ther Similar As	ssets (co	ontinued)
3	Using the organization's acquisition, collection items (check all that apply)		, and other reco	rds, check any o	f the follo	wing that make s	significan	t use of its
а	☐ Public exhibition		d	Loan or excha	ange prog	ıram		
b	Scholarly research		e					
C	☐ Preservation for future generation	S						
4	Provide a description of the organiza		ections and expl	ain how they furt	her the or	ganization's exe	mpt purp	ose in Part
5	During the year, did the organization assets to be sold to raise funds rathe	solicit or er than to b	receive donations be maintained as	s of art, historical part of the organi	treasures zation's c	s, or other similar ollection?	□ Yes	₃ □ No
Par	t IV Escrow and Custodial Arr	angemer	nts					
	Complete if the organization 990, Part X, line 21.	n answere	ed "Yes" on For	m 990, Part IV,	line 9, or	reported an ar	mount or	า Form
1a	Is the organization an agent, trustee included on Form 990, Part X?							. □ No
b	If "Yes," explain the arrangement in F	Part XIII an	d complete the fo	ollowing table.				
			•	· ·		Д	mount	
С	Beginning balance				. 1	С		
d	Additions during the year				. 10	d		
е	Distributions during the year					е		
f	Ending balance					f		
2a	Did the organization include an amou					al account liability	y? □ Y €	es 🗌 No
b	If "Yes," explain the arrangement in F							
Par	t V Endowment Funds							
	Complete if the organization	n answer	ed "Yes" on For	m 990, Part IV,	line 10.			
		(a) Curre	nt year (b) Pr	or year (c) Two	years back	(d) Three years bac	k (e) Fou	r years back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains,							
	and losses							
d	Grants or scholarships							
е	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of	the curren	t year end baland	ce (line 1g, colum	n (a)) held	as:		
а	Board designated or quasi-endowme		•	, 3,	(//			
b	Permanent endowment	%						
С	Term endowment %							
	The percentages on lines 2a, 2b, and	2c should	l egual 100%.					
3a	Are there endowment funds not in the			zation that are he	eld and a	dministered for th	ne	
	organization by:	·	•					Yes No
	(i) Unrelated organizations?						3a(i)	
	(ii) Related organizations?						3a(ii)	
b	If "Yes" on line 3a(ii), are the related of						3b	
4	Describe in Part XIII the intended use	•	•					
Par			<u> </u>					
	Complete if the organization	-	ed "Yes" on For	m 990, Part IV,	line 11a.	See Form 990	Part X,	line 10.
-	Description of property		Cost or other basis	(b) Cost or other ba		Accumulated		ok value
	,		(investment)	(other)	, ,	depreciation		
1a	Land		79,976		0			79,976
b	Buildings		0		0	0		0
C	Leasehold improvements	. \vdash	0		0	0		0
d	Equipment		88,453		0	87,081		1,372
e	Other		0		0	0		0
	. Add lines 1a through 1e. (Column (d)		<u>~</u>		_			81,348

Part VII	Investments – Other Securities			D 11/1 10
	Complete if the organization answered "Yes" on Form 990, Part	1		·
	(a) Description of security or category (including name of security)	(b) Book value		ethod of valuation: nd-of-year market value
(1) Financial	derivatives			
	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)	mn (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII	Investments—Program Related			
r are viii	Complete if the organization answered "Yes" on Form 990, Part	IV. line 11c. See F	orm 990.	Part X. line 13.
	(a) Description of investment	(b) Book value		ethod of valuation:
	(7)	(,,		nd-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	(h) march annual Farma 000 Part V line 40 and (D))			
Part IX	mn (b) must equal Form 990, Part X, line 13, col. (B))			
Partix	Complete if the organization answered "Yes" on Form 990, Part	IV line 11d See I	Form 000	Part Y line 15
	(a) Description	iv, iiile i id. dee i	01111 330	(b) Book value
(1)	(a) Decemperation			(b) Book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, line 15, col. (B))			
Part X	Other Liabilities			200 5
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 11e or 11t	. See For	m 990, Part X,
1.	line 25.			(In) Dealership
-	(a) Description of liability			(b) Book value
(1) Federal in	сотте тахеѕ			
(2)				
(3)				
(4)				
(5) (6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, line 25, col. (B))			
	uncertain tax positions. In Part XIII, provide the text of the footnote to the organ	nization's financial st	atements th	at reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .

Schedu	le D (Form 990) (Rev. 12-2024)				Page 4
Part	XI Reconciliation of Revenue per Audited Financial Stateme	ents \	With Revenue per	Retu	rn
	Complete if the organization answered "Yes" on Form 990,	Part I	V, line 12a.		
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)				
С	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	
Part				er Re	turn
	Complete if the organization answered "Yes" on Form 990,				
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)				
C	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin			5	
Part	XIII Supplemental Information				
Provid	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	; Part	V, line 4; Part X, line
2; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to pro	vide any additional in	nforma	ıtion.
					,

SCHEDULE 0 (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization	Employer identification number
NORTH CAROLINA RAILWAY MUSEUM INC	56-6073399
	30-00/33//
Form 990, Part VI, Section A, Line 2 - Officers Treasurer and Secretary are married	
Form 990, Part VI, Section A, Line 6 - We have members	
Form 990, Part VI, Section A, Line 7a - Museum has members who elect board of directors	
Form 990, Part VI, Section A, Line 7b - Members must vote on By-Law changes and they elect board me	ambore
Form 790, Fart VI, Section A, Line 7b - Members must vote on by-Law changes and they elect board in	amber 5
Form 990, Part VI, Section B, Line 11b - 990 form is given to each board member as well as discussed of	luring a monthly board meeting
Farm 200 Dest VII Cooking Delice 40 - Mark delible cooking to be described as a second discount	a also as a Barrara construction of the construction
Form 990, Part VI, Section B, Line 12c - Most visible way is having a general discussion describing who	it the policy means and then having
each officer/board member fill out a form stating their agreement with the policy	
Form 000 Dott VI Section C. Line 10. Almost every decument is available on the museumle website.	or those and all others they are
Form 990, Part VI, Section C, Line 19 - Almost every document is available on the museum's website. F	or those and all others they are
available to anyone via letter requesting the documents	

Schedule O, Statement 1

NORTH CAROLINA RAILWAY MUSEUM INC

Form: **Form 990 (2024)**Page: **1**Header Section

Reasonable Cause Explanations

Explanation

Extension filed and accepted