



Marbles Kids Museum

THE FUTURE OF PLAY

Response to Wake County RFP #20-003
Hospitality Tax Small Capital Projects Funding
January 26, 2023 | 3:00pm Eastern Time
Contact: Jonathan Frederick, CEO
jfrederick@marbleskidsmuseum.org | 919.951.5226





January 26, 2023

TO: Melissa England
Wake County Finance - Procurement Services
Wake County Justice Center – 2nd FL, Ste 2900
301 S. McDowell Street
Raleigh, NC 27601

RE: Letter of Transmittal

On behalf of the staff, Board of Directors and community partners of Marbles Kids Museum, I submit herewith a proposal for support of *Future of Play*, a renovation project that will bring added capacity and improved experiences to Marbles to enhance quality of life for residents and attract visitors to Wake County.

Marbles Kids Museum requests Hospitality Tax Small Capital Projects Funding of \$2,763,000 toward a total estimated project cost of \$6,140,000. We anticipate completing the renovation project in June 2025.

Thank you for your consideration of our proposal.

Sincerely,

Jonathan Frederick, CEO
Marbles Kids Museum

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1.0 | EXECUTIVE SUMMARY

Proposed Project. Marbles Kids Museum requests \$2,763,000 from the Wake County Hospitality Tax Small Capital Projects Funding to support *Future of Play*, an impactful renovation project that will attract more visitors to Wake County and raise Marbles’ stature as a world-class children’s museum. This renovation project will result in a cutting-edge exhibit, an inspirational rooftop courtyard and a colorful building façade that will increase Marbles’ visitation, add to downtown Raleigh’s vibrancy and directly align with the Wake County Room Occupancy and Prepared Food and Beverage Operating Principles.

Marbles draws thousands of people to downtown Raleigh each week. We project that we will serve 462,000 visitors on our campus in Fiscal Year 2023 – an increase of 42% compared with the previous fiscal year. Local population growth projections coupled with rising demand for Marbles’ award-winning offerings in a post-pandemic world suggest continued visitation growth in the years ahead. To address increasing capacity challenges, meet community demand and plan for a bright future, Marbles established several strategic priorities for a near-term renovation to the museum building. The exciting result, *Future of Play*, will bring a new, one-of-a-kind exhibit (“*FuturOpolis*”) to the 1st floor of the museum that will celebrate the robust and evolving career opportunities in Wake County and expand Marbles’ public-facing floorspace to welcome more visitors. The renovation will also result in improved visitor flow, colorful design along Marbles’ Blount Street façade and new indoor and outdoor spaces for community programs and events. *Future of Play* will enhance the quality of life for Wake County residents while simultaneously elevating the reputation of Wake County as a great place for families to move or visit.

Project Team. Marbles will work closely with our building owners, Wake County Facilities Design & Construction, to execute all aspects of our *Future of Play* renovation, in partnership with specialty engineers and construction partners. A select, experienced group of Marbles board members and executive staff working alongside Wake County staff will oversee the project, coordinating design and construction professionals to implement a plan that excites and inspires visitors while meeting the designated timeline and budget and complying with local building and historic codes. Marbles will prioritize community engagement and input to identify community needs and interest and build excitement for the project from start to finish.

Cost Estimate Summary

| | |
|---------------------------------------|--------------------|
| Construction Costs | \$3,249,000 |
| Design, Planning & Contingency | \$1,391,000 |
| Exhibit Development & Installation | \$1,500,000 |
| TOTAL ANTICIPATED PROJECT COST | \$6,140,000 |

Uniqueness and Superiority. *Future of Play* prioritizes a prominent new exhibit, creative indoor and outdoor spaces and playful design to deliver iconic experiences that draw visitors from out of town while enhancing quality of life for local families and newcomers. A survey of the children’s museum field indicates that Marbles’ planned *FuturOpolis* exhibit will be unlike anything across the country. This buzz-worthy career exploration exhibit, coupled with a colorful new façade and a vibrant rooftop space, will increase attention to our downtown district, improve the Marbles visitor experience and boost our region’s appeal as a destination for families.

Primary Engagement Contact:

Jonathan Frederick, CEO | 919.951.5226 (p) | 919.834.3516 (f) | jfrederick@marbleskidsmuseum.org

2.0 | SCOPE OF PROJECT

Marbles Kids Museum is a **top draw for out-of-town visitors, a positive force for economic development** and a **community anchor** for local kids and families. Marbles requests capital investment for our *Future of Play* renovation project, which will advance the enriching and playful mission that makes Marbles one of the most popular family destinations in North Carolina and a leading children’s museum in the nation.

Overall Project Proposal, Project Renderings, Scaled Floor Plans

Marbles is a private 501(c)(3) nonprofit founded in 2007 through a merger between two predecessor museums. The Marbles campus at 201 E. Hargett Street in downtown Raleigh is comprised of three buildings:

- 1) Museum Building (83,000sf); constructed in 1999
- 2) IMAX Theater and Cafe Building (28,000sf); constructed in 2001
- 3) Play Annex: former school building purchased by Marbles in 2017 (16,000sf); constructed in 1950

Wake County owns the museum and theater buildings, which Marbles operates under a long-term lease. The Play Annex is wholly owned and operated by Marbles.

Marbles’ *Future of Play* renovation project will focus on enclosing an underutilized area within the footprint of the main museum building – a 3,200 square foot outdoor courtyard along Blount Street that currently serves as a musical garden. By enclosing that courtyard and creating a 2-story addition, Marbles will **add much-needed indoor exhibit space** on the 1st floor while also creating a 2nd floor outdoor courtyard above that exhibit space. Elements of the musical garden can be relocated to the 2nd floor rooftop courtyard where families will enjoy the benefits of outdoor play and connection. These upgrades also establish new indoor and outdoor multipurpose spaces which will serve as unique venues for community and corporate events, meetings and programs. The *Future of Play* renovation repurposes and activates a prominent area on the Marbles campus, increases Marbles’ capacity to meet demand and aligns with the Hospitality Tax Objectives. Below are graphics, project renderings and scaled floor plans that depict the scope of the building renovation.



THE FUTURE OF PLAY RENOVATION WILL CONVERT AN OUTDOOR COURTYARD INTO AN EXCITING 2-STORY EXHIBIT, PROGRAM AND EVENT SPACE.

[Aerial Image of Marbles' Campus at 201 E. Hargett Street in Downtown Raleigh](#)



Rendering of Proposed Renovation and Related Objectives

Improved Access
Added stairs, restroom and connectivity between exhibits improve visitor flow and experience.

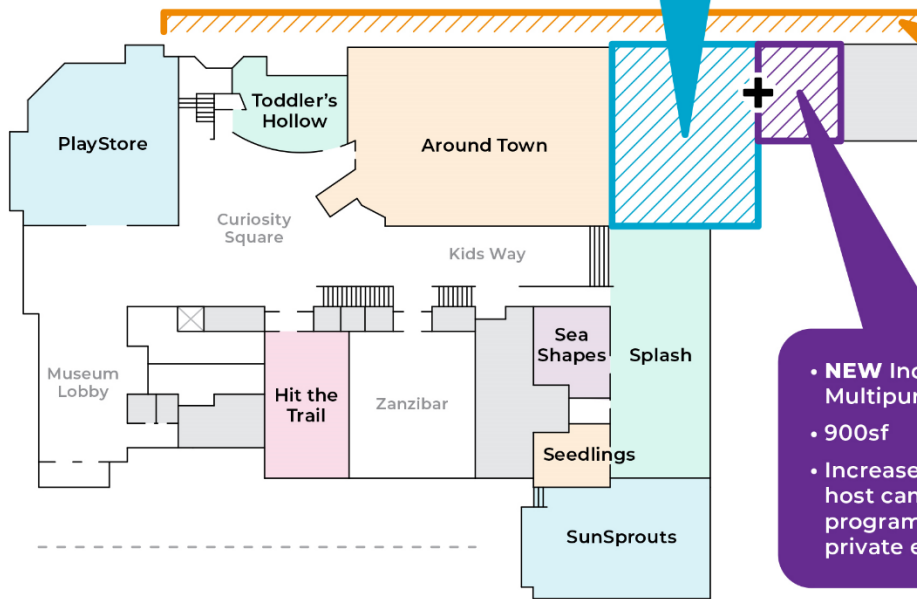
Increased Outdoor Space
For family play & connection and as unique event venue.

Brand-New Indoor Exhibit Space
One-of-a-kind FuturOpolis exhibit features future workforce play and exploration.

Blount Street Beautification
Bursts of color and pops of play add vibrancy to building and surrounding neighborhood.

Museum Building Floor Plans Post-Renovation (1st and 2nd Floor)

FLOOR PLAN
First Floor

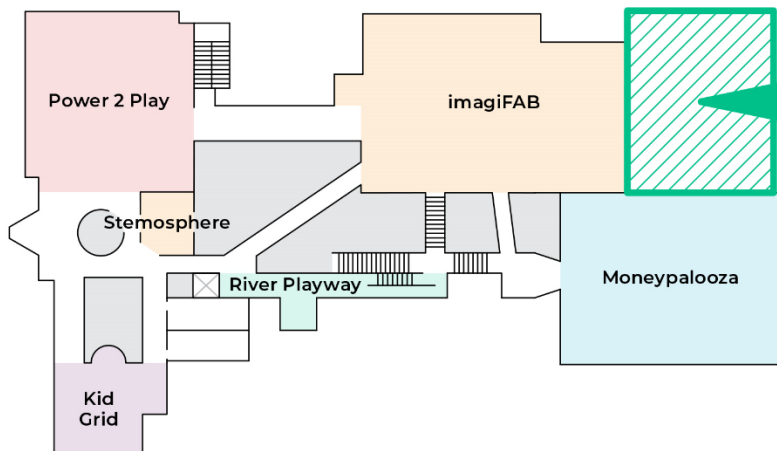


- **NEW** Buzz-Worthy Indoor Exhibit Space
- *FuturOpolis*
- 3,000sf
- Immersive, one-of-a-kind futuristic city, where kids role play as the workforce of the future.
- Large, dramatic play that is highly-visible from inside and outside the building.

- Exterior improvements along the Blount Street facade communicate Marbles' brand through color, art and opportunities for play.

- **NEW** Indoor Multipurpose Space
- 900sf
- Increase capacity to host camps, access programs and private events.

FLOOR PLAN
Second Floor



- **NEW** Rooftop Courtyard
- 3,200sf
- Imaginative, colorful courtyard serves as added greenspace for daily family play and unique venue for weddings, community gatherings and corporate events.

Future of Play provides extensive improvements to the museum building by leveraging findings from a comprehensive Master Planning process that Marbles undertook from 2016-2020 in partnership with Wake County. The process included extensive stakeholder engagement and expert analysis and resulted in **critical community priorities for future growth**, including:

- 1) Add More Play-Based Learning Environments and Exhibits
- 2) Add Space for Daily Visitation, Special Events, Group Visits and Community Programs
- 3) Reimagine Our Exterior
- 4) Improve Visitor Flow

These growth priorities have become even more important as Marbles and our community continue to recover from the pandemic. Major project elements and corresponding community growth priorities are outlined below.

Growth Priority #1: Add More Play-Based Learning Environments and Exhibits

Purposeful play is what Marbles does best, and families desire more of the hands-on, innovative learning environments synonymous with Marbles. The 1st floor of the renovation will feature **FuturOpolis**, a brand-new, permanent 3,000sf exhibit that immerses kids in exciting career paths through purposeful play. *FuturOpolis* will be a one-of-a-kind futuristic city, where kids role play as the workforce of the future – constructing smart buildings, manufacturing cutting-edge products and engineering future forms of transportation. *FuturOpolis* runs along Blount Street – Marbles’ most expansive façade. The exhibit, unlike anything else in the country, will feature large, dramatic play that is highly visible from inside and outside the building, highlighting the vibrancy of Marbles, driving attendance, boosting recognition and showcasing Wake County’s commitment to workforce development and enriching experiences for all children. Putting a spotlight on **playful futuristic solutions and careers** also highlights our region’s reputation for innovation and our desire to create a bright future for both people and our planet.



**INSPIRATION
IMAGES
ONLY.
FUTUROPOLIS
WILL BE
ONE-OF-A-
KIND.**

Growth Priority #2: Add Space for Daily Visitation, Special Events, Group Visits and Community Programs

Marbles regularly is forced to place caps on daily museum visitation, summer camp enrollment, family event attendance and facility rentals due to a lack of space. While these capacity limits allow Marbles to provide a better visitor experience, they severely limit our reach and impact. By expanding public-facing space, Marbles will be able to **increase our visitor capacity by 15%** in the first year following the renovation, drawing more people to Wake County and driving meal and room spending and hospitality tax dollars. The *Future of Play* renovation will add much-needed space, both indoors and outdoors, as follows:

- 3,000sf of indoor exhibit space on the 1st floor (*FuturOpolis*, described above).
- 3,200sf rooftop courtyard on the 2nd floor that will do double duty as: 1) a whimsical, colorful outdoor space for family play and connection and 2) a unique venue for weddings, parties, corporate events and other community gatherings.
- 900sf of indoor education/flex space will serve a variety of purposes from hosting camps and community access programs to corporate events and meetings.

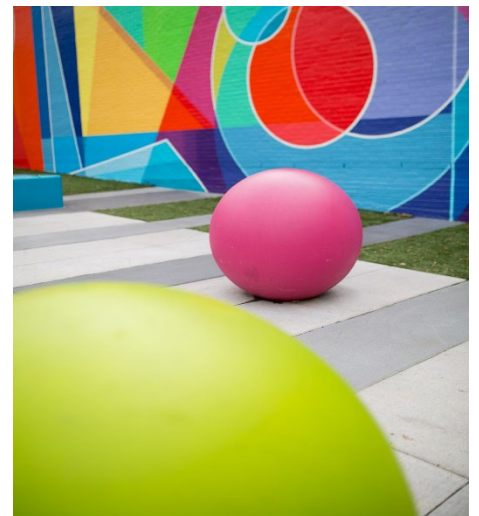
ROOFTOP COURTYARD INSPIRATION IMAGES



Growth Priority #3: Reimagine Our Exterior

The energy and vibrancy of Marbles is hidden behind a dull brick façade designed for a predecessor museum in a very different era of downtown Raleigh. Through *Future of Play*, Marbles is reinventing our expansive façade along Blount Street with **bright colors** and **playful public art**. This more vibrant, playful exterior will help Marbles stand out as a world-class destination. This exterior improvement will create a more cohesive campus and communicate Marbles’ identity and mission through color, art and opportunities for play.

To inspire our colorful new Blount Street façade, Marbles will revisit the strategic process that led to *Color Pop Corner* – the lively mural and playscape we introduced to the community in 2018. *Color Pop Corner*, located on the northwest corner of our campus, has captured the imagination and interest of downtown visitors and residents of all ages. Our *Future of Play* renovation will extend *Color Pop Corner’s* vibrant palette and modern design along Blount Street – from introducing multi-hued glass windows to cladding existing brick with pops of color to infusing the sidewalk with bright bursts of play. The elevated outdoor courtyard on the 2nd floor of the renovation will provide a daily peek of green and play to passersby and create a new energy on Blount Street.



Color Pop Corner will provide inspiration for the exterior improvements.

Growth Priority #4: Improve Visitor Flow

Facilitating a smoother flow for visitors throughout the northwest corner of museum building is critical to Marbles’ growth and popularity. *Future of Play* plans will **improve visitor experience and flow** by:

- Adding another stairwell for 1st to 2nd floor access to create more fluid connectivity so that museum guests don’t have to travel back towards the museum entrance to make their way between floors.
- Introducing an accessible walkway through the new 2nd floor courtyard to provide additional connectivity and flow between two of our most popular exhibits – *Moneyalooza* and *imafiFAB*.
- Enclosing the 1st floor of the outdoor courtyard to provide more comfortable access between Marbles’ recently-updated *Splash* exhibit and the new indoor education/flex space where camps, programs, meetings and events will be held.
- Installing a new single occupancy restroom to provide additional amenities for our broad visitor base.

Description of Demand and Unmet Need

Demand Exceeds Capacity: Need to Relieve Congestion

Since opening in 2007, Marbles has **welcomed more than 7.5 million visitors and received many accolades**, from national acclaim as a recipient of the Association of Children’s Museum’s *Outstanding Practice in a Children’s Museum* to statewide ranking as the 6th most visited museum/historic attraction in NC to local News & Observer’s *Top Kid’s Venue*. Each year, our unique, innovative and FUNdamental play experiences bring hundreds of thousands of visitors from all 100 NC counties, all 50 states and numerous foreign countries.

The demand for Marbles’ enriching and play-based offerings has soared back to pre-COVID levels more quickly than expected. During the pandemic, Marbles implemented an advanced ticketing system and capacity constraints that resulted in a more comfortable, safer visitor experience. While improving the visitor experience, these capacity constraints also mean that Marbles is turning away families at the door on many days, especially during the busy summer months, throughout the holiday season and on days with extreme weather...

exactly when local AND visiting families need us most! During the last two weeks of 2022 alone, Marbles attracted more than 28,000 visitors to downtown Raleigh, but we conservatively estimate that more than 4,500 visitors (approximately 16%) were turned away at the door or unable to purchase tickets online due to sold out timeslots. Meanwhile, Marbles’ popular camps, access programs and community events regularly sellout, resulting in long waitlists, limiting our impact and decreasing the number of visitors to – and time spent in – downtown Raleigh.



Already crowded, Marbles is expected to see tremendous growth in the years ahead. Local news outlet ABC11 reported in January 2023 about the “[Triangle baby boom](#)” – an explosion of childbirths at local hospitals coupled with the volume young professionals moving to the area to start, grow and raise their families. Wake County is

ranked as the 3rd fastest growing county in the country according to the 2020 census, and our growth is not expected to slow down. With projections estimating that Wake County population will grow another 40% by 2040, the *Future of Play* renovation positions Marbles to serve tens of thousands more families with young children each year. Mounting research extolling the benefits of childhood play is expected to further fuel attendance growth. The UNICEF Office of Research states, “Now, more than ever, we must leverage the **power of play** to promote mental health and child development” (*The power of play in the pandemic*, UNICEF, 2021). However, without increasing public-facing space, capacity constraints will continue to curtail our long-term impacts on tourism, economic vitality and family experiences in Wake County. Marbles’ proposed *Future of Play* project will provide that critical space by renovating and repurposing our existing footprint in cost-effective, efficient and exciting ways.

One-of-a-Kind, Future-Focused Career Exploration Exhibit

Marbles plays a key role in making Wake County an attractive and high-quality place for families, offering world-class, play-based learning environments and experiences. The benefits of play-based learning are increasingly well-documented, and Marbles is on the cutting edge of trends in the field. However, **our capacity to continue developing new, iconic exhibits and experiences is hindered by physical constraints**. In creative attempts to meet community demand, Marbles has already utilized every possible square inch of our existing buildings to bring fresh, hands-on exhibits to our visitors, from turning a utility stairwell into an interactive piano to transforming a dark hallway into a colorful river to repurposing an in-demand meeting and event space as a camping-themed exhibit.

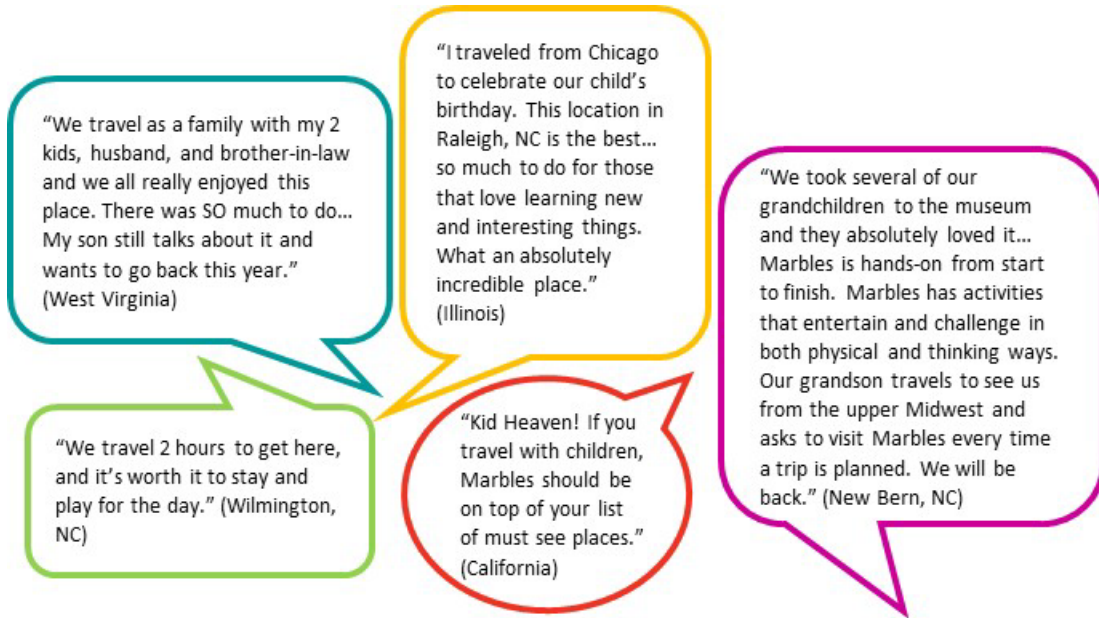
Future of Play will result in a new play-based, experiential exhibit that will add 10% of indoor, public-facing exhibit space. Just as important, the new exhibit, *FuturOpolis*, will feature cutting-edge content and activities that increase young children’s awareness of and interest in future-focused professions and trades. *FuturOpolis* responds to a proven need in our community and across our country, where industries ranging from construction to plumbing to manufacturing are facing a shortage of skills-based workers. A lack of available workforce is stunting growth for businesses that require qualified workers with trade skills. *FuturOpolis* – prominently located on the museum’s 1st floor – will be highly-visible from the Blount Street corridor and will be unlike any other children’s museum exhibit in the country, addressing a key community need while also **generating significant buzz** that attracts visitors from near and far. Marbles will work closely with Wake Tech, Wake County Public Schools, the Raleigh Chamber and other local partners to identify industries, professions and content to feature in the exhibit.

Family Travel: Need New Exhibits and More Space to Attract New Audiences

In addition to our critical role serving Wake County children, **Marbles is a major tourism asset**, attracting family visitors from across the state, the country and beyond. As families continue to bounce back from COVID impacts, enriching experiences for kids will continue to have a growing influence in how families choose vacation destinations and activities. [A 2022 study published by The Family Travel Association and NYU Center of Hospitality](#) highlighted that family and multigenerational travel will continue to play an important force in the tourism industry’s recovery. 85% of respondents indicated they are very likely to travel with their children in the next 12 months, demonstrating the priority families are placing on spending time together and traveling in the wake of the COVID pandemic (*US Family Travel Survey 2022*, Family Travel Association, 2022).

As our out-of-town guests exclaim, **the Marbles experience is travel-worthy**, and we are eager to more actively market to out-of-town families as we have more space to accommodate them. 42% of Marbles’ visitors travel from outside of Wake County. Following the *Future of Play* renovation, that will translate to more than 245,000

visitors traveling from outside of Wake County each year to enjoy not only Marbles, but also the surrounding restaurants and lodging options.



Need for More Multipurpose Spaces: Community Events and Programs

Marbles’ inspiring and uplifting environment – right in the heart of downtown Raleigh – is an **ideal venue for community, corporate and educational events**. For example, in 2018, Marbles was selected as host museum for the Association of Children’s Museums international conference; in partnership with the Greater Raleigh Convention and Visitors Bureau (GRCVB), welcoming peers from 46 states and 11 foreign countries to Wake County for a week of learning (and eating, drinking and sleeping).



In addition to hosting statewide and regional conferences that attract overnight guests, our colorful exhibits and vibrant environment regularly serve as venues for educational meetings, corporate receptions, weddings and galas. In 2022, Marbles served as a venue for more than 100 events, parties and meetings hosted by corporate and nonprofit partners and other community members. These external events brought more than 19,000 guests to Marbles and downtown Raleigh. This demand continues to climb as the facility rental business bounces back from the pandemic. Yet while Marbles is a sought-after venue, we routinely turn away interest because of **inadequately sized facilities and/or capacity conflicts**. As our partners at GRCVB can attest, Marbles boasts a top-notch event coordination team eager to play an expanded role in hosting more events, meetings, conferences and programs following our renovation. The proposed increase in both indoor and outdoor multipurpose space following renovation promises greater venue availability for meetings and events, many attracting overnight stays and/or additional time spent eating and drinking in downtown.

Economic Impact and Projected Number of Visitors Served Post-Renovation

Over our 15-year history, Marbles has become a valuable asset for Wake County and downtown Raleigh. Marbles is an **economic driver, a game-changer for downtown Raleigh, a boost for local quality of life and an attraction for families visiting** from out of town. Marbles anticipates serving 461,872 visitors at our campus this fiscal year, a 42% increase over the previous year – demonstrating a continued strong recovery from the pandemic and vast potential for future growth.

In January 2023, Marbles and GRCVB worked together to estimate Marbles’ current Economic Impact and future visitation projections. Current visitor data demonstrates that 61% of Marbles’ visitors are from within Wake County; another 28% are day visitors; and the remaining 11% are overnight visitors. Based on this breakdown, Marbles and GRCVB estimate our current Economic Impact as follows*:

- Direct Economic Impact: \$23,289 per day x 323 days open per year = **\$7,522,347 per year**
- Estimated Overnight Room Demand: 32 rooms per day x 323 days per year = **10,336 rooms per year**
- Net Direct Tax ROI = \$873 per day x 323 days open per year = **\$281,979 per year**

**For more information, see Attachment B) Marbles Kids Museum EIC Estimate, prepared by GRCVB.*

Marbles’ Economic Impact will increase significantly each year following the *Future of Play* renovation, given our increased capacity, buzz-worthy new experiences and widespread marketing plans. While current visitation data reflects 61% Wake County, 28% day visitors and 11% overnight visitors, Marbles anticipates that this breakdown will shift slightly in the coming years to pre-COVID percentages (58%, 28% and 14%, respectively), as families resume more “normal” travel activity. Below are visitor projections for the first 7 years following the renovation, which are detailed more broadly in Section 6.0.

| | Wake County Visitors 58% | Day Visitors (< 75 Miles) 28% | Overnight Visitors (> 75 Miles) 14% | TOTAL |
|-----------------------------|--------------------------------|-------------------------------------|-------------------------------------------|---------|
| FY26 (Open Post-Renovation) | 339,646 | 163,967 | 81,983 | 585,596 |
| FY27 | 356,628 | 172,165 | 86,083 | 614,876 |
| FY28 | 374,459 | 180,773 | 90,387 | 645,620 |
| FY29 | 389,438 | 188,004 | 94,002 | 671,444 |
| FY30 | 401,121 | 193,645 | 96,822 | 691,588 |
| FY31 | 409,143 | 197,517 | 98,759 | 705,419 |
| FY32 | 417,326 | 201,468 | 100,734 | 719,528 |

Need for County Capital Investment

However, our future impact, growth and reach is dependent on expansion and enhancement within our museum building. Marbles is a 501(c)(3) nonprofit with a commitment to direct resources toward keeping our play-based learning experiences fresh, affordable and accessible for all families who want to visit. As such, we will not be in a position to execute any significant capital improvements to the museum building without the County's partnership and funding support. As the building owner, Wake County will benefit greatly from any capital improvements that add to the building's value, increase square footage and enhance the visitor experience.

Investment from Wake County is critical to the success of this project because it will allow Marbles to focus our fundraising on costs associated with exhibit design and development, staffing, community access and programming within the new and improved spaces. Should funding from the county not be provided, Marbles will significantly alter the scope of the *Future of Play* renovation and our ability to meet the community needs and growth priorities mentioned above will be constricted.

Collaboration & Community Engagement

Since opening in 2007, Marbles has operated with a collaborative spirit. We are proud of our role in Wake County's educational ecosystem as well as in the local tourism industry and will continue to contribute to our region's success and growth through the boldness and uniqueness of our mission and programming. Marbles is especially grateful for our long and mutually beneficial relationship with Wake County, and we look forward to continuing and expanding our partnership through the *Future of Play* renovation. Together with Wake County Facilities Design & Construction and engineering, design and construction partners, Marbles will refine and implement design and construction plans for the project. We will collaborate with Wake County on the selection of major project partners that will help execute the renovation in alignment with our shared visions, budget and timeline.

To determine *FuturOpolis* exhibit content and design, Marbles will collaborate with a wide variety of local partners and experts, including Wake Tech, Wake County Public Schools, Raleigh Chamber, corporate partners and prospective funders. Marbles will also host a series of brainstorming and community engagement sessions with museum members and visitors, nonprofit partners, GRCVB, Downtown Raleigh Alliance and neighboring residents to build excitement and ensure the new exhibit and rooftop courtyard offer an experience that results in lasting community impact. *See Attachment C for Letters of Support from select project collaborators.*

Anticipated Demographics

Marbles visitors represent diverse backgrounds and demographics, visiting from all 100 NC counties, all 50 states and countries around the world. Currently, an estimated 61% of campus visitors are Wake County residents (282,000 annually), hailing from every county municipality and reflecting the region's full economic and cultural diversity. Another 28% of visitors travel from within 75 miles of the museum (129,000) and the remaining 11% travel from 75 miles or more (51,000). Marbles serves a wide range of ages, with core museum exhibits designed for children birth to 10 and their caregivers. Marbles' field trips serve students pre-K through grade 8. Award-winning youth volunteer programs serve middle- and high-school students. Regular programming for young professionals, special events, IMAX films and corporate/community events attract adult audiences throughout the year.

Marbles is steadfast in our **commitment to access and diversity**, offering one of the lowest admission fees for children's museums in the country and working relentlessly to create an inclusive, inviting experience. Marbles'

visitor demographics reflect the full diversity of our community, with families of all backgrounds enjoying our enriching, play-based offerings every day. A Wake County educator recently confirmed this commitment stating, “Marbles is a place where all children and families are welcome and celebrated.” Through targeted outreach, Marbles provides opportunities for families to come together in a safe and welcoming environment for growing, learning and connecting. Following the *Future of Play* renovation, Marbles will eagerly expand our programs that invite families to visit at free and reduced rates, including a free First-Time Parent Membership for new Wake County parents seeking support, connection and resources on their parenting journey.

The *Future of Play* renovation project will positively impact all of Marbles’ guests – Wake County children and caregivers, families visiting from out of town and adult audiences utilizing our new and improved spaces for events and meetings. The renovation will simultaneously enhance and increase our community access programs and the number of community members Marbles serves at free and reduced rates. The project will ultimately **improve the overall family experience in downtown Raleigh** through a reimagined exterior, added vibrancy and public art.

Alignment with Operating Principles

In the first year after completing the *Future of Play* renovation, Marbles estimates that more than 585,000 guests will visit our enhanced campus each year (approximately 27% increase from current), generating more than \$9,865,000 annually in meal and room spending and more than \$276,000 annually in hospitality taxes. By year 7 after completing the renovation, Marbles estimates that more than 719,000 guests will visit each year (approximately 56% increase from current), generating more than \$12,121,000 annually in meal and room spending and more than \$339,000 annually in hospitality taxes. *Please see subsequent Section 6.0, Attachment A and Attachment B for details on visitor projections and estimated return on investment.*

Marbles’ renovation project will incorporate creative, colorful and prominent design and experiences that make our campus more iconic and memorable – providing unique guest experiences that draw visitors from out of town while simultaneously enhancing quality of life experiences for locals. Our reimagined street front and imaginative rooftop courtyard will add even more vibrancy and energy to downtown Raleigh and provide connectivity to surrounding attractions like Moore Square and *Color Pop Corner*.

The children’s museum field has grown substantially over the last two decades – with more than 400 children’s museums across the world serving 40 million visitors annually – and for good reason. Beyond their lasting and positive impact on local children and families, **children’s museums serve as community anchors and engines of economic growth**. According to research from the Association of Children’s Museums, children’s museums contribute more than \$5.5 billion to U.S. economic activity each year (*The Economic Impact of Children’s Museums*, ACM 2018). A report from Oxford Economics further reinforces the value of museums for local economies, stating: “museums generate **substantial tax revenue** for their communities and ... are **economic drivers** providing financial benefits that ripple throughout the economy” (*Museums as Economic Engines*, American Alliance of Museums, 2018).

Colorful and distinctive exteriors, an innovative exhibit and more event space aligns Marbles’ renovation with Wake County’s Room Occupancy and Prepared Food and Beverage Operating Principles. This capital investment in a major Wake County facility will cement Marbles as a modern and competitive family destination and event venue, both driving economic development efforts and enhancing quality of life experiences for visitors, residents and newcomers. Under the leadership of an experienced, professional executive team, Marbles has a successful track record of leveraging and managing public and private investments to execute large-scale capital

projects with an eye toward sustainability, stewardship and collaboration. Marbles has a high standard of fiscal responsibility and organizational viability, operating with a healthy organizational budget and solid long-term plans, monitored monthly by our 27-member Board of Directors. Engagement of community stakeholders, from strategic planning to exhibit design, is a hallmark of the Marbles' approach and will be a major aspect of the *Future of Play* renovation. *Please see subsequent Section 7.0 for details on comparable projects, Marbles FY23 board list and the project team.*



3.0 | PROJECT BUDGET AND FUNDING SOURCES

Below are estimated expenditures and funding sources for Marbles’ *Future of Play* renovation. Anticipated expenses and schedule of expenditures reflect preliminary estimates for the current project scope as detailed in proposal Section 2.0. Marbles staff and Board of Directors will continue to evaluate and adapt project plans as needed in partnership with Wake County Facilities Design & Construction, Wake County General Services Administration and engineering and construction partners.



Funding sources listed reflect anticipated contributions from public and private partners, based on ongoing dialogue with major donors, community leaders and fundraising advisors, as well as Marbles’ contributed income trends since 2007. Marbles will execute a targeted campaign to fundraise for this renovation project. Early conversations with corporate and individual donors have demonstrated significant interest in supporting this exciting and prominent renovation. Marbles understands that county funding will not be distributed until other sources of funding are obtained, and we feel confident that pending private funding will be confirmed as soon as county funding is clarified and project plans are finalized.

| ESTIMATED CAPITAL PROJECT EXPENSES | AMOUNT | SCHEDULE OF EXPENDITURES |
|------------------------------------|--------------------|---------------------------|
| Planning & Design | \$881,000 | April 2023 – August 2024 |
| Land Acquisition Right of Way | \$0 | N/A |
| Construction | \$3,249,000 | September 2024 – May 2025 |
| Equipment & Furnishings | \$1,500,000 | January 2025 – June 2025 |
| Contingency | \$510,000 | Ongoing |
| Total | \$6,140,000 | |

Cost estimates were prepared by Barnhill Contracting in collaboration with Marbles in fall 2022, based on preliminary project plans, scope and market conditions. Estimates include an inflation factor. Barnhill is highly familiar with Marbles’ facilities and capital projects, as they have been the lead construction partner on several major exhibit projects, including *Moneypalooza* and *Around Town*. Marbles does not anticipate significant impact on existing infrastructure throughout and following our *Future of Play* renovation. In addition to a new indoor exhibit, outdoor rooftop courtyard and multipurpose spaces, project plans also include the addition of a stairwell and new single-occupancy restroom.

| SOURCE OF FUNDING | TYPE | AMOUNT | STATUS | YR OF COMMITMENT |
|------------------------------------------------|---------|--------------------|-----------|------------------|
| Corporate & Foundation Donors | Private | \$ 1,700,000 | Pending | 2023 – 2024 |
| Individual Donors | Private | \$ 1,000,000 | Pending | 2023 – 2024 |
| In-Kind FF&E | Private | \$ 155,000 | Pending | 2024 – 2025 |
| Other Public Funds (City, Federal Grants) | Public | \$ 250,000 | Pending | 2024 |
| Wake Co. Capital Improvement Fund ¹ | Public | \$ 272,000 | Committed | 2022 |
| Hospitality Tax Funds | Public | \$ 2,763,000 | Pending | 2023 |
| TOTAL² | | \$6,140,000 | | |

¹ Funding approved and committed during the Nov. 2022 Wake County Board of Commissioners regular meeting.

² Ratio of private funding to public funding is 46% private / 54% public. While public investment is slightly higher than private for capital, remaining project costs (staffing, materials, operating) will be funded by private sources.

4.0 | PROJECT TIMELINE

| | |
|--------------------------------------------------------|----------------------------|
| Study & Analysis of Project | Complete |
| Site Identification & Land/Site Acquisition | Complete |
| Community-Driven Growth Priorities Identified | Complete |
| Hospitality Tax Funding Confirmed – Project Approval | April – June 2023 |
| Architectural & Engineering Studies / Schematic Design | May 2023 – December 2023 |
| Project Fundraising | January 2023 – June 2025 |
| Exhibit Design & Planning | July 2023 – August 2024 |
| Construction Documents & Permitting | January 2024 – June 2024 |
| Facility Construction | September 2024 – June 2025 |
| Equipment Purchase | January 2025 – June 2025 |
| Complete Renovation and Install Exhibit | Target: June 2025 |



5.0 | PROJECT OPERATING PLAN

Financials and Operating Budget

Marbles’ financial imperative throughout the *Future of Play* renovation project is to sustain general operating revenue while generating capital resources to achieve strategic growth priorities for Marbles and Wake County. The below 10-year operating budget highlights anticipated revenues and expenditures to demonstrate the long-term viability of the project and its positive impact on Marbles’ operations.

| Marbles Kids Museum Ten-Year Operating Budget | | | | | | | | | | |
|--------------------------------------------------|-------------------|-------------------|------------------|------------------|------------------|-------------------|-------------------|-------------------|-------------------|-------------------|
| REVENUES | FY24 | FY25 | FY26 | FY27 | FY28 | FY29 | FY30 | FY31 | FY32 | FY33 |
| CONTRIBUTED REVENUE | | | | | | | | | | |
| GOVERNMENT | 1,572,037 | 779,758 | 787,555 | 795,431 | 803,385 | 811,419 | 819,533 | 827,729 | 836,006 | 844,366 |
| INDIVIDUAL & CORPORATE | 1,184,322 | 1,065,890 | 1,140,502 | 1,220,337 | 1,281,354 | 1,306,981 | 1,333,121 | 1,359,783 | 1,386,979 | 1,414,719 |
| FOUNDATION GRANTS | 104,084 | 106,166 | 108,289 | 110,455 | 112,664 | 114,917 | 117,215 | 119,560 | 121,951 | 124,390 |
| TOTAL CONTRIBUTED REVENUE | 2,860,443 | 1,951,813 | 2,036,346 | 2,126,223 | 2,197,403 | 2,233,317 | 2,269,870 | 2,307,072 | 2,344,936 | 2,383,474 |
| EARNED REVENUE | | | | | | | | | | |
| MUSEUM ADMISSIONS & PROGRAMS | 3,377,785 | 3,546,675 | 4,078,676 | 4,282,610 | 4,496,740 | 4,676,610 | 4,816,908 | 4,913,246 | 5,011,511 | 5,111,741 |
| IMAX ADMISSIONS & PROGRAMS | 779,175 | 794,758 | 834,496 | 876,221 | 920,032 | 956,833 | 985,538 | 1,005,249 | 1,025,354 | 1,045,861 |
| PLAY STORE | 862,182 | 905,291 | 1,041,085 | 1,093,139 | 1,147,796 | 1,193,708 | 1,229,519 | 1,254,110 | 1,279,192 | 1,304,776 |
| CAMPS AND FAMILY ENRICHMENT PROGRAMS | 476,984 | 486,524 | 559,502 | 587,477 | 616,851 | 641,525 | 660,771 | 673,987 | 687,466 | 701,216 |
| FACILITY RENTALS, BIRTHDAYS & LEASES | 377,356 | 384,904 | 442,639 | 464,771 | 488,010 | 507,530 | 522,756 | 533,211 | 543,875 | 554,753 |
| INTEREST INCOME & OTHER | 20,743 | 21,157 | 21,581 | 22,012 | 22,452 | 22,901 | 23,359 | 23,827 | 24,303 | 24,789 |
| TOTAL EARNED REVENUE | 5,894,225 | 6,139,309 | 6,977,979 | 7,326,230 | 7,691,882 | 7,999,108 | 8,238,852 | 8,403,629 | 8,571,702 | 8,743,136 |
| TOTAL REVENUES | 8,754,669 | 8,091,122 | 9,014,325 | 9,452,453 | 9,889,285 | 10,232,425 | 10,508,721 | 10,710,701 | 10,916,637 | 11,126,610 |
| EXPENSES | | | | | | | | | | |
| OPERATING EXPENSES | | | | | | | | | | |
| MUSEUM PROGRAMS & EXHIBITS | 2,110,615 | 2,216,145 | 2,548,567 | 2,675,996 | 2,809,795 | 2,922,187 | 3,009,853 | 3,070,050 | 3,131,451 | 3,194,080 |
| COMMUNITY ENGAGEMENT & COMMUNICATIONS | 723,954 | 760,152 | 874,175 | 917,884 | 963,778 | 1,011,967 | 1,052,445 | 1,084,019 | 1,105,699 | 1,127,813 |
| IMAX PROGRAMS | 578,624 | 593,666 | 621,545 | 650,746 | 681,332 | 708,586 | 731,954 | 750,982 | 770,567 | 790,726 |
| CAMPS AND FAMILY ENRICHMENT PROGRAMS | 285,447 | 299,719 | 344,677 | 361,911 | 380,007 | 395,207 | 411,015 | 423,346 | 431,813 | 440,449 |
| PLAY STORE | 662,478 | 693,719 | 776,238 | 813,013 | 851,546 | 885,608 | 914,467 | 937,521 | 961,226 | 985,604 |
| FACILITY RENTALS, BIRTHDAYS & LEASES | 230,124 | 241,631 | 277,875 | 291,769 | 306,357 | 321,675 | 334,542 | 344,579 | 351,470 | 358,500 |
| FUNDRAISING | 618,655 | 649,587 | 682,067 | 716,170 | 751,979 | 789,578 | 821,161 | 845,795 | 862,711 | 879,966 |
| TECHNOLOGY & FACILITIES | 829,839 | 846,435 | 973,401 | 992,869 | 1,012,726 | 1,032,981 | 1,053,640 | 1,074,713 | 1,096,207 | 1,118,132 |
| GENERAL ADMINISTRATION | 959,810 | 979,006 | 998,587 | 1,018,558 | 1,038,929 | 1,059,708 | 1,080,902 | 1,102,520 | 1,124,571 | 1,147,062 |
| TOTAL OPERATING EXPENSES | 6,999,546 | 7,280,061 | 8,097,131 | 8,438,916 | 8,796,450 | 9,127,496 | 9,409,979 | 9,633,525 | 9,835,715 | 10,042,331 |
| OPERATING SURPLUS/<DEFICIT> | 1,755,123 | 811,061 | 917,194 | 1,013,537 | 1,092,835 | 1,104,929 | 1,098,742 | 1,077,176 | 1,080,922 | 1,084,279 |
| NON-OPERATING ACTIVITY | | | | | | | | | | |
| DEBT SERVICE | 184,796 | 184,796 | 184,796 | 184,796 | 184,796 | 184,796 | 184,796 | 184,796 | 184,796 | 184,796 |
| EXHIBIT CAPITAL PURCHASES | 970,000 | - | 197,622 | 267,352 | 318,938 | 307,993 | 283,749 | 249,660 | 240,635 | 230,966 |
| FIXED ASSET PURCHASES | 403,295 | 423,460 | 444,633 | 466,865 | 490,208 | 509,816 | 525,111 | 535,613 | 546,325 | 557,251 |
| TOTAL NON-OPERATING ACTIVITY | 1,558,091 | 608,256 | 827,051 | 919,012 | 993,942 | 1,002,605 | 993,655 | 970,069 | 971,756 | 973,013 |
| 1% RESERVE ALLOCATION | 87,547 | 80,911 | 90,143 | 94,525 | 98,893 | 102,324 | 105,087 | 107,107 | 109,166 | 111,266 |
| TOTAL OPERATING SURPLUS/<DEFICIT> | \$ 109,485 | \$ 121,894 | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |

The 10-year operating budget does not include *Future of Play* project costs or funding sources, which were outlined in Section 3.0.

Marbles’ ongoing operations are funded by an annual budget comprised of approximately 70% earned revenue and 30% contributed revenue. Earned revenue is generated from diverse business units, including museum and theater admissions, memberships, field trips, event rentals and a successful museum store. Marbles will remain operational throughout the renovation process. Given the location of the *Future of Play* renovation, there will be limited – if any – negative impact on earned revenue and visitation during construction. We anticipate that visitation will grow by 15% in the first year following our renovation, based on historical visitation trends,

marketing plans and increased offerings and capacity at the museum. This will result in a projected 13.7% year-over-year increase in earned revenue and a 13.1% increase in our operating surplus.

In addition to earned revenue, Marbles generates approximately 30% of our annual budget via strategic, relationship-based fundraising. Marbles relies on philanthropic support from foundation, corporate, individual and government partners to help underwrite our mission-based programs and services, and we have proven success in raising private funds to fuel our mission and advance our strategic priorities. Contributed revenue is projected to grow year-over-year following our renovation to support expanding operations. Capital costs for the *Future of Play* renovation will be supported through a targeted fundraising campaign that spans Fiscal Years 2023, 2024 and 2025, as outlined in Section 3.0. Wake County's investment in Marbles as a tourism draw and family learning destination creates important momentum for this matching campaign that will attract private support. Marbles is confident that private capital funding will be confirmed once county funding is clarified and project plans are finalized. *Additional financial information documenting Marbles' operating strength is found in Attachments D and E (IRS Form 990 for FY 2021; Audited Financials for FY 2022).*

Management Plan: Leadership and Fiscal Responsibility

Over our 15 year history, Marbles Kids Museum has gained a national reputation as an innovative, resilient nonprofit children’s museum. Marbles practices fiscal responsibility, balancing revenue growth with controlled expenses while maintaining a deep commitment to access and affordability. Our organization is managed by an 8-member Executive Team of creative educators, designers and nonprofit professionals and a diverse and experienced 27-member Board of Directors.

April Ward, VP of Finance, oversees all museum finances, including the *Future of Play* renovation budget and any potential funding awarded by Wake County and other partners. April is supported by an experienced Director of Accounting and two additional teammates who provide checks and balances at the staff level. Our volunteer Finance Committee, comprised of CPAs and other financial executives, provides monthly oversight of our revenue and expenditures. Marbles consistently generates positive cash flow due to tight controls over museum expenses, a fiscally responsible leadership team, growing corporate and community investment and strong visitation trends. Any surplus funds are invested back into museum programs and exhibits. **Welch Narron, VP of Operations**, oversees campus-wide facility operations and every aspect of facilities, operations and infrastructure at Marbles. Welch leads a team of part- and full-time professionals that execute ongoing maintenance, upkeep, sanitation and other facility operations across Marbles’ campus. Welch and April, in partnership with other members of the Executive Team, Wake County Facilities Design & Construction and General Services Administration – and with oversight from our Board – will help Marbles successfully execute and manage the renovation project while protecting County investment, maintaining our expanding facilities and achieving long-term viability and sustainability of operations.



As with previous exhibit and major facility projects, Marbles will hold regular, in-person walk-throughs and meetings with key project partners. All procedures will be followed in accordance with Marbles' top-notch accounting processes and every relevant aspect of the project will adhere to agreements with Marbles’ landlord, Wake County. *See Section 7.0 for more information on the project team.*

Volunteerism and In-Kind Support

At Marbles, community engagement and volunteerism are as important as funding support, with more than 330 volunteers contributing a collective 8,100 hours of service in FY2022. This robust volunteer program enables Marbles to maintain affordable admission and program fees, attract diverse audiences and delight out-of-towners who are accustomed to higher fees in other markets. Marbles also underwrites a portion of our operating budget through in-kind donations of supplies, materials and labor. Marbles will remain **cost-conscious and resourceful** throughout the renovation project, seeking in-kind donations and volunteer hours to offset costs ranging from labor to furnishings to design services.



Marketing Plan

Through a strategic marketing plan, Marbles will intentionally and thoughtfully drive more visitors to Wake County to experience our enhanced offerings, with a focus on the one-of-a-kind *FuturOpolis* exhibit. Marbles operates a well-oiled marketing machine, and we will unleash our full marketing efforts to share our increased capacity and new indoor and outdoor spaces and offerings. To fully capitalize on this opportunity, Marbles will execute a widespread, data-driven marketing campaign including digital, print, radio and content marketing that positions Marbles as one of the leading family-fun and learning destinations in the nation. The marketing plan will be designed to generate interest in the creative, exciting changes at Marbles, resulting in publicity and buzz that will boost interest in and awareness of Marbles, and contribute to the overall appeal of our region. Through **compelling storytelling, powerful imagery and visitor endorsements**, Marbles will share news about our project far and wide to keep current audiences interested and to attract new visitors from outside markets. A new, content-driven, user-friendly website – scheduled to launch in 2023 – will enhance and support our widespread marketing efforts.



A growing number of families travel to children’s museums each year for fun, shared learning experiences and summer enrichment not found in schools, traditional museums or other family destinations. Marbles will leverage our peer networks to capture this interest and execute statewide and national marketing. As a member of the Association of Children’s Museums and the Association of Science & Technology Centers, **Marbles has access to a wide network of families across the country** (many with reciprocal membership benefits) who are interested in traveling to discover family destinations. Within North Carolina, Marbles is a leader in the NC Science Museums Network, and we will work with this network to co-promote in-state family travel to Marbles and similar institutions. Marbles CEO Jonathan Frederick, who serves on the Board of Directors for the NC Science Museums Network, has extensive experience with statewide marketing and promotional campaigns and has already begun strategic conversations to elevate Marbles’ position as the state’s leader in informal, child-centered education and play.

6.0 | ESTIMATES ON VISITORS

Estimated Visitor Information & Economic Impact

Shown below is a summary of estimated visitor information and economic impact following the *Future of Play* renovation project at Marbles Kids Museum. The project will result in a net increase of 3,200 square feet of public-facing space, allowing Marbles to **increase capacity across operations**, including daily museum visitors, event rentals, camp programs and community events. Estimates are calculated using historical visitation data, projected growth rates for the region and analytics provided by GRCVB in January 2023.

Current visitation data shows 61% of Marbles visitors are from within Wake County, 28% are day visitors and 11% are overnight visitors. Marbles anticipates that this breakdown will shift slightly by next year to pre-COVID percentages (58%, 28% and 14%, respectively), as families resume more “normal” travel activity and our marketing efforts focus more on day and overnight visitors.

Chart A) Campus Visitor Projections

| | Wake County Visitors | Day Visitors (< 75 Miles) | Overnight Visitors (> 75 Miles) | TOTAL |
|-----------------------------|-------------------------|-------------------------------|-------------------------------------|---------|
| FY22 | 197,739 | 90,765 | 35,658 | 324,162 |
| FY23 - Current | 281,742 | 129,324 | 50,806 | 461,872 |
| FY24 - Renovation | 281,280 | 135,790 | 67,895 | 484,966 |
| FY25 - Renovation | 295,344 | 142,580 | 71,290 | 509,214 |
| FY26 (Open Post-Renovation) | 339,646 | 163,967 | 81,983 | 585,596 |
| FY27 | 356,628 | 172,165 | 86,083 | 614,876 |
| FY28 | 374,459 | 180,773 | 90,387 | 645,620 |
| FY29 | 389,438 | 188,004 | 94,002 | 671,444 |
| FY30 | 401,121 | 193,645 | 96,822 | 691,588 |
| FY31 | 409,143 | 197,517 | 98,759 | 705,419 |
| FY32 | 417,326 | 201,468 | 100,734 | 719,528 |

Chart B includes a summary of estimated annual economic impact of visitors for the first 7 years following the *Future of Play* renovation project. The estimates for Meal & Room Spending and Hospitality Taxes are calculated using the formulas provided in [Attachment 4: Visitor Estimates and Return on Investment](#) (found in Attachment A of this proposal).

Using these calculations, over the 7 years after completing construction, Marbles estimates that more than 4,634,000 guests will visit our expanded and upgraded campus, generating more than \$78,068,000 in Meal & Room Spending and more than \$2,186,000 in Hospitality Taxes.

Chart B) Post-Renovation Economic Impact

| Year | % YOY Change | Total Visitors | Post-Opening Meal & Room Spending | Post-Opening Hospitality Taxes Collected |
|-----------------------------------------|--------------|------------------|-----------------------------------|------------------------------------------|
| FY25 - Renovation | 5% | 509,214 | | |
| FY26 - First Full Year Open | 15% | 585,596 | \$9,865,306 | \$276,283 |
| FY27 | 5% | 614,876 | \$10,358,607 | \$290,098 |
| FY28 | 5% | 645,620 | \$10,876,537 | \$304,603 |
| FY29 | 4% | 671,444 | \$11,311,599 | \$316,787 |
| FY30 | 3% | 691,588 | \$11,650,947 | \$326,291 |
| FY31 | 2% | 705,419 | \$11,883,966 | \$332,817 |
| FY32 | 2% | 719,528 | \$12,121,645 | \$339,473 |
| 7-Year Total (FY26 through FY32) | | 4,634,070 | \$78,068,607 | \$2,186,353 |

According to the *Visitor Estimates and Return on Investment* spreadsheet provided, Wake County’s investment of \$2.763 million in the *Future of Play* will be returned in 10 years based on occupancy, prepared food and beverage taxes collected. This ROI assumes a room rate of \$117 per room night. However, most overnight visitors to Marbles stay in the downtown area, where hotels charge a room rate well beyond \$117. Using a conservative rate of \$200 per night, the return on investment decreases to **6 years**. Additionally, current Economic Impact data shared by GRCVB in January 2023 demonstrates that Marbles is already generating more Net Direct Tax ROI annually (**\$281,979 per year**) in current FY23 than the provided spreadsheet estimates for future years. Finally, Marbles knows that many museum visitors from within Wake County will purchase food and beverage during their visit downtown. At a minimum, based on historical data for our onsite café and IMAX concessions, Marbles estimates each guest spends an average of \$1.75 per person on food and beverage on our campus alone. This amounts to an additional estimated **\$594,000 spent on food and beverage on the Marbles campus** by Wake County visitors in the first year after the renovation is complete, generating additional hospitality taxes.

In summary, while the calculations provided in the *Visitor Estimate and Return on Investment* spreadsheet provide a glimpse of the projected ROI in terms of Hospitality Taxes collected, **Marbles’ Economic Impact and Hospitality Tax ROI is likely to far surpass the calculations provided.**

Please refer to Attachment A) Visitor Estimates and Return on Investment and Attachment B) Marbles Kids Museum EIC Estimate, provided by GRCVB.

Performance Measures and Project Success

Marbles’ *Future of Play* renovation project will have both tangible and intangible results, some of which will be easily observed and measured. Marbles will stay in close conversation with our partners at Wake County, GRCVB and others before, during and after the project is complete to ensure we are meeting goals and effectively sharing progress and achievements.

1. **More visitors to Marbles and downtown Raleigh** (residents and visitors).
 - Track the number of Marbles campus visitors, including zip codes.
 - Track the number of events hosted at Marbles, capturing event guest zip codes when possible.
 - Track the number of Marbles’ program participants (camps, field trips, family events, community access programs), capturing participant zip codes when possible.
2. People (residents and visitors) are **spending more time and money** in downtown Raleigh and Wake County as a result of the renovation to our campus.

- Conduct intercept interviews and pop-up surveys with Marbles visitors to understand where they live, what brought them to the area (out of town visitors) and what they plan to do before and after their visit to Marbles.
 - Utilize online surveys and digital tools to collect more extensive visitor data.
 - Participate in collaborative market studies conducted by tourism partners.
3. People (residents and visitors) will exhibit **more positive feelings** toward downtown Raleigh and Wake County as a place to work, live and visit as a result of the renovation to our campus.
- Conduct intercept interviews and pop-up surveys with people who visit Marbles to measure the project’s impact on downtown’s vibrancy.
 - Utilize online surveys and digital tools to collect more extensive visitor data.
 - Participate in collaborative market studies conducted by tourism partners.



7.0 | ORGANIZATIONAL INFORMATION

Organization Description

Marbles Kids Museum is a 501(c)(3) nonprofit with a mission to *spark imagination, discovery and learning through play*. Marbles formed in 2007 through the merger of two local museums. An outpouring of community support and desire for a new children’s museum transformed the former space into a vibrant destination for hands-on, minds-on learning. Today, Marbles ranks among the top family destinations in North Carolina and demand for our services has never been greater, as families seek enriching, in-person experiences in a pandemic-impacted world. In the current Fiscal Year, Marbles projects we will welcome 462,000 visitors to our campus, including 368,000 daily museum and theater visitors, 57,000 community access program participants and 2,200 campers. This represents a 42% increase in visitation over the prior fiscal year, demonstrating a strong recovery from pandemic challenges and vast potential for future growth.

Located in the heart of downtown Raleigh, Marbles serves a diverse population of children, families, community organizations and school groups with hands-on, play-based exhibits, educational programs, camps, field trips and access programs. No other organization in North Carolina is better known for developing child-led, play-based learning experiences. From exploring power sources in *Kid Grid* to playing wildlife ranger in *River Playway* to designing a virtual world in *imagiFAB*, experiences at Marbles spark new interests and invite children to explore early career aspirations. In one single visit to Marbles, kids get their hearts pumping in the wildly-popular sports and fitness zone known as *Power2Play*. They explore science in a yellow, glass-bottom submarine, discover new vegetables in *Sun Sprouts* then head to *Moneypalooza* to explore healthy money habits... and so much more!

Leadership and Governance

Marbles is led by an 8-member Executive Team of creative educators, designers and nonprofit professionals. This team meets regularly to discuss the full extent of museum operations, including educational initiatives, administrative policies and procedures, strategic planning, budgeting and evaluation. The Executive Team is responsible for managing a growing annual budget of approximately \$6.9 million, with oversight from the Finance Committee of the Board of Directors. Executive team members include Jonathan Frederick, Chief Executive Officer; Britt Thomas, Chief Activation Officer; Hardin Engelhardt, Chief Learning Officer; Chris Alexander, Vice President of Exhibit Design & Production; Meghan Fitzgerald, Vice President of Marketing & Sales; Welch Narron, Vice President of Operations; Leila Thomas, Vice President of Development; and April Ward, Vice President of Finance.

Marbles is governed by a diverse and experienced 27-member Board of Directors (*see board list below*). Board meetings are held bi-monthly, with board committee meetings held in interim months. The Board’s key roles and responsibilities fall into three categories: **Attend** regular board meetings and other mission-related events and programs; **Act** as a community ambassador to advance our mission and identify potential opportunities; and **Actively participate** on a board committee to provide hands-on support for the organization’s operations and impact.



Six standing Board Committees serve as working groups to advance organizational initiatives:

1. **Executive:** provide organizational direction and board oversight; act on behalf of the board between meetings if urgent needs arise.
2. **Finance:** review financial performance on a monthly basis; recommend sound financial policies, goals and budgets; provide feedback and expertise on audit, IRS tax filings and the annual budget.
3. **Development:** guide fundraising priorities and strategies; approve annual contributed revenue targets; monitor progress; and cultivate and solicit donors.
4. **Facilities:** provide oversight and direction for facilities programs and projects; review contracts; advise on facilities risk management, investments and life cycle strategies.
5. **Communications & Community:** help determine marketing and communications priorities and strategies; offer guidance on public relations and sales activities.
6. **Learning:** guide and review priorities related to learning programs and environments that advance the Marbles mission.

Board and staff special task forces are developed as-needed to support key, time-limited projects, such as significant fundraising efforts, expansion opportunities and facilities projects.

There is currently no litigation or governmental or regulatory action pending against Marbles. Marbles does not anticipate any contractual relationships that would be a conflict of interest in partnership with Wake County to deliver this project. We have an active Conflict of Interest policy in place for board and staff members that we would follow closely in delivering the *Future of Play* renovation.

Project Team, Structure and Experience

The core staff project team responsible for implementation of the *Future of Play* renovation has extensive experience and expertise in leading the growth and success of Marbles and other organizations. Several team members, including our Chief Learning Officer, VP of Exhibits and VP of Finance, have been a part of Team Marbles for more than a decade and have been heavily involved in **multiple construction and renovation projects every year**. All project team members have been involved in the design, fabrication, funding and administration of numerous exhibits and facilities projects (*see below for bios of the core staff project team*).

In addition to staff leadership, both the Facilities Committee and Development Committee of the Marbles Board of Directors will provide active guidance, oversight and support throughout the project. Committee members bring outstanding knowledge and experience to the table and are dedicated to the mission of Marbles and actively involved in creating a bright and sustainable future for the organization.

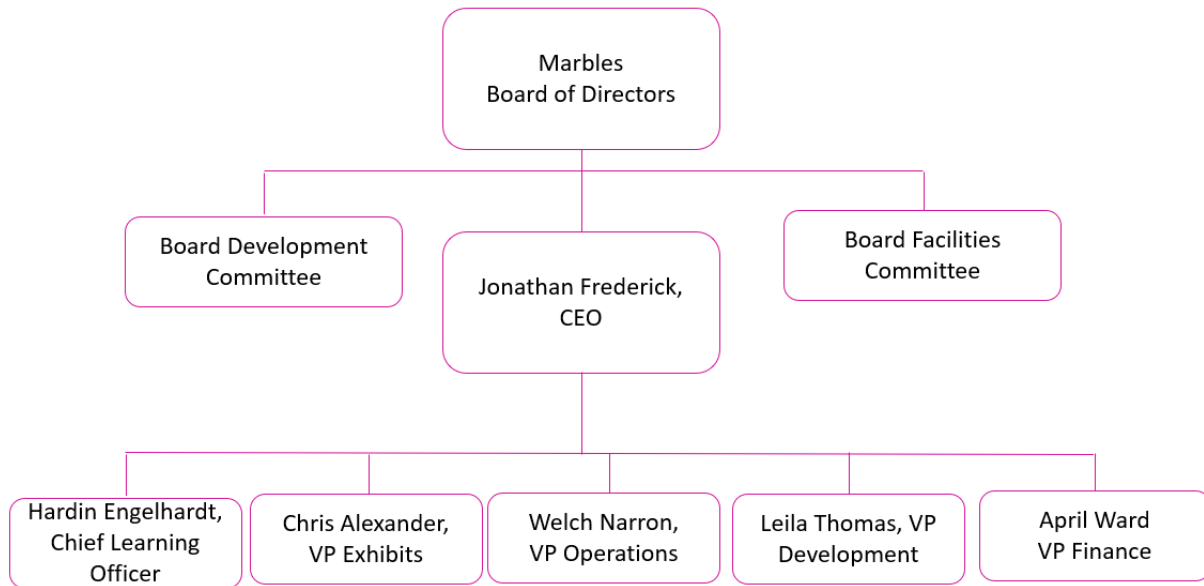
Staff Leadership

Jonathan Frederick, Chief Executive Officer
 Hardin Engelhardt, Chief Learning Officer
 Chris Alexander, Vice President of Exhibit Design & Production
 Welch Narron, Vice President of Operations
 Leila Thomas, Vice President of Development
 April Ward, Vice President of Finance

Board Leadership

Julie Paul, Board Chair, UNC Kenan-Flagler Business School

| Development Committee | Facilities Committee |
|-----------------------------------------------------------|----------------------------------------------------------|
| Jennifer Badham, <i>Committee Chair</i> , Bank of America | Skip Hill, <i>Committee Chair</i> , Highwoods Properties |
| Sara Daniel, Carolina Hurricanes | Jason Herndon, Parker Poe (<i>Board Chair Elect</i>) |
| Grace Rountree, Duke Energy | Christian Bigsby, Cisco |
| Sharon Crawford, Little Architects | Jed Byrne, WithersRavenel |
| Jennifer Pittman, ABB | Jeane Whittington Powers, Gilbane Construction |
| Leslie Ann Jackson, Camber Foundation | |



Project Team Bios

Jonathan Frederick, Chief Executive Officer. Jonathan Frederick leads the creative, playful team of staff and volunteers at Marbles. Prior to joining Marbles as the CEO in June 2022, Frederick served in the Strategic Programs unit of the University of North Carolina at Chapel Hill’s Morehead Planetarium and Science Center. While there, he launched the first statewide science festival of its kind in the nation, growing it into one of largest celebrations of STEM in the world, as well as the first with an endowment. Jonathan was an integral leader throughout Morehead’s recent \$9 million renovation project that created new exhibits and accessible programmatic spaces. Throughout his career, Jonathan has created equitable and impactful programs for families in all 100 counties of North Carolina and gained recognition by being named North Carolina’s Outstanding Informal Science Educator of the Year in 2017. Jonathan began his career in Tampa, FL as a SCUBA-diving educator at The Florida Aquarium where he fell in love with public science engagement. In 2001, he moved to North Carolina to create and launch the Haw River Program which became the first residential environmental education program in N.C. State Parks’ history, drawing groups from across the southeast and as far away as Texas. Jonathan has a B.S. in Biology from Penn State University and a Masters in Liberal Studies from UNC-Wilmington.

Hardin Engelhardt, Chief Learning Officer. Hardin Engelhardt has worked in education for more than 25 years, with extensive experience in teaching and curriculum development. An integral part of Team Marbles since 2009, Hardin has assumed a variety of leadership roles focused on the development, delivery and evaluation of museum programs and environments. In her current role, Hardin oversees the planning and execution of all learning initiatives for Marbles, including exhibit development, educational programs, team training, guest

engagement, access programming and community partnerships. Hardin also oversees Marbles' role in various collaborative educational efforts across Wake County and beyond. She serves on the leadership team of WAKE Up and Read locally and in several national STEM networks. Hardin graduated from Emory University with a degree in English and Psychology and then received a Masters in Education from the University of California, Berkeley.

Chris Alexander, VP of Exhibit Design & Production. Chris Alexander graduated from the School of Design at North Carolina State University. After receiving a BID in Industrial Design in 1993, Chris co-founded the Antfarm Studios, a creative collective for artists and designers that continues to flourish in Raleigh's Boylan Heights. It was during this time, under the mentorship of acclaimed Goldsmith Mary Ann Scherr, that Chris continued his education in design with a focus on metalwork exploration. He joined the team of Exploris Museum in 1997 as Digital Infrastructure Technician and was a critical part of the team that oversaw its quick and inspirational transformation into Marbles Kids Museum in 2007. Chris has been with Marbles since the beginning, leading the Exhibits team to design, develop, fabricate, install and maintain one-of-a-kind exhibit environments that advance Marbles' mission, meet funder requirements and spark a joy in learning for kids of all ages and backgrounds. From *Moneypalooza* to *Color Pop Corner*, *Kid Grid* to *Ready Set Vet* and so much more, Chris's expertise, creativity and hard work have been integral to every square inch of Marbles' innovative and bold learning environments.

Welch Narron, VP of Operations. Welch Narron joined Team Marbles in 2019 as the Director of Facilities, tasked with supporting the facilities management, planning and maintenance of all interior and exterior spaces across the Marbles campus. Welch was promoted into the role of VP of Operations in 2021 and now oversees the IT team and campus-wide facility operations. Welch is instrumental in the success and impact of Marbles, with knowledge of every aspect of facilities, operations and infrastructure. At Marbles, Welch has overseen several complex construction projects, including a comprehensive renovation of the bathrooms and multipurpose classroom spaces on the first floor of the Play Annex building. Welch is also integral in interfacing with our partners at Wake County on issues ranging from safety and security to housekeeping and ongoing maintenance. Prior to this role, Welch was the director of a 160-acre wildlife sanctuary in New Hampshire which hosted a residential camp program for over 800 participants during the summer and provided outdoor education programs for students year-round. Welch graduated from UNC-Chapel Hill with a Bachelor of Communication Studies.

Leila Thomas, VP of Development. Leila Thomas leads fund development initiatives at Marbles Kids Museum, cultivating a culture of playful philanthropy that advances Marbles' mission and fuels our growth. Since joining Team Marbles in 2018, Leila has helped contributed revenue increase each year – even throughout the pandemic – by expanding corporate partnerships, individual giving and foundation and government grants. Leila played a major role in helping Marbles navigate the funding challenges brought on by the pandemic by seeking new and creative sources of contributed revenue. Leila began her career at J.P. Morgan as an analyst in the Private Bank in San Francisco, CA. She then transitioned into the nonprofit sector as a Financial Analyst at WestEd, a national leader in research, development and service working to improve educational outcomes across the country. After returning to North Carolina in 2014, Leila worked as a nonprofit consultant, guiding dozens of local and regional nonprofits to implement best practices in nonprofit management, strategic planning, capital campaigns and fund development. Leila graduated with a double major in Economics and Spanish from the University of Virginia and is a proud graduate of Broughton High School in Raleigh.

April Ward, VP of Finance. April Ward joined Team Marbles in 2011 as the Accounting Manager, was promoted to Director of Accounting in 2013 and then transitioned into the role of VP of Finance in 2021. April is responsible for managing daily accounting functions as well as maintaining outstanding standards for Marbles’ general accounting and financial reporting. She serves as the team liaison to the Board of Directors’ Finance Committee and is responsible for stewarding excellent relationships with banking and insurance partners. At Marbles, April has been the financial lead on projects such as securing the original mortgage and subsequent refinance on the Play Annex building and in securing COVID relief funds during the pandemic. Prior to working at Marbles, April worked as a Senior Financial Analyst at SolidWorks Corp in Massachusetts, a subsidiary of Dassault Systemes, where she was the lead on implementing a new budgeting system and was the primary corporate finance liaison with the accounting teams at sales offices in Europe, Japan and Brazil. April graduated from the University of Southern California with a Bachelors of Science in Business Administration.

Success with Similar Projects

Beginning with the merger of Exploris and Playspace in 2007, Marbles has demonstrated creativity, resourcefulness and a collaborative nature when it comes to transforming spaces across our campus to meet the needs of our visitors through design and building projects. Every year since our founding, Marbles has embarked on new and innovative facilities projects to enhance our campus, in close collaboration with Wake County, private funders and other community partners. These recent projects demonstrate our resourceful and collaborative approach to attracting and leveraging investment specifically in major facilities projects:

1. *imagiFAB.* On our 14th birthday – September 29, 2021 – Marbles unveiled *imagiFAB*, an interactive STEAM-focused exhibit encouraging kids and their caregivers to explore creativity and making together. Planning and executing a complex exhibit project during the COVID pandemic presented many challenges, ranging from restrictions on in-person site visits for contractors to stretched resources and a severely slimmed-down staff team. In partnership with Wake County, architects and general contractors, Team Marbles was able to successfully navigate these challenges through a flexible and inventive approach that resulted in *imagiFAB* – a 4,500sf space that completely transformed the museum’s 2nd floor. Every day, kids and their caregivers animate, build, create and make in modern, colorful spaces unlike anything else on the Marbles campus. From designing a virtual cityscape to painting on an oversized collaborative paint wall, Marbles guests rave about the creative and high-quality experiences offered in *imagiFAB*.



2. *Color Pop Corner.* Marbles converted an abandoned property and former speedometer shop into a high-energy, colorful outdoor space for museum visitors and the general public to enjoy. *Color Pop Corner* offers a bright courtyard and vibrant gateway into downtown’s Moore Square district, a welcoming entrance to Marbles, and a highly “Instagram-able” public space for downtown visitors of all ages. Marbles was awarded a small Major Facilities Capital Projects grant from Wake County and leveraged this funding to attract private investment and in-kind support to achieve a grand opening in 2018.



3. Kid Grid. In 2012, Marbles attracted a \$1 million private investment from ABB North America to transform an unused outdoor terrace into *Kid Grid*, an interactive smart grid exhibit for children. ABB’s investment allowed Marbles to expand our physical facility for the first time, requiring significant partnership and coordination with Wake County FDC and GSA departments to enclose the terrace to house a major exhibit that connects seamlessly to other parts of the 2nd floor and the 1st floor lobby. Marbles worked in close collaboration with the building owner, Wake County, architects, general contractors and exhibit designers and installers to open *Kid Grid* on schedule, to great fanfare locally and nationally.



Marbles Board of Directors FY2022-2023

Julie Paul, *Chair*, UNC Kenan-Flagler Business School

Jason Herndon, *Chair Elect*, Parker Poe

Lennie Austin, *Secretary*, PricewaterhouseCoopers

Mary Beck Skinner, *Treasurer*, First Horizon

Jennifer Badham, *Development Chair*, Bank of America

Skip Hill, *Facilities Chair*, Highwoods Properties Inc.

Shirley Huang, *Learning Chair*, WakeMed

Ericka Santos, *Communications Chair*, Burt’s Bees

John Adams, Advance Auto

Mike Adams, American Board of Pediatrics

Lorie Barnes, Community Volunteer

Preston Bergen, Fifth Third Bank

Christian Bigsby, Cisco

Jed Byrne, WithersRavenel

Heather Cozart, Dixon Hughes Goodman

Sharon Crawford, Little Architects

Sara Daniel, Carolina Hurricanes

Bridget Harrington, Community Volunteer

Leslie Ann Jackson, Camber Foundation

Gail Jones, NCSU

Naeill Leigh, MetLife

Sarah Morgan, BuzzARooney

Jennifer Pittman, ABB

MariaRosa Rangel, WCPSS

Grace Rountree, Duke Energy

Bernette Stivers, Wind Rose Construction

Jeané Whittington Powers, Gilbane Construction



8.0 | ATTACHMENTS

- A. Attachment 4) Visitor Estimates & Return on Investment
- B. Marbles Kids Museum EIC Estimate, Provided by GRCVB (January 2023)
- C. **Letters of Support.** The individuals listed below, representing diverse perspectives and professional affiliations, have lent their voices in support of the *Future of Play* renovation at Marbles.
 - Bill King, President & CEO, Downtown Raleigh Alliance
 - R. Scott Ralls, President, Wake Technical Community College
 - Skip Hill, Senior Vice President & Raleigh Market Leader, Highwoods Properties
 - Christopher Shigas, Head of Communications, ABB
- D. FY21 IRS Form 990
- E. FY22 Audited Financial Statements



Attachment 4: Visitor Estimates and Return on Investment

Updated 11/15/2022

Instructions: Fill in highlighted cells with visitor estimate counts. Only fill in highlighted cells.

The spreadsheet will calculate the estimated taxes collected for Food and Beverage Spending, Room Occupancy Taxes and Total Hospitality Taxes Collected.

Definitions:

Visitors -

- a. **Wake County resident** - visitor from within Wake County
- b. **Day Visitor** - Visitor from outside of Wake County that doesn't spend the night
- c. **Overnight Visitor** - Visitor from outside 75 mile radius of proposed project that spend the night (include total number of nights if visitor will stay multiple nights)

Hotel Room Rate = \$117/per night

Meal Rate on Day Trip = \$21/per day

Meal Rate on Overnight Trip = \$35/per day

Visitor Estimates, Economic Impact and Taxes Collected

1. Estimated Wake County residential visitors (annual) = 339,646

Estimated Food and Beverage Spending and Taxes Collected

| | Number of Visitors | Meal Rate | Meal Spending |
|--------------------------------------------|--------------------|---------------------------------------|-------------------|
| 2. Estimated Day Visitors (annual) = | 163,967 | X \$21.00 | = \$ 3,443,304.26 |
| 3. Estimated Overnight Visitors (annual) = | 81,983 | X \$35.00 | = \$ 2,869,405.00 |
| 4. Total Meal Spending = | | \$ 6,312,709.26 X 1% Food & Bev Tax = | \$ 63,127.09 |

Estimated Room Occupancy Spending and Taxes Collected

| | Number of ON Visitors | Party Size | Number of Rooms | Room Rate | Room Spending |
|-----------------------------------------|-----------------------|------------|-----------------|--------------------------------------|-------------------|
| 5. Estimated Overnight Rooms (annual) = | 81,983 | ÷ 2.7 | = 30364.07407 | X \$117 | = \$ 3,552,596.67 |
| 6. Total Room Spending = | | | | \$ 3,552,596.67 X 6% Occupancy tax = | \$ 213,155.80 |

7. Total Annual Hospitality Taxes Collected = \$ 276,282.89

8. Return on Investment based on taxes collected (in years) = 10

(Calculate by dividing Funding Request to County by Total Annual Hospitality Taxes Collected)

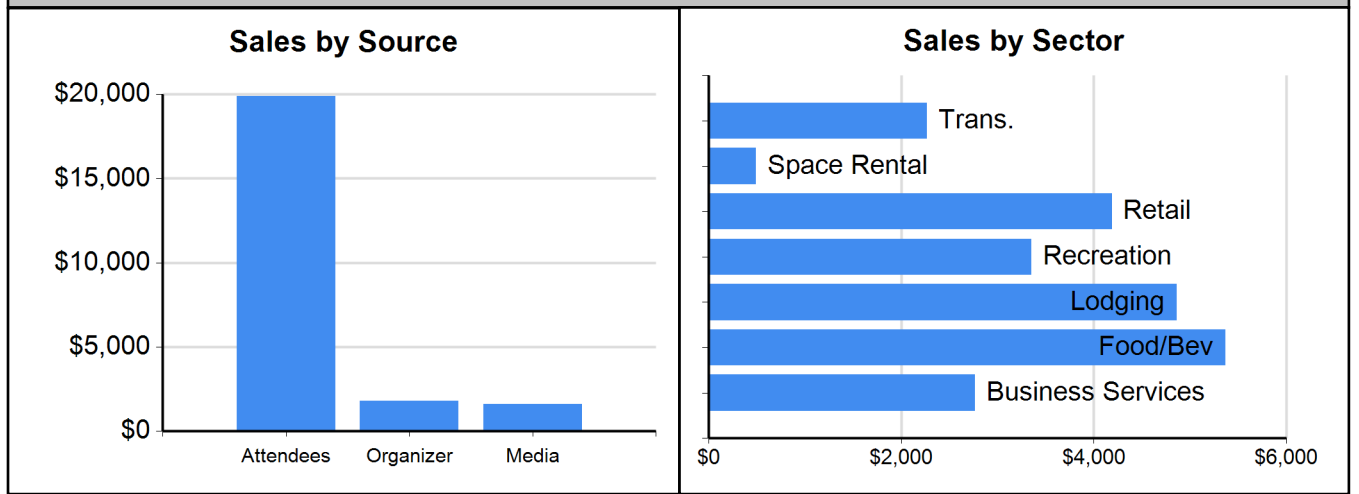
| | |
|----------------------------------------------------------------|--------------|
| Total Meal & Room Spending | \$ 9,865,306 |
| Wake Co. Visitors - Food & Beverage Spending on Marbles Campus | \$ 594,381 |

Event Impact Summary

Destination: Greater Raleigh Convention & Visitors Bureau

| Event Parameters | | Key Results | |
|----------------------|-------------------------------------------|--------------------------|----------|
| Event Name: | Marbles Kids Museum Annual Impact | Business Sales (Direct): | \$23,289 |
| Organization: | GRCVB | Business Sales (Total): | \$42,391 |
| Event Type: | Visual arts (crafts, sculpture, painting) | Jobs Supported (Direct): | 20 |
| Start Date: | 1/2/2023 | Jobs Supported (Total): | 24 |
| End Date: | 1/2/2023 | Local Taxes (Total): | \$1,056 |
| Overnight Attendees: | 44 | Net Direct Tax ROI: | \$873 |
| Day Attendees: | 356 | Estimated Room Demand: | 32 |

Direct Business Sales



| Industry | Attendees | Organizer | Media/Sponsors | Total |
|-------------------|-----------------|----------------|----------------|-----------------|
| Lodging | \$4,726 | \$135 | \$0 | \$4,861 |
| Transportation | \$2,250 | \$7 | \$7 | \$2,265 |
| Food & Beverage | \$5,367 | \$0 | \$0 | \$5,367 |
| Retail | \$4,188 | \$0 | \$0 | \$4,188 |
| Recreation | \$3,350 | \$0 | \$0 | \$3,350 |
| Space Rental | \$0 | \$483 | \$8 | \$491 |
| Business Services | \$0 | \$1,162 | \$1,605 | \$2,767 |
| TOTAL | \$19,881 | \$1,787 | \$1,621 | \$23,289 |

Event Impact Details

Destination: Greater Raleigh Convention & Visitors Bureau

Event Name: Marbles Kids Museum Annual Impact 2023

Organization: GRCVB

| Economic Impact Details | | | |
|-------------------------------------|----------------|------------------|----------------|
| | Direct | Indirect/Induced | Total |
| Business Sales | \$23,289 | \$19,102 | \$42,391 |
| Personal Income | \$7,407 | \$5,410 | \$12,817 |
| Jobs Supported | | | |
| Persons | 20 | 5 | 24 |
| Annual FTEs | 0 | 0 | 0 |
| Taxes and Assessments | | | |
| <u>Federal Total</u> | <u>\$2,062</u> | <u>\$1,616</u> | <u>\$3,678</u> |
| <u>State Total</u> | <u>\$1,248</u> | <u>\$489</u> | <u>\$1,737</u> |
| sales | \$919 | \$227 | \$1,146 |
| income | \$84 | \$61 | \$145 |
| bed | \$0 | - | \$0 |
| other | \$245 | \$201 | \$446 |
| <u>Local Total (excl. property)</u> | <u>\$873</u> | <u>\$183</u> | <u>\$1,056</u> |
| sales | \$484 | \$119 | \$603 |
| income | \$0 | \$0 | \$0 |
| bed | \$284 | - | \$284 |
| per room charge | \$0 | - | \$0 |
| tourism district | \$0 | - | \$0 |
| restaurant | \$40 | \$11 | \$51 |
| other | \$65 | \$53 | \$118 |
| property tax | \$267 | \$165 | \$431 |

| Event Return on Investment (ROI) | |
|--------------------------------------------------|---------|
| Direct local tax ROI (net property taxes) | |
| Direct Tax Receipts | \$873 |
| DMO Hosting Costs | \$0 |
| Direct ROI | \$873 |
| Net Present Value | \$873 |
| Direct ROI (%) | - |
| Total local tax ROI (net property taxes) | |
| Total Local Tax Receipts | \$1,056 |
| Total ROI | \$1,056 |
| Net Present Value | \$1,056 |
| Total ROI (%) | - |

The chart displays a single blue bar representing 'Local Taxes' with a value of \$873. The x-axis is labeled with values \$0, \$200, \$400, \$600, \$800, and \$1,200. The y-axis is labeled 'Costs'.

| Estimated Room Demand Metrics | |
|-------------------------------|-----|
| Room Nights (total) | 32 |
| Room Pickup (block only) | 0 |
| Peak Rooms | 28 |
| Total Visitor Days | 317 |

January 19, 2023

Dear Wake County Hospitality Tax Small Capital Projects Review Committee,

As President and CEO of the Downtown Raleigh Alliance, I ask for your support of *The Future of Play* renovation at Marbles Kids Museum.

The mission of DRA is to advance the vitality of Downtown Raleigh for *everyone*. Marbles is a key asset in advancing this mission and helping to make downtown Raleigh one of the best places to live, work and visit. From a cutting-edge exhibit to a colorful street front, the proposed renovation will advance the vibrancy and status of our downtown community. DRA is especially excited about the project's rooftop courtyard, which will serve as an imaginative outdoor space for family play and connection while also providing a unique venue for weddings, parties, corporate events and other community gatherings.

I encourage you to invest in the renovation at Marbles, a world-class children's museum that attracts thousands of visitors to downtown Raleigh each week and plays a meaningful role in the revitalization of our downtown as we emerge from the pandemic. With more space, a new exhibit and a more exciting exterior, Marbles will attract even more visitors and special events to downtown. We look forward to supporting Marbles on this exciting project.

Sincerely,



Bill King
President and CEO
Downtown Raleigh Alliance





January 10, 2023

Dear Wake County Hospitality Tax Small Capital Projects Review Committee,

On behalf of Wake Technical Community College, I am pleased to offer our support for Marbles Kids Museum's Future of Play renovation project.

This project aligns with our vision to reach students in every part of Wake County and rally around them to go as far as their dreams, talents, and resilience take them. Marbles' renovation plans include a cutting-edge exhibit – FuturOpolis – focused on career exploration in future-focused, skills-based professions and trades. This purposeful space directly aligns with Wake Tech's initiatives to give students opportunities to enter the workforce without a traditional 4-year college degree, should that be their chosen path.

FuturOpolis responds to a proven need in our community and across our country, where industries ranging from construction to plumbing to manufacturing are facing a shortage of skills-based workers. These jobs can provide family-supporting wages and economic mobility. We see the FuturOpolis exhibit at Marbles as an opportunity to expose children at an even earlier age to a wide variety of educational and career paths. By opening kids' imaginations to future possibilities, we will contribute to their long-term success, while also helping build a pipeline of capable, diverse and skilled future workers for our region. The exhibit will be unlike any other children's museum exhibit in the country, addressing this key community need while also generating significant buzz that attracts visitors from near and far.

I encourage you to invest in the renovation at Marbles. Wake Tech values Marbles as a partner and as critical asset for Wake County. We look forward to working together with Marbles, Wake County and other community members and partners to help bring this one-of-a-kind space to life that will result in lasting community impact.

Sincerely,

A handwritten signature in black ink, appearing to read "R. Scott Ralls", is positioned below the word "Sincerely,".

R. Scott Ralls, President
Wake Technical Community College



150 FAYETTEVILLE STREET, SUITE 1400
RALEIGH, NC 27601

HIGHWOODS.COM | NYSE:HIW

January 9, 2023

Dear Wake County Hospitality Tax Small Capital Projects Review Committee,

On behalf of Highwoods Properties, I ask for your support of the exciting *Future of Play* renovation project at Marbles Kids Museum, a vibrant destination that brings positive energy to our growing downtown community.

The Raleigh area, and downtown in particular, is a dynamic market for Highwoods Properties. The presence of a world-class children's museum with a strong national reputation only helps to fuel new economic development. Marbles' proposed *Future of Play* renovation will further strengthen Marbles' acclaim as an excellent family destination for Wake County residents and visitors alike. The renovation will result in a unique exhibit, a creative rooftop space, a better overall visitor experience and exterior improvements that all add to the appeal and vibrancy of downtown Raleigh.

As a member of the Marbles Board of Directors, I know firsthand how Marbles enriches the quality of Wake County as a place to live, work, play and visit. Highwoods is proud to support Marbles, and we endorse the exciting renovation that will strengthen the museum's future as a community anchor, tourist draw and economic driver in downtown Raleigh and Wake County.

Sincerely,

A handwritten signature in blue ink that reads "Skip Hill".

Skip Hill, Senior Vice President & Raleigh Market Leader
Highwoods Properties

1/20/23

Dear Wake County Hospitality Tax Small Capital Projects Review Committee,

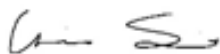
On behalf of ABB, I am pleased submit this letter of support for the exciting *Future of Play* renovation project at Marbles Kids Museum.

ABB is a believer in Marbles' ability to execute creative, collaborative capital projects. We first partnered with Marbles in 2014 by investing \$1,000,000 in the creation of *Kid Grid*, the museum's one-of-a-kind smart grid exhibit. ABB is proud to partner with Marbles and we endorse this exciting capital project that will support Marbles' future as a community anchor, tourist draw and economic driver in Wake County.

Like Marbles, ABB is committed to helping build a pipeline of capable, diverse and skilled future workers for our company and our region. Marbles' has a proven track record of creating spaces and programs – like *Kid Grid* – that open kids' imaginations to future possibilities and contribute to their long-term fulfillment and success. Marbles' *Future of Play* renovation plans include a cutting-edge exhibit – *FuturOpolis* – focused on career exploration in future-focused, skills-based professions and trades. The exhibit will be unlike any other children's museum exhibit in the country, addressing a key community need while also generating significant buzz that attracts visitors from near and far.

I encourage you to invest in the renovation at Marbles. ABB values Marbles as a critical asset for Wake County and we look forward to seeing project plans progress.

Sincerely,



Christopher Shigas
ABB Head of Communications, United States

CLIFTONLARSONALLEN LLP
227 WEST TRADE STREET, SUITE 800
CHARLOTTE, NC 28202

MARBLES KIDS MUSEUM
201 EAST HARGETT STREET
RALEIGH, NC 27601

|||||.....

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat, select the "Actual Size" in the Adobe "Print" dialog.

CLIENT'S COPY



Ms. April Ward
Marbles Kids Museum
201 East Hargett Street
Raleigh, NC 27601

Dear April:

Enclosed is the organization's 2020 Exempt Organization return.

Specific filing instructions are as follows.

FORM 990 RETURN:

This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-EO to our office. We will transmit the return electronically to the IRS and no further action is required. Please return Form 8879-EO to us as soon as possible, but no later than by May 16, 2022 the filing deadline.

FORM 990-T RETURN:

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

No amount is due on Form 990-T.

In addition, tax-exempt organizations must make available for public inspection a copy of their annual returns for the preceding three years and exemption application, if applicable. An organization generally must furnish filings to anyone who requests them in person or in writing. An exempt organization may meet this requirement by posting all the documents on its website or at another organizations site as part of a database of similar materials. Specific requirements must be met to meet this exception.

NORTH CAROLINA FORM CD-405 RETURN:

The North Carolina Form CD-405 should be mailed to:

NCDOR
P.O. Box 25000
Raleigh, NC 27640-0500

No payment is required.

A few final reminders relating to your tax return filings:

- There are substantial penalties for failure to properly disclose and report foreign financial accounts and foreign activity. Please make sure you have informed us of any foreign financial accounts or foreign activity so that we have the necessary information to complete any required disclosures or filings.

- Be sure to review the returns prior to signing as you have final responsibility for all information included in the returns. Please contact us if you have any questions or concerns.
- We recommend you keep a paper or electronic copy of your tax returns permanently. Supporting documentation should be kept for a minimum of seven years based on IRS guidance.

CLA exists to create opportunities – for our clients, our people, and our communities. We value our relationship with you and thank you for your trust and confidence in allowing us to serve you. If we can assist you in making strategic, informed decisions in areas of tax or beyond, please contact us as questions arise throughout the year.

Sincerely,

CliftonLarsonAllen LLP



CliftonLarsonAllen LLP
CLAconnect.com

**MS. APRIL WARD
MARBLES KIDS MUSEUM
FORM 990 INCOME TAX RETURN
FOR YEAR ENDED JUNE 30, 2021**

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-0047

For calendar year 2020, or fiscal year beginning JUL 1, 2020, and ending JUN 30, 2021

2020

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879EO for the latest information.**

Name of exempt organization or person subject to tax

Taxpayer identification number

MARBLES KIDS MUSEUM

58-1647538

Name and title of officer or person subject to tax

**SALLY EDWARDS
PRESIDENT & CEO**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, or 7a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, or 7b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

| | | |
|---------------------------------------------------------------------|---------------------------------------------------------------------------------|-----------------------------|
| 1a Form 990 check here ▶ <input checked="" type="checkbox"/> | b Total revenue, if any (Form 990, Part VIII, column (A), line 12) | 1b <u>3,967,863.</u> |
| 2a Form 990-EZ check here ▶ <input type="checkbox"/> | b Total revenue, if any (Form 990-EZ, line 9) | 2b _____ |
| 3a Form 1120-POL check here ▶ <input type="checkbox"/> | b Total tax (Form 1120-POL, line 22) | 3b _____ |
| 4a Form 990-PF check here ▶ <input type="checkbox"/> | b Tax based on investment income (Form 990-PF, Part VI, line 5) | 4b _____ |
| 5a Form 8868 check here ▶ <input type="checkbox"/> | b Balance due (Form 8868, line 3c) | 5b _____ |
| 6a Form 990-T check here ▶ <input type="checkbox"/> | b Total tax (Form 990-T, Part III, line 4) | 6b _____ |
| 7a Form 4720 check here ▶ <input type="checkbox"/> | b Total tax (Form 4720, Part III, line 1) | 7b _____ |

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

Under penalties of perjury, I declare that I am an officer of the above organization or I am a person subject to tax with respect to (name of organization) _____, (EIN) _____ and that I have examined a copy

of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize CLIFTONLARSONALLEN LLP to enter my PIN 47538
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax ▶

Date ▶

Part III Certification and Authentication

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

56247955902

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ JOHN NORMAN Date ▶ 05/10/22

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

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2020)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

| | | |
|----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| Type or print | Name of exempt organization or other filer, see instructions. MARBLES KIDS MUSEUM | Taxpayer identification number (TIN) 58-1647538 |
| File by the due date for filing your return. See instructions. | Number, street, and room or suite no. If a P.O. box, see instructions. 201 EAST HARGETT STREET | |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions. RALEIGH, NC 27601 | |

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

| Application Is For | Return Code | Application Is For | Return Code |
|------------------------------------------|-------------|-----------------------------------|-------------|
| Form 990 or Form 990-EZ | 01 | Form 990-T (corporation) | 07 |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 4720 (individual) | 03 | Form 4720 (other than individual) | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

APRIL WARD

- The books are in the care of ▶ **201 EAST HARGETT STREET - RALEIGH, NC 27601**
Telephone No. ▶ **919-857-1057** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

- 1** I request an automatic 6-month extension of time until **MAY 16, 2022**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ▶ calendar year _____ or
- ▶ tax year beginning **JUL 1, 2020**, and ending **JUN 30, 2021**.
- 2** If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

| | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----|----|
| 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | 3a | \$ | 0. |
| b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. | 3b | \$ | 0. |
| c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 3c | \$ | 0. |

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2020

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 2020 calendar year, or tax year beginning **JUL 1, 2020** and ending **JUN 30, 2021**

| | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | C Name of organization MARBLES KIDS MUSEUM Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 201 EAST HARGETT STREET City or town, state or province, country, and ZIP or foreign postal code RALEIGH, NC 27601 | D Employer identification number 58-1647538 E Telephone number 919-857-1057 |
| F Name and address of principal officer: SALLY EDWARDS SAME AS C ABOVE | | G Gross receipts \$ 4,168,405. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number ▶ |
| I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 | | |
| J Website: ▶ WWW.MARBLESKIDSMUSEUM.ORG | | |
| K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ | | L Year of formation: 1985 M State of legal domicile: NC |

Part I Summary

| | | | | |
|------------------------------------|----------------|------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|--------------------|
| | 1 | Briefly describe the organization's mission or most significant activities: MARBLES SPARKS IMAGINATION, DISCOVERY, AND LEARNING THROUGH PLAY. | | |
| | 2 | Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. | | |
| Activities & Governance | 3 | Number of voting members of the governing body (Part VI, line 1a) | 3 | 30 |
| | 4 | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 30 |
| | 5 | Total number of individuals employed in calendar year 2020 (Part V, line 2a) | 5 | 155 |
| | 6 | Total number of volunteers (estimate if necessary) | 6 | 316 |
| | 7a | Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 72,090. |
| | 7b | Net unrelated business taxable income from Form 990-T, Part I, line 11 | 7b | 0. |
| | Revenue | 8 | Contributions and grants (Part VIII, line 1h) | Prior Year |
| 9 | | Program service revenue (Part VIII, line 2g) | 2,251,452. | 2,702,522. |
| 10 | | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 3,202,100. | 1,108,693. |
| 11 | | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | -158,748. | -5,916. |
| 12 | | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 304,588. | 162,564. |
| 12 | | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 5,599,392. | 3,967,863. |
| Expenses | | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 0. |
| | 14 | Benefits paid to or for members (Part IX, column (A), line 4) | 0. | 0. |
| | 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 4,395,654. | 2,759,333. |
| | 16a | Professional fundraising fees (Part IX, column (A), line 11e) | 8,105. | 1,140. |
| | b | Total fundraising expenses (Part IX, column (D), line 25) ▶ 250,927. | | |
| | 17 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | 2,518,897. | 1,224,054. |
| | 18 | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 6,922,656. | 3,984,527. |
| | 19 | Revenue less expenses. Subtract line 18 from line 12 | -1,323,264. | -16,664. |
| Net Assets or Fund Balances | 20 | Total assets (Part X, line 16) | Beginning of Current Year | End of Year |
| | 21 | Total liabilities (Part X, line 26) | 9,818,203. | 8,790,326. |
| | 22 | Net assets or fund balances. Subtract line 21 from line 20 | 4,535,009. | 5,106,076. |
| | 22 | Net assets or fund balances. Subtract line 21 from line 20 | 5,283,194. | 3,684,250. |

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

| | | | | | |
|------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|--------------------------------------------|-------------------------------|-------------------------------------------------|--------------------------|
| Sign Here | Signature of officer SALLY EDWARDS, PRESIDENT & CEO Type or print name and title | Date _____ | | | |
| Paid Preparer Use Only | Print/Type preparer's name JOHN NORMAN | Preparer's signature JOHN NORMAN | Date 05/10/22 | Check if self-employed <input type="checkbox"/> | PTIN P01506766 |
| | Firm's name ▶ CLIFTONLARSONALLEN LLP | | | Firm's EIN ▶ 41-0746749 | |
| Firm's address ▶ 227 WEST TRADE STREET, SUITE 800 CHARLOTTE, NC 28202 | | | Phone no. 704-998-5200 | | |

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: SEE 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

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

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

4a (Code:) (Expenses \$ 2,823,324. including grants of \$) (Revenue \$ 1,227,172.) PROGRAM ACCOMPLISHMENTS FOR FY2020-2021 (FY21) THE MARBLES MISSION IS TO SPARK IMAGINATION, DISCOVERY, AND LEARNING THROUGH PLAY. IN SUPPORT OF OUR MISSION, MARBLES DELIVERS POWERFUL PLAY EXPERIENCES ALIGNED WITH FIVE CORE CONTENT INITIATIVES: READY SET LEARN, BE HEALTHY BE ACTIVE, CREATE INNOVATE, EXPLORE EXPERIMENT, AND CONNECT. CONTENT IS DELIVERED THROUGH INNOVATIVE AND INTERACTIVE EXHIBITS, EDUCATIONAL PROGRAMS, FIELD TRIPS, CAMPS, SPECIAL ACCESS PROGRAMS AND GIANT SCREEN IMAX FILMS.

(CONTINUED ON SCHEDULE O)

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

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

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

4e Total program service expenses 2,823,324.

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)? <i>If "Yes," complete Schedule A</i> | X | |
| 2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? | X | |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> | | 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? <i>If "Yes," complete Schedule C, Part II</i> | | 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? <i>If "Yes," complete Schedule C, Part III</i> | | 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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i> | | X |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> | | X |
| 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 "Yes," complete Schedule D, Part IV</i> | X | |
| 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> | | 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? <i>If "Yes," complete Schedule D, Part VI</i> | 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? <i>If "Yes," complete Schedule D, Part VII</i> | | 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? <i>If "Yes," complete Schedule D, Part VIII</i> | | 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? <i>If "Yes," complete Schedule D, Part IX</i> | X | |
| e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> | | 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)? <i>If "Yes," complete Schedule D, Part X</i> | X | |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> | X | |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> | | X |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> | | 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? <i>If "Yes," complete Schedule F, Parts I and IV</i> | | X |
| 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> | | X |
| 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> | | 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? <i>If "Yes," complete Schedule G, Part I</i> | | 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? <i>If "Yes," complete Schedule G, Part II</i> | X | |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> | | X |
| 20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> | | X |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | | |
| 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 1? <i>If "Yes," complete Schedule I, Parts I and II</i> | | X |

Part IV 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? <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 | |
| 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</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? | | |
| 25a 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? <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 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> | | X |
| 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? <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, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> | | X |
| b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> | | X |
| c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <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, Part II, III, or IV, and Part V, line 1</i> | | X |
| 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? | | X |
| b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> | | |
| 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 11b and 19? | X | |

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

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. | | |
| | 1a 30 | | |
| b | Enter the number of voting members included on line 1a, above, who are independent | | |
| | 1b 30 | | |
| 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? | | X |
| 3 | 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? | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | | X |
| 6 | Did the organization have members or stockholders? | | X |
| 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? | | X |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | |
| a | The governing body? | X | |
| b | Each committee with authority to act on behalf of the governing body? | X | |
| 9 | 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 | | X |

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

| | | Yes | No |
|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 10a | Did the organization have local chapters, branches, or affiliates? | | X |
| 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? | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | X | |
| b | 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 | X | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | X | |
| c | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done | X | |
| 13 | Did the organization have a written whistleblower policy? | X | |
| 14 | Did the organization have a written document retention and destruction policy? | X | |
| 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 | X | |
| b | Other officers or key employees of the organization | X | |
| | 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? | | X |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? | | |

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **APRIL WARD - 919-857-1057**
201 EAST HARGETT STREET, RALEIGH, NC 27601

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

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

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (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) SALLY EDWARDS PRESIDENT & CEO | 40.00 | | | X | | | 190,051. | 0. | 11,651. | |
| (2) TIMOTHY HAZLEHURST VP OF INNOVATION | 40.00 | | | X | | | 101,709. | 0. | 11,181. | |
| (3) NATE SPILKER CHAIR | 1.00 | X | | X | | | 0. | 0. | 0. | |
| (4) JULIE PAUL CHAIR ELECT | 1.00 | X | | X | | | 0. | 0. | 0. | |
| (5) MARY BECK SKINNER TREASURER & FINANCE CHAIR | 1.00 | X | | X | | | 0. | 0. | 0. | |
| (6) JOHN ADAMS DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. | |
| (7) LENNIE AUSTIN DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. | |
| (8) JENNIFER BADHAM DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. | |
| (9) AUSTIN BARNHILL DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. | |
| (10) CHRISTIAN BIGSBY DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. | |
| (11) TIA MCLAURIN 3COMM CHAIR | 1.00 | X | | | | | 0. | 0. | 0. | |
| (12) PHAEDRA BOINODIRIS DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. | |
| (13) JUSTIN BRINKLEY DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. | |
| (14) LAURA BUNN IMMEDIATE PAST CHAIR | 1.00 | X | | | | | 0. | 0. | 0. | |
| (15) WENDY COULTER DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. | |
| (16) HEATHER COZART DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. | |
| (17) SARA DANIEL DIRECTOR | 1.00 | X | | | | | 0. | 0. | 0. | |

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

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (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 | | | |
| (19) SUSIE ERLINGER DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (20) ANNA GOODMON DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (21) CARRIE GRAY DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (22) JASON HERNDON FACILITIES CHAIR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (23) SKIP HILL DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (24) SHIRLEY HUANG DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (25) NAEILL LEIGH DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (27) SARAH MORGAN DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (28) MIKE MUNN DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| 1b Subtotal | | | | | | | | 291,760. | 0. | 22,832. |
| c Total from continuation sheets to Part VII, Section A | | | | | | | | 0. | 0. | 0. |
| d Total (add lines 1b and 1c) | | | | | | | | 291,760. | 0. | 22,832. |

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 2

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

Section B. Independent Contractors

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

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

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

SEE PART VII, SECTION A CONTINUATION SHEETS

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

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (29) JENNIFER PITTMAN DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (31) MARIAROSA RANGEL LEARNING COMMITTEE CHAIR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (32) MELISSA RHODES DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (34) TRACY SANDERS DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (35) ERICKA SANTOS DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (36) AMY STRECKER DEVELOPMENT CHAIR | 1.00 | X | | | | | | 0. | 0. | 0. |
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| | | | | | | | | | | |
| Total to Part VII, Section A, line 1c | | | | | | | | | | |

Part VIII Statement of Revenue

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

| | | | (A) | (B) | (C) | (D) | |
|----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|----------------------|----------------|------------------------------------|----------------------------|----------------------------------------------------|--|
| | | | Total revenue | Related or exempt function revenue | Unrelated business revenue | Revenue excluded from tax under sections 512 - 514 | |
| Contributions, Gifts, Grants and Other Similar Amounts | 1 a Federated campaigns | 1a | | | | | |
| | b Membership dues | 1b | 458,392. | | | | |
| | c Fundraising events | 1c | 193,622. | | | | |
| | d Related organizations | 1d | | | | | |
| | e Government grants (contributions) | 1e | 801,153. | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1f | 1,249,355. | | | | |
| | g Noncash contributions included in lines 1a-1f | 1g | \$ 76,230. | | | | |
| | h Total. Add lines 1a-1f | | | 2,702,522. | | | |
| Program Service Revenue | 2 a <u>ADMISSION FEES</u> | Business Code | 713990 | 1,108,693. | 1,036,603. | 72,090. | |
| | b | | | | | | |
| | c | | | | | | |
| | d | | | | | | |
| | e | | | | | | |
| | f All other program service revenue | | | | | | |
| | g Total. Add lines 2a-2f | | | 1,108,693. | | | |
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) | | | 14. | | 14. | |
| | 4 Income from investment of tax-exempt bond proceeds | | | | | | |
| | 5 Royalties | | | | | | |
| | 6 a Gross rents | 6a | (i) Real | 1,660. | | | |
| | | | (ii) Personal | | | | |
| | | | | | | | |
| | b Less: rental expenses | 6b | | 0. | | | |
| | c Rental income or (loss) | 6c | | 1,660. | | | |
| | d Net rental income or (loss) | | | 1,660. | | 1,660. | |
| | 7 a Gross amount from sales of assets other than inventory | 7a | (i) Securities | | | | |
| | | | (ii) Other | | | | |
| | | | | | | | |
| | | | | | | | |
| | b Less: cost or other basis and sales expenses | 7b | | 5,930. | | | |
| c Gain or (loss) | 7c | | -5,930. | | | | |
| d Net gain or (loss) | | | -5,930. | | -5,930. | | |
| 8 a Gross income from fundraising events (not including \$ 193,622. of contributions reported on line 1c). See Part IV, line 18 | 8a | | 0. | | | | |
| | | | | | | | |
| | | | | | | | |
| b Less: direct expenses | 8b | | 29,665. | | | | |
| c Net income or (loss) from fundraising events | | | -29,665. | | -29,665. | | |
| 9 a Gross income from gaming activities. See Part IV, line 19 | 9a | | | | | | |
| | | | | | | | |
| b Less: direct expenses | 9b | | | | | | |
| c Net income or (loss) from gaming activities | | | | | | | |
| 10 a Gross sales of inventory, less returns and allowances | 10a | | 355,516. | | | | |
| | | | | | | | |
| | | | | | | | |
| b Less: cost of goods sold | 10b | | 164,947. | | | | |
| c Net income or (loss) from sales of inventory | | | 190,569. | 190,569. | | | |
| Miscellaneous Revenue | 11 a | Business Code | | | | | |
| | b | | | | | | |
| | c | | | | | | |
| | d All other revenue | | | | | | |
| | e Total. Add lines 11a-11d | | | | | | |
| 12 Total revenue. See instructions | | | 3,967,863. | 1,227,172. | 72,090. | -33,921. | |

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------|----------------------------------------|-----------------------------|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ... | | | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | | | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 340,248. | 138,502. | 148,306. | 53,440. |
| 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 | 1,915,821. | 1,522,769. | 213,857. | 179,195. |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 25,463. | 21,663. | 3,273. | 527. |
| 9 Other employee benefits | 330,898. | 261,365. | 62,312. | 7,221. |
| 10 Payroll taxes | 146,903. | 116,613. | 23,951. | 6,339. |
| 11 Fees for services (nonemployees): | | | | |
| a Management | | | | |
| b Legal | | | | |
| c Accounting | 28,174. | | 28,174. | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | 1,140. | | | 1,140. |
| f Investment management fees | | | | |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) | 91,261. | 21,713. | 69,468. | 80. |
| 12 Advertising and promotion | 20,777. | 19,791. | | 986. |
| 13 Office expenses | 56,815. | 13,824. | 42,991. | |
| 14 Information technology | 100,636. | 6,926. | 93,710. | |
| 15 Royalties | | | | |
| 16 Occupancy | 12,340. | | 12,340. | |
| 17 Travel | 266. | 202. | 44. | 20. |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials ... | | | | |
| 19 Conferences, conventions, and meetings | 3,503. | 2,475. | 899. | 129. |
| 20 Interest | 113,723. | 101,686. | 12,037. | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 380,947. | 289,520. | 91,427. | |
| 23 Insurance | 50,101. | 1,881. | 48,220. | |
| 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| a SUPPLIES EXPENSE | 91,343. | 75,193. | 16,150. | |
| b REPAIRS AND MAINTENANCE | 80,503. | 54,063. | 26,440. | |
| c FILM EXPENSE | 26,739. | 26,685. | | 54. |
| d FOOD PURCHASES | 26,188. | 26,129. | 59. | |
| e All other expenses | 140,738. | 122,324. | 16,618. | 1,796. |
| 25 Total functional expenses. Add lines 1 through 24e | 3,984,527. | 2,823,324. | 910,276. | 250,927. |
| 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 Part X

| | | (A) Beginning of year | | (B) End of year |
|---------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|------------|--------------------|
| Assets | 1 Cash - non-interest-bearing | 767,534. | 1 | 1,523,916. |
| | 2 Savings and temporary cash investments | 359,024. | 2 | 511,317. |
| | 3 Pledges and grants receivable, net | 208,401. | 3 | 265,067. |
| | 4 Accounts receivable, net | 30,993. | 4 | 8,812. |
| | 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 5 | |
| | 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) | | 6 | |
| | 7 Notes and loans receivable, net | | 7 | |
| | 8 Inventories for sale or use | 162,634. | 8 | 75,507. |
| | 9 Prepaid expenses and deferred charges | 28,831. | 9 | 24,606. |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 9,317,321. | | |
| | b Less: accumulated depreciation | 10b 5,138,814. | 10c | 4,178,507. |
| | 11 Investments - publicly traded securities | | 11 | |
| | 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 | 3,796,635. | 15 | 2,202,594. |
| 16 Total assets. Add lines 1 through 15 (must equal line 33) | 9,818,203. | 16 | 8,790,326. | |
| Liabilities | 17 Accounts payable and accrued expenses | 392,625. | 17 | 343,527. |
| | 18 Grants payable | | 18 | |
| | 19 Deferred revenue | 659,209. | 19 | 543,282. |
| | 20 Tax-exempt bond liabilities | | 20 | |
| | 21 Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 22 | |
| | 23 Secured mortgages and notes payable to unrelated third parties | 3,483,175. | 23 | 4,219,267. |
| | 24 Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | | 25 | |
| | 26 Total liabilities. Add lines 17 through 25 | 4,535,009. | 26 | 5,106,076. |
| Net Assets or Fund Balances | Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33. | | | |
| | 27 Net assets without donor restrictions | 1,282,898. | 27 | 993,316. |
| | 28 Net assets with donor restrictions | 4,000,296. | 28 | 2,690,934. |
| | Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33. | | | |
| | 29 Capital stock or trust principal, or current funds | | 29 | |
| | 30 Paid-in or capital surplus, or land, building, or equipment fund | | 30 | |
| | 31 Retained earnings, endowment, accumulated income, or other funds | | 31 | |
| | 32 Total net assets or fund balances | 5,283,194. | 32 | 3,684,250. |
| | 33 Total liabilities and net assets/fund balances | 9,818,203. | 33 | 8,790,326. |

Part XI Reconciliation of Net Assets

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

| | | | |
|-----------|----------------------------------------------------------------------------------------------------------------|-----------|-------------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 3,967,863. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 3,984,527. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -16,664. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 5,283,194. |
| 5 | Net unrealized gains (losses) on investments | 5 | |
| 6 | Donated services and use of facilities | 6 | -1,582,280. |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain on Schedule O) | 9 | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) | 10 | 3,684,250. |

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

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

Form 990 (2020)

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.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization **MARBLES KIDS MUSEUM** Employer identification number **58-1647538**

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

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

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-10 above (see instructions)) | (iv) Is the organization listed in your governing document? | | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|------------------------------------|----------|-------------------------------------------------------------------------------|-------------------------------------------------------------|----|---------------------------------------------------|-------------------------------------------------|
| | | | Yes | No | | |
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| 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) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 2295470. | 2789663. | 2941196. | 2251452. | 2702522. | 12980303. |
| 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 | 306,350. | 266,175. | 224,860. | 182,371. | 138,675. | 1118431. |
| 4 Total. Add lines 1 through 3 | 2601820. | 3055838. | 3166056. | 2433823. | 2841197. | 14098734. |
| 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) | | | | | | 54,725. |
| 6 Public support. Subtract line 5 from line 4. | | | | | | 14044009. |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|--------------------------|
| 7 Amounts from line 4 | 2601820. | 3055838. | 3166056. | 2433823. | 2841197. | 14098734. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 861. | 11,173. | 15,116. | 2,025. | 1,674. | 30,849. |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | 17,960. | 14,436. | 21,168. | 25,087. | | 78,651. |
| 11 Total support. Add lines 7 through 10 | | | | | | 14208234. |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | 20,663,689. |
| 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here | | | | | | <input type="checkbox"/> |

Section C. Computation of Public Support Percentage

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------------------------------------|
| 14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) | 14 | 98.84 % |
| 15 Public support percentage from 2019 Schedule A, Part II, line 14 | 15 | 94.24 % |
| 16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | <input checked="" type="checkbox"/> |
| b 33 1/3% support test - 2019. 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 - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization | | <input type="checkbox"/> |
| b 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization | | <input type="checkbox"/> |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | | <input type="checkbox"/> |

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

| Calendar year (or fiscal year beginning in) ► | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 Total. Add lines 1 through 5 | | | | | | |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 Public support. (Subtract line 7c from line 6.) | | | | | | |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ► | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (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 VI.) | | | | | | |
| 13 Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

| | | |
|---------------------------------------------------------------------------------------------------------|-----------|---|
| 15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2019 Schedule A, Part III, line 15 | 16 | % |

Section D. Computation of Investment Income Percentage

| | | |
|--------------------------------------------------------------------------------------------------------------|-----------|---|
| 17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from 2019 Schedule A, Part III, line 17 | 18 | % |

19a 33 1/3% support tests - 2020. 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 - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

| | Yes | No |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i> | | |
| 1 | | |
| 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i> | | |
| 2 | | |

Section C. Type II Supporting Organizations

| | Yes | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i> | | |
| 1 | | |

Section D. All Type III Supporting Organizations

| | Yes | No |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | | |
| 1 | | |
| 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i> | | |
| 2 | | |
| 3 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i> | | |
| 3 | | |

Section E. Type III Functionally Integrated Supporting Organizations

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). | | |
| a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below. | | |
| b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below. | | |
| c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). | | |
| 2 Activities Test. Answer lines 2a and 2b below. | | |
| a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i> | Yes | No |
| 2a | | |
| b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i> | | |
| 2b | | |
| 3 Parent of Supported Organizations. Answer lines 3a and 3b below. | | |
| a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i> | | |
| 3a | | |
| b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i> | | |
| 3b | | |

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

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions.
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

| Section A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
|----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------|
| 1 | Net short-term capital gain | 1 | |
| 2 | Recoveries of prior-year distributions | 2 | |
| 3 | Other gross income (see instructions) | 3 | |
| 4 | Add lines 1 through 3. | 4 | |
| 5 | Depreciation and depletion | 5 | |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | |
| 7 | Other expenses (see instructions) | 7 | |
| 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | |

| Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
|-----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------|
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | | |
| a | Average monthly value of securities | 1a | |
| b | Average monthly cash balances | 1b | |
| c | Fair market value of other non-exempt-use assets | 1c | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | |
| e | Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>): | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | |
| 3 | Subtract line 2 from line 1d. | 3 | |
| 4 | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | 4 | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | |
| 6 | Multiply line 5 by 0.035. | 6 | |
| 7 | Recoveries of prior-year distributions | 7 | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | |

| Section C - Distributable Amount | | | Current Year |
|-----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|--------------|
| 1 | Adjusted net income for prior year (from Section A, line 8, column A) | 1 | |
| 2 | Enter 0.85 of line 1. | 2 | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, column A) | 3 | |
| 4 | Enter greater of line 2 or line 3. | 4 | |
| 5 | Income tax imposed in prior year | 5 | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). | 6 | |
| 7 | <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). | | |

Schedule A (Form 990 or 990-EZ) 2020

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

| Section D - Distributions | | Current Year |
|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| 1 | Amounts paid to supported organizations to accomplish exempt purposes | 1 |
| 2 | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | 2 |
| 3 | Administrative expenses paid to accomplish exempt purposes of supported organizations | 3 |
| 4 | Amounts paid to acquire exempt-use assets | 4 |
| 5 | Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>) | 5 |
| 6 | Other distributions (<i>describe in Part VI</i>). See instructions. | 6 |
| 7 | Total annual distributions. Add lines 1 through 6. | 7 |
| 8 | Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions. | 8 |
| 9 | Distributable amount for 2020 from Section C, line 6 | 9 |
| 10 | Line 8 amount divided by line 9 amount | 10 |

| Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2020 | (iii) Distributable Amount for 2020 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------------------|----------------------------------------------------|
| 1 Distributable amount for 2020 from Section C, line 6 | | | |
| 2 Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i>). See instructions. | | | |
| 3 Excess distributions carryover, if any, to 2020 | | | |
| a From 2015 | | | |
| b From 2016 | | | |
| c From 2017 | | | |
| d From 2018 | | | |
| e From 2019 | | | |
| f Total of lines 3a through 3e | | | |
| g Applied to underdistributions of prior years | | | |
| h Applied to 2020 distributable amount | | | |
| i Carryover from 2015 not applied (see instructions) | | | |
| j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | | |
| 4 Distributions for 2020 from Section D, line 7: \$ | | | |
| a Applied to underdistributions of prior years | | | |
| b Applied to 2020 distributable amount | | | |
| c Remainder. Subtract lines 4a and 4b from line 4. | | | |
| 5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions. | | | |
| 6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions. | | | |
| 7 Excess distributions carryover to 2021. Add lines 3j and 4c. | | | |
| 8 Breakdown of line 7: | | | |
| a Excess from 2016 | | | |
| b Excess from 2017 | | | |
| c Excess from 2018 | | | |
| d Excess from 2019 | | | |
| e Excess from 2020 | | | |

Schedule A (Form 990 or 990-EZ) 2020

Part VI

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

Multiple horizontal lines for supplemental information.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Name of the organization

MARBLES KIDS MUSEUM

Employer identification number

58-1647538

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

| | |
|--------------------------------------------------------|---------------------------------------------------------|
| Name of organization MARBLES KIDS MUSEUM | Employer identification number 58-1647538 |
|--------------------------------------------------------|---------------------------------------------------------|

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|---------------------------------------------------------------------------------------------------------|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 | WAKE COUNTY PO BOX 550 RALEIGH, NC 27602 | \$ 456,708. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 2 | INSTITUTE OF MUSEUM AND LIBRARY SERVICES 1800 M STREET NW, 9TH FLOOR WASHINGTON, DC 20036 | \$ 136,250. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 3 | CHASE BANK 2931 SHERMAN OAK PL RALEIGH, NC 27609 | \$ 156,485. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 4 | NUGGET 200 BUSINESS PARK DR BUTNER, NC 27509 | \$ 180,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 5 | CANNON FOUNDATION PO BOX 548 CONCORD, NC 28025 | \$ 75,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 6 | YMCA OF THE TRIANGLE 801 CORPORATE CENTER DR, #200 RALEIGH, NC 27607 | \$ 100,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |

| | |
|--------------------------------------------------------|---------------------------------------------------------|
| Name of organization MARBLES KIDS MUSEUM | Employer identification number 58-1647538 |
|--------------------------------------------------------|---------------------------------------------------------|

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|--------------------------------------------------------------------------------------|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 7 | PNC BANK FOUNDATION 301 FAYETTEVILLE ST., SUITE 2100 RALEIGH, NC 27601 | \$ 54,150. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| _____ | _____ _____ _____ | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| _____ | _____ _____ _____ | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| _____ | _____ _____ _____ | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| _____ | _____ _____ _____ | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| _____ | _____ _____ _____ | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| _____ | _____ _____ _____ | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |

| | |
|--------------------------------------------------------|---------------------------------------------------------|
| Name of organization MARBLES KIDS MUSEUM | Employer identification number 58-1647538 |
|--------------------------------------------------------|---------------------------------------------------------|

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|------------------------------|----------------------------------------------|-------------------------------------------------|----------------------|
| | _____ | \$ _____ | _____ |
| | _____ | \$ _____ | _____ |
| | _____ | \$ _____ | _____ |
| | _____ | \$ _____ | _____ |
| | _____ | \$ _____ | _____ |
| | _____ | \$ _____ | _____ |
| | _____ | \$ _____ | _____ |
| | _____ | \$ _____ | _____ |

| | |
|--------------------------------------------------------|---------------------------------------------------------|
| Name of organization MARBLES KIDS MUSEUM | Employer identification number 58-1647538 |
|--------------------------------------------------------|---------------------------------------------------------|

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|-----------------------------------------|---------------------|------------------------------------------|-------------------------------------|
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| | | | |

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization MARBLES KIDS MUSEUM **Employer identification number** 58-1647538

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

| | (a) Donor advised funds | (b) Funds and other accounts |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|------------------------------|
| 1 Total number at end of year | | |
| 2 Aggregate value of contributions to (during year) | | |
| 3 Aggregate value of grants from (during year) | | |
| 4 Aggregate value at end of year | | |
| 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

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

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

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

| | Held at the End of the Tax Year |
|--------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register | 2d |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

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

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

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

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

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--------------------------------------------------|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance | | | | | |
| b Contributions | | | | | |
| c Net investment earnings, gains, and losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | | | | | |

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

Part VI Land, Buildings, and Equipment.

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

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land | | 1,501,610. | | 1,501,610. |
| b Buildings | | 2,202,590. | 208,377. | 1,994,213. |
| c Leasehold improvements | | 1,359,891. | 1,128,003. | 231,888. |
| d Equipment | | 1,971,963. | 1,724,699. | 247,264. |
| e Other | | 2,281,267. | 2,077,735. | 203,532. |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) | | | | 4,178,507. |

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

| (a) Description | (b) Book value |
|-----------------------------------------------------------------------------|----------------|
| (1) SALES TAX RECEIVABLE AND TICKETS COM RECEIVABLE | 1,728. |
| (2) OCCUPANCY RECEIVABLE | 2,200,866. |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ | 2,202,594. |

Part X Other Liabilities.

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

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

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

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

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

| | | | | |
|---|---------------------------------------------------------------------------------|----|----------|------------|
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 | 4,142,133. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | |
| a | Net unrealized gains (losses) on investments | 2a | | |
| b | Donated services and use of facilities | 2b | 138,675. | |
| c | Recoveries of prior year grants | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | 35,595. | |
| e | Add lines 2a through 2d | 2e | | 174,270. |
| 3 | Subtract line 2e from line 1 | 3 | | 3,967,863. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines 4a and 4b | 4c | | 0. |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5 | | 3,967,863. |

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

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

| | | | | |
|---|----------------------------------------------------------------------------------|----|------------|------------|
| 1 | Total expenses and losses per audited financial statements | | 1 | 5,741,077. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | |
| a | Donated services and use of facilities | 2a | 1,720,955. | |
| b | Prior year adjustments | 2b | | |
| c | Other losses | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | 35,595. | |
| e | Add lines 2a through 2d | 2e | | 1,756,550. |
| 3 | Subtract line 2e from line 1 | 3 | | 3,984,527. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines 4a and 4b | 4c | | 0. |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5 | | 3,984,527. |

Part XIII Supplemental Information.

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

PART X, LINE 2:

MARBLES KIDS MUSEUM IS A NONPROFIT ORGANIZATION EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC). IT HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A)(3) OF THE IRC. IF APPLICABLE, PENALTIES AND INTEREST ASSESSED BY INCOME TAXING AUTHORITIES RELATED TO UNRECOGNIZED TAX POSITIONS ARE INCLUDED AS MISCELLANEOUS EXPENSES IN THE STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS. THERE WERE NO INTEREST OR PENALTIES RECORDED IN THE FINANCIAL STATEMENTS FOR THE YEARS ENDED JUNE 30, 2021 AND 2020, RESPECTIVELY.

MARBLES' REVENUE FROM IMAX COMMERCIAL MOVIES AND CONCESSIONS ARE

Part XIII Supplemental Information (continued)

CONSIDERED UNRELATED BUSINESS INCOME. MARBLER FILES FEDERAL AND STATE CORPORATE INCOME TAX RETURNS AND RECORDS THE CORRESPONDING INCOME TAX PAYABLE AND EXPENSE FOR TAXES OWED ON THE UNRELATED BUSINESS INCOME IN THE FINANCIAL STATEMENTS. NO PAYMENTS WERE MADE AND NO EXPENSES WERE INCURRED FOR TAX OWED ON UNRELATED BUSINESS INCOME FOR THE YEARS ENDED JUNE 30, 2021 AND 2020.

MARBLER RECOGNIZES THE TAX BENEFIT FROM A TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES BASED ON THE TECHNICAL MERITS OF THE POSITION. MARBLER HAS ANALYZED ITS TAX POSITIONS TAKEN FOR FILINGS WITH THE IRS. MARBLER BELIEVES THAT ITS INCOME TAX FILING POSITIONS WILL BE SUSTAINED UPON EXAMINATION AND DOES NOT ANTICIPATE ANY ADJUSTMENTS THAT WOULD RESULT IN A MATERIAL ADVERSE EFFECT ON MARBLER'S FINANCIAL CONDITION, RESULTS OF OPERATIONS, OR CASH FLOWS. ACCORDINGLY, MARBLER HAS NOT RECORDED ANY TAX ASSETS OR LIABILITIES, OR RELATED ACCRUALS FOR INTEREST AND PENALTIES, FOR UNCERTAIN INCOME TAX POSITIONS FOR THE YEARS ENDED JUNE 30, 2021 AND 2020.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

| | |
|---------------------------------------|---------|
| FUNDRAISING EXPENSE | 29,665. |
| LOSS ON DISPOSAL OF ASSETS | 5,930. |
| TOTAL TO SCHEDULE D, PART XI, LINE 2D | 35,595. |

PART XII, LINE 2D - OTHER ADJUSTMENTS:

| | |
|----------------------------------------|---------|
| FUNDRAISING EXPENSES | 29,665. |
| LOSS ON DISPOSAL OF ASSETS | 5,930. |
| TOTAL TO SCHEDULE D, PART XII, LINE 2D | 35,595. |

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

| | | (a) Event #1 | (b) Event #2 | (c) Other events | (d) Total events (add col. (a) through col. (c)) |
|-----------------|----|--------------------------------------------------------------|-------------------------------------|------------------------|--------------------------------------------------------|
| | | BIG IDEA FORUM (event type) | IMAGINATION BALL (event type) | NONE (total number) | |
| Revenue | 1 | Gross receipts | 39,035. | 154,587. | 193,622. |
| | 2 | Less: Contributions | 39,035. | 154,587. | 193,622. |
| | 3 | Gross income (line 1 minus line 2) | | | |
| Direct Expenses | 4 | Cash prizes | | | |
| | 5 | Noncash prizes | | | |
| | 6 | Rent/facility costs | | | |
| | 7 | Food and beverages | 156. | 2,290. | 2,446. |
| | 8 | Entertainment | 3,500. | 6,876. | 10,376. |
| | 9 | Other direct expenses | 5,076. | 11,768. | 16,844. |
| | 10 | Direct expense summary. Add lines 4 through 9 in column (d) | | | 29,666. |
| | 11 | Net income summary. Subtract line 10 from line 3, column (d) | | | -29,666. |

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

Part IV Supplemental Information *(continued)*

Multiple horizontal lines for supplemental information.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

MARBLES KIDS MUSEUM

Employer identification number

58-1647538

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--------------------------------------------------------------------|----------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

| | Yes | No |
|-----------|-----|----------|
| 1b | | |
| 2 | | |
| 4a | | X |
| 4b | | X |
| 4c | | X |
| 5a | | X |
| 5b | | X |
| 6a | | X |
| 6b | | X |
| 7 | | X |
| 8 | | X |
| 9 | | |

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

Schedule J (Form 990) 2020

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

| (A) Name and Title | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) reported as deferred on prior Form 990 |
|--------------------------------------|------|----------------------------------------------------|-------------------------------------|-------------------------------------|------------------------------------------------|-------------------------|---------------------------------|-----------------------------------------------------------------------|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| (1) SALLY EDWARDS PRESIDENT & CEO | (i) | 190,051. | 0. | 0. | 3,031. | 8,620. | 201,702. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
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| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 3:

THE BOARD OR EXECUTIVE COMMITTEE REVIEWS AND APPROVES COMPENSATION FOR THE
PRESIDENT AND KEY EMPLOYEES. MARBLES RELIES ON SALARY SURVEYS AND RELEVANT
INDUSTRY DATA OBTAINED FROM SOURCES SUCH AS THE ASSOCIATION OF CHILDREN'S
MUSEUMS.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization **MARBLES KIDS MUSEUM** Employer identification number **58-1647538**

| 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 | X | 10 | 4,205. | COST |
| 20 Drugs and medical supplies | | | | |
| 21 Taxidermy | | | | |
| 22 Historical artifacts | | | | |
| 23 Scientific specimens | | | | |
| 24 Archeological artifacts | | | | |
| 25 Other ▶ (AUCTION ITEMS) | X | 118 | 69,875. | COST |
| 26 Other ▶ (SUPPLIES) | X | 3 | 2,150. | COST |
| 27 Other ▶ () | | | | |
| 28 Other ▶ () | | | | |

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

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

SCHEDULE O
(Form 990 or 990-EZ)

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 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

MARBLES KIDS MUSEUM

Employer identification number

58-1647538

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

MARBLES SPARKS IMAGINATION, DISCOVERY AND LEARNING THROUGH PLAY. 1.

READY SET LEARN. PLAY BUILDS INTELLECTUAL, SOCIAL AND EMOTIONAL SKILL

FOR SUCCESS IN LEARNING AND IN LIFE. 2. BE HEALTHY BE ACTIVE. PLAY

PROMOTES PHYSICAL DEVELOPMENT AND HEALTH. 3. CREATE INNOVATE. PLAY

ENCOURAGES IMAGINATION, CREATIVITY AND SELF-EXPRESSION. 4. EXPLORE

EXPERIMENT. PLAY LEADS TO DISCOVERY AND KINDLES CURIOSITY. 5. CONNECT.

PLAY TEACHES COOPERATION AND COLLABORATION, STRENGTHENS FAMILIES AND

UNITES OUR COMMUNITY.

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:

AT THE START OF FISCAL YEAR 2021, MARBLES WAS CLOSED TO THE PUBLIC DUE

TO STATE OF EMERGENCY DECLARED BY WAKE COUNTY BECAUSE OF THE NOVEL

CORONAVIRUS (COVID-19) PANDEMIC. DURING THE CLOSURE, MARBLES PIVOTED TO

PRODUCING AND DELIVERING ITS PROGRAMS VIRTUALLY. IN JUNE 2020, WHILE

REMAINING CLOSED FOR PUBLIC VISITATION, MARBLES BEGAN OPERATING SUMMER

CAMPS UNDER A LIMITED CAPACITY, HIGHER-COST MODEL. ON SEPTEMBER 16,

2020, MARBLES REOPENED TO THE PUBLIC AT REDUCED CAPACITY AND WITH

LIMITED HOURS OF OPERATION.

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

FROM SEPTEMBER 16, 2020, THROUGH JUNE 30, 2021, MARBLES KIDS MUSEUM

SERVED ALMOST 129,000 VISITORS. MARBLES MUSEUM AND THEATER WAS CLOSED

TO THE PUBLIC BETWEEN MARCH 15, 2020, AND SEPTEMBER 15, 2020, TO COMPLY

WITH GOVERNMENTAL DIRECTIVES TO CONTAIN THE SPREAD OF COVID-19. WHEN

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

Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20

| | |
|-------------------------------------------------|----------------------------------------------|
| Name of the organization MARBLES KIDS MUSEUM | Employer identification number 58-1647538 |
|-------------------------------------------------|----------------------------------------------|

MARBLES REOPENED TO THE PUBLIC ON SEPTEMBER 16, 2020, IT WAS AT A REDUCED CAPACITY AND WITH LIMITED HOURS OF OPERATION.

CAMP MARBLES OPERATED UNDER A LIMITED CAPACITY, HIGHER-COST MODEL IN FY21, ENGAGING MORE THAN 1,500 KIDS IN FUN, INTERACTIVE LEARNING AND PLAY THROUGH CREATING, BUILDING AND EXPERIMENTING. MARBLES FULL CIRCLE ACCESS AND OUTREACH PROGRAMS PROVIDED OVER 11,400 FREE AND REDUCED RATE MUSEUM VISITS IN FY21 FOR TRADITIONALLY UNDERSERVED POPULATIONS, ENSURING ALL CHILDREN HAVE ACCESS TO MARBLES, DESPITE FINANCIAL OR PHYSICAL LIMITATIONS. MARBLES FULL CIRCLE PROGRAMS INCLUDE MUSEUM ACCESS FOR AT-RISK TITLE I AND PRESCHOOL GROUPS, EXTENDED HOURS FOR WORKING FAMILIES, FREE EVENTS FOR RISING KINDERGARTENERS AND THEIR FAMILIES AND FREE EVENTS FOR CHILDREN WITH SPECIAL NEEDS.

FY21 WAS CHALLENGING FOR MARBLES AFTER CLOSING TO THE PUBLIC FOR 6 MONTHS BETWEEN MARCH 15, 2020 AND SEPTEMBER 15, 2020 DUE TO THE COVID-19 PANDEMIC WHICH SEVERELY RESTRICTED OUR ABILITY TO CONDUCT NORMAL REVENUE-GENERATING BUSINESS OPERATIONS. IN RESPONSE TO THE ABRUPT DROP IN REVENUE, MARBLES SWIFTLY ENACTED STRATEGIES TO CONTAIN COSTS, INCLUDING WORKFORCE REDUCTION AND OTHER COST CONTROLS. IT WAS CRITICAL TO MAINTAIN A CORE TEAM TO NAVIGATE THE PANDEMIC AND PREPARE FOR A STRONG RECOVERY AS WELL AS TO CONTINUE SERVING AND SUPPORTING CHILDREN AND FAMILIES THROUGH NEW, VIRTUAL PROGRAMMING. WHILE MUSEUM STAFF SUCCESSFULLY PIVOTED TO PRODUCE AND DELIVER ITS PROGRAMS VIRTUALLY, ONLINE PROGRAMMING DID NOT GENERATE REVENUE.

THE AVAILABILITY OF FEDERAL PANDEMIC RELIEF FUNDS WAS CRITICAL DURING THIS PERIOD. AS PART OF THE FEDERAL CORONAVIRUS AID, RELIEF AND

| | |
|-------------------------------------------------|----------------------------------------------|
| Name of the organization MARBLES KIDS MUSEUM | Employer identification number 58-1647538 |
|-------------------------------------------------|----------------------------------------------|

ECONOMIC SECURITY (CARES) ACT, MARBLES APPLIED FOR ASSISTANCE UNDER THE SMALL BUSINESS ADMINISTRATION'S (SBA) PAYCHECK PROTECTION PROGRAM (PPP) ROUNDS ONE AND TWO, THE SBA'S ECONOMIC INJURY DISASTER LOAN (EIDL), THE EMPLOYER RETENTION CREDIT (ERC), AND DEFERRAL OF THE EMPLOYER PORTION OF SOCIAL SECURITY TAX. THE PPP PROGRAM PROVIDES SMALL BUSINESSES AND ELIGIBLE NONPROFIT ORGANIZATIONS WITH FUNDS TO PAY UP TO TWENTY-FOUR WEEKS OF PAYROLL COSTS INCLUDING BENEFITS. MARBLES RECEIVED \$801,410 IN PPP ROUND ONE FUNDS IN APRIL 2020 THROUGH AN SBA APPROVED LENDER AND \$924,837 IN PPP ROUND TWO FUNDS IN MARCH 2021. THE CARES ACT CONTAINS PROVISIONS TO APPLY FOR FORGIVENESS OF PPP LOANS, EITHER COMPLETELY OR PARTIALLY. MARBLES RECEIVED 100% FORGIVENESS OF ROUND ONE AND ROUND TWO PPP LOANS IN AUGUST 2021 AND JANUARY 2022, RESPECTIVELY. THE EIDL PROGRAM PROVIDES SMALL BUSINESS OWNERS, INCLUDING NONPROFIT ORGANIZATIONS, WITH FUNDS TO MEET FINANCIAL OBLIGATIONS AND OPERATING EXPENSES THAT COULD HAVE BEEN MET HAD THE PANDEMIC NOT OCCURRED. MARBLES RECEIVED A \$10,000 GRANT AND \$150,000 IN LOAN PROCEEDS IN JUNE 2020 THROUGH THE EIDL PROGRAM.

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

THE PRESIDENT AND VP OF FINANCE WILL DO THE INITIAL REVIEW OF THE FORM 990. FINAL REVIEW AND APPROVAL WILL BE WITH THE FINANCE COMMITTEE AND THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS.

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

BOARD MEMBERS AND OFFICERS ARE ASKED ANNUALLY IF THEY ARE AWARE OF ANY POSSIBLE CONFLICT OF INTEREST.

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

Name of the organization

MARBLES KIDS MUSEUM

Employer identification number

58-1647538

THE BOARD REVIEWS AND APPROVES COMPENSATION FOR THE PRESIDENT AND CEO.

MARBLES RELIES ON SALARY SURVEYS AND OTHER RELEVANT INDUSTRY DATA OBTAINED FROM SOURCES SUCH AS THE ASSOCIATION OF CHILDREN'S MUSEUMS AND NORTH CAROLINA CENTER FOR NONPROFITS.

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

ALL DISCLOSURES ARE AVAILABLE AT OUR OFFICE AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2020, or fiscal year beginning JUL 1, 2020, and ending JUN 30, 2021

2020

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879EO for the latest information.**

Name of exempt organization or person subject to tax

Taxpayer identification number

MARBLES KIDS MUSEUM

58-1647538

Name and title of officer or person subject to tax

**SALLY EDWARDS
PRESIDENT & CEO**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, or 7a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, or 7b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

| | | |
|-----------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------|
| 1a Form 990 check here ▶ <input type="checkbox"/> | b Total revenue, if any (Form 990, Part VIII, column (A), line 12) | 1b _____ |
| 2a Form 990-EZ check here ▶ <input type="checkbox"/> | b Total revenue, if any (Form 990-EZ, line 9) | 2b _____ |
| 3a Form 1120-POL check here ▶ <input type="checkbox"/> | b Total tax (Form 1120-POL, line 22) | 3b _____ |
| 4a Form 990-PF check here ▶ <input type="checkbox"/> | b Tax based on investment income (Form 990-PF, Part VI, line 5) | 4b _____ |
| 5a Form 8868 check here ▶ <input type="checkbox"/> | b Balance due (Form 8868, line 3c) | 5b _____ |
| 6a Form 990-T check here ▶ <input checked="" type="checkbox"/> | b Total tax (Form 990-T, Part III, line 4) | 6b <u>0.</u> |
| 7a Form 4720 check here ▶ <input type="checkbox"/> | b Total tax (Form 4720, Part III, line 1) | 7b _____ |

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

Under penalties of perjury, I declare that I am an officer of the above organization or I am a person subject to tax with respect to (name of organization) _____, (EIN) _____ and that I have examined a copy

of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize CLIFTONLARSONALLEN LLP to enter my PIN 47538
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax ▶

Date ▶

Part III Certification and Authentication

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

56247955902

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ JOHN NORMAN

Date ▶ 05/10/22

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

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

| | | |
|----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| Type or print | Name of exempt organization or other filer, see instructions. MARBLES KIDS MUSEUM | Taxpayer identification number (TIN) 58-1647538 |
| File by the due date for filing your return. See instructions. | Number, street, and room or suite no. If a P.O. box, see instructions. 201 EAST HARGETT STREET | |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions. RALEIGH, NC 27601 | |

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 7

| Application Is For | Return Code | Application Is For | Return Code |
|------------------------------------------|-------------|-----------------------------------|-------------|
| Form 990 or Form 990-EZ | 01 | Form 990-T (corporation) | 07 |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 4720 (individual) | 03 | Form 4720 (other than individual) | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

APRIL WARD

- The books are in the care of ▶ **201 EAST HARGETT STREET - RALEIGH, NC 27601**
Telephone No. ▶ **919-857-1057** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 16, 2022**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year _____ or
▶ tax year beginning **JUL 1, 2020**, and ending **JUN 30, 2021**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

| | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----|----|
| 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | 3a | \$ | 0. |
| b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. | 3b | \$ | 0. |
| c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 3c | \$ | 0. |

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Form **990-T**

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No. 1545-0047

For calendar year 2020 or other tax year beginning JUL 1, 2020, and ending JUN 30, 2021

2020

Department of the Treasury
Internal Revenue Service

▶ Go to www.irs.gov/Form990T for instructions and the latest information.
▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>A <input type="checkbox"/> Check box if address changed.</p> <p>B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a) <input type="checkbox"/> 529S</p> | <p>Print or Type</p> | <p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) MARBLES KIDS MUSEUM</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. 201 EAST HARGETT STREET</p> <p>City or town, state or province, country, and ZIP or foreign postal code RALEIGH, NC 27601</p> <p>C Book value of all assets at end of year ▶ 8,790,326.</p> | <p>D Employer identification number 58-1647538</p> <p>E Group exemption number (see instructions)</p> <p>F <input type="checkbox"/> Check box if an amended return.</p> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

G Check organization type ▶ 501(c) corporation 501(c) trust 401(a) trust Other trust Applicable reinsurance entity

H Check if filing only to ▶ Claim credit from Form 8941 Claim a refund shown on Form 2439

I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation ▶

J Enter the number of attached Schedules A (Form 990-T) ▶ **1**

K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes No
If "Yes," enter the name and identifying number of the parent corporation. ▶

L The books are in care of ▶ **APRIL WARD** Telephone number ▶ **919-857-1057**

Part I Total Unrelated Business Taxable Income

| | | |
|--------------------------------------------------------------------------------------------------------------------------------------|----|---------|
| 1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) | 1 | 13,157. |
| 2 Reserved | 2 | |
| 3 Add lines 1 and 2 | 3 | 13,157. |
| 4 Charitable contributions (see instructions for limitation rules) | 4 | 0. |
| 5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 | 5 | 13,157. |
| 6 Deduction for net operating loss. See instructions STATEMENT 1 | 6 | 13,157. |
| 7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 | 7 | |
| 8 Specific deduction (generally \$1,000, but see instructions for exceptions) | 8 | 1,000. |
| 9 Trusts. Section 199A deduction. See instructions | 9 | |
| 10 Total deductions. Add lines 8 and 9 | 10 | 1,000. |
| 11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero | 11 | 0. |

Part II Tax Computation

| | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|----|
| 1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21) | 1 | 0. |
| 2 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) | 2 | |
| 3 Proxy tax. See instructions | 3 | |
| 4 Other tax amounts. See instructions | 4 | |
| 5 Alternative minimum tax (trusts only) | 5 | |
| 6 Tax on noncompliant facility income. See instructions | 6 | |
| 7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies | 7 | 0. |

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-T** (2020)

| Part III Tax and Payments | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|-----------------|
| 1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) | 1a | | |
| b Other credits (see instructions) | 1b | | |
| c General business credit. Attach Form 3800 (see instructions) | 1c | | |
| d Credit for prior year minimum tax (attach Form 8801 or 8827) | 1d | | |
| e Total credits. Add lines 1a through 1d | | 1e | |
| 2 Subtract line 1e from Part II, line 7 | | 2 | 0. |
| 3 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement) | | 3 | |
| 4 Total tax. Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here | | 4 | 0. |
| 5 2020 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4 | | 5 | 0. |
| 6a Payments: A 2019 overpayment credited to 2020 | 6a | | |
| b 2020 estimated tax payments. Check if section 643(g) election applies | 6b | | |
| c Tax deposited with Form 8868 | 6c | | |
| d Foreign organizations: Tax paid or withheld at source (see instructions) | 6d | | |
| e Backup withholding (see instructions) | 6e | | |
| f Credit for small employer health insurance premiums (attach Form 8941) | 6f | | |
| g Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 | | | |
| <input type="checkbox"/> Form 4136 | | | |
| <input type="checkbox"/> Other | | | |
| Total | 6g | | |
| 7 Total payments. Add lines 6a through 6g | | 7 | |
| 8 Estimated tax penalty (see instructions). Check if Form 2220 is attached | | 8 | |
| 9 Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed | | 9 | |
| 10 Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid | | 10 | |
| 11 Enter the amount of line 10 you want: Credited to 2021 estimated tax | | 11 | |
| | | | Refunded |

| Part IV Statements Regarding Certain Activities and Other Information (see instructions) | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|------------------------------------------------------------------------|
| 1 At any time during the 2020 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here | | | Yes No <input type="checkbox"/> <input checked="" type="checkbox"/> |
| 2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? | | | <input type="checkbox"/> <input checked="" type="checkbox"/> |
| If "Yes," see instructions for other forms the organization may have to file. | | | |
| 3 Enter the amount of tax-exempt interest received or accrued during the tax year | | | \$ |
| 4a Did the organization change its method of accounting? (see instructions) | | | <input type="checkbox"/> <input checked="" type="checkbox"/> |
| b If 4a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V | | | <input type="checkbox"/> <input type="checkbox"/> |

Part V Supplemental Information

Provide the explanation required by Part IV, line 4b. Also, provide any other additional information. See instructions.

| | | | | |
|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sign Here | Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. | | | |
| | Signature of officer | Date | PRESIDENT & CEO | Title |
| | | | | May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Paid Preparer Use Only | Print/Type preparer's name | Preparer's signature | Date | Check <input type="checkbox"/> if self-employed PTIN |
| | JOHN NORMAN | JOHN NORMAN | 05/10/22 | P01506766 |
| | Firm's name | Firm's EIN | | |
| | CLIFTONLARSONALLEN LLP | 41-0746749 | | |
| | Firm's address | | Phone no. | |
| | 227 WEST TRADE STREET, SUITE 800 CHARLOTTE, NC 28202 | | 704-998-5200 | |

FORM 990-T

PRE 2018 NOL SCHEDULE

STATEMENT 1

| | |
|---------------------------------------------------|------------|
| PRE-2018 NOL CARRY FORWARD FROM PRIOR YEAR | 1,095,354. |
| PRE-2018 NOL DEDUCTION INCLUDED IN PART I, LINE 6 | 13,157. |

| | |
|------------------------------------|------------------|
| SCHEDULE A PORTION OF PRE-2018 NOL | |
| SCHEDULE A ENTITY | SCHEDULE A SHARE |
| <u>2</u> | <u>0.</u> |

| | |
|----------------------------------------|------------|
| TOTAL SCHEDULE A SHARE OF PRE-2018 NOL | 0. |
| NET OPERATING DEDUCTION | 13,157. |
| BALANCE AFTER PRE-2018 NOL DEDUCTION | 0. |
| EXPIRING NET OPERATING LOSSES | 0. |
| CARRY FORWARD OF NET OPERATING LOSS | 1,082,197. |

**SCHEDULE A
(Form 990-T)**

Department of the Treasury
Internal Revenue Service

**Unrelated Business Taxable Income
From an Unrelated Trade or Business**

▶ Go to www.irs.gov/Form990T for instructions and the latest information.
▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

ENTITY 2

OMB No. 1545-0047

2020

Open to Public Inspection for
501(c)(3) Organizations Only

| | |
|------------------------------------------------------------------------------|--------------------------------------------------------------|
| A Name of the organization MARBLES KIDS MUSEUM | B Employer identification number 58-1647538 |
| C Unrelated business activity code (see instructions) ▶ 512000 | D Sequence: 1 of 1 |

E Describe the unrelated trade or business ▶ **COMMERCIAL IMAX MOVIES SHOWN AT THE MUSEUM**

| Part I Unrelated Trade or Business Income | | (A) Income | (B) Expenses | (C) Net |
|-----------------------------------------------------------------------------------------------------|-----------|------------|--------------|---------|
| 1 a Gross receipts or sales <u>72,090.</u> | | | | |
| b Less returns and allowances _____ c Balance ▶ | 1c | 72,090. | | |
| 2 Cost of goods sold (Part III, line 8) | 2 | | | |
| 3 Gross profit. Subtract line 2 from line 1c | 3 | 72,090. | | 72,090. |
| 4 a Capital gain net income (attach Sch D (Form 1041 or Form 1120)) (see instructions) | 4a | | | |
| b Net gain (loss) (Form 4797) (attach Form 4797) (see instructions) | 4b | | | |
| c Capital loss deduction for trusts | 4c | | | |
| 5 Income (loss) from a partnership or an S corporation (attach statement) | 5 | | | |
| 6 Rent income (Part IV) | 6 | | | |
| 7 Unrelated debt-financed income (Part V) | 7 | | | |
| 8 Interest, annuities, royalties, and rents from a controlled organization (Part VI) | 8 | | | |
| 9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) | 9 | | | |
| 10 Exploited exempt activity income (Part VIII) | 10 | | | |
| 11 Advertising income (Part IX) | 11 | | | |
| 12 Other income (see instructions; attach statement) | 12 | | | |
| 13 Total. Combine lines 3 through 12 | 13 | 72,090. | | 72,090. |

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) Deductions must be directly connected with the unrelated business income

| | | | | |
|----------------------------------------------------------------------------------------------------------------------------------|------------------------|-----------|-----------|---------|
| 1 Compensation of officers, directors, and trustees (Part X) | | 1 | | |
| 2 Salaries and wages | | 2 | | |
| 3 Repairs and maintenance | | 3 | | |
| 4 Bad debts | | 4 | | |
| 5 Interest (attach statement) (see instructions) | | 5 | | |
| 6 Taxes and licenses | | 6 | | |
| 7 Depreciation (attach Form 4562) (see instructions) | 7 | | | |
| 8 Less depreciation claimed in Part III and elsewhere on return | 8a | | 8b | |
| 9 Depletion | | 9 | | |
| 10 Contributions to deferred compensation plans | | 10 | | |
| 11 Employee benefit programs | | 11 | | |
| 12 Excess exempt expenses (Part VIII) | | 12 | | |
| 13 Excess readership costs (Part IX) | | 13 | | |
| 14 Other deductions (attach statement) | SEE STATEMENT 2 | | 14 | 58,933. |
| 15 Total deductions. Add lines 1 through 14 | | 15 | | 58,933. |
| 16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C) | | 16 | | 13,157. |
| 17 Deduction for net operating loss (see instructions) | | 17 | | 0. |
| 18 Unrelated business taxable income. Subtract line 17 from line 16 | | 18 | | 13,157. |

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2020

Part III Cost of Goods Sold Enter method of inventory valuation

| | | | |
|---|--------------------------------------------------------------------------------------------------------------------------|---|----------------------------------------------------------|
| 1 | Inventory at beginning of year | 1 | |
| 2 | Purchases | 2 | |
| 3 | Cost of labor | 3 | |
| 4 | Additional section 263A costs (attach statement) | 4 | |
| 5 | Other costs (attach statement) | 5 | |
| 6 | Total. Add lines 1 through 5 | 6 | |
| 7 | Inventory at end of year | 7 | |
| 8 | Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2 | 8 | |
| 9 | Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use (see instructions)

A _____

B _____

C _____

D _____

| | A | B | C | D |
|---------------------------------------------------------------------------------------------------------------------------------------------------|----|---|---|---|
| 2 Rent received or accrued | | | | |
| a From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%) | | | | |
| b From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income) | | | | |
| c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D | | | | |
| 3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A) | 0. | | | |
| 4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) | | | | |
| 5 Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B) | 0. | | | |

Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use (see instructions)

A _____

B _____

C _____

D _____

| | A | B | C | D |
|---------------------------------------------------------------------------------------------------------------------|----|---|---|---|
| 2 Gross income from or allocable to debt-financed property | | | | |
| 3 Deductions directly connected with or allocable to debt-financed property | | | | |
| a Straight line depreciation (attach statement) | | | | |
| b Other deductions (attach statement) | | | | |
| c Total deductions (add lines 3a and 3b, columns A through D) | | | | |
| 4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement) | | | | |
| 5 Average adjusted basis of or allocable to debt-financed property (attach statement) | | | | |
| 6 Divide line 4 by line 5 | % | % | % | % |
| 7 Gross income reportable. Multiply line 2 by line 6 | | | | |
| 8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A) | 0. | | | |
| 9 Allocable deductions. Multiply line 3c by line 6 | | | | |
| 10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B) | 0. | | | |
| 11 Total dividends-received deductions included in line 10 | 0. | | | |

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

| 1. Name of controlled organization | | 2. Employer identification number | Exempt Controlled Organizations | | | 6. Deductions directly connected with income in column 5 |
|------------------------------------|---------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------------------------------|
| | | | 3. Net unrelated income (loss) (see instructions) | 4. Total of specified payments made | 5. Part of column 4 that is included in the controlling organization's gross income | |
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Nonexempt Controlled Organizations | | | | | | |
| 7. Taxable Income | 8. Net unrelated income (loss) (see instructions) | 9. Total of specified payments made | 10. Part of column 9 that is included in the controlling organization's gross income | 11. Deductions directly connected with income in column 10 | | |
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| | | | Add columns 5 and 10. Enter here and on Part I, line 8, column (A) | Add columns 6 and 11. Enter here and on Part I, line 8, column (B) | | |
| Totals | | | 0. | 0. | | |

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

| 1. Description of income | 2. Amount of income | 3. Deductions directly connected (attach statement) | 4. Set-asides (attach statement) | 5. Total deductions and set-asides (add cols 3 and 4) |
|--------------------------|---------------------|-----------------------------------------------------------------------|----------------------------------|-----------------------------------------------------------------------|
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| | | Add amounts in column 2. Enter here and on Part I, line 9, column (A) | | Add amounts in column 5. Enter here and on Part I, line 9, column (B) |
| Totals | | 0. | | 0. |

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

| | | | |
|---|------------------------------------------------------------------------------------------------------------------------------------------------|---|--|
| 1 | Description of exploited activity: _____ | | |
| 2 | Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) | 2 | |
| 3 | Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B) | 3 | |
| 4 | Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 | 4 | |
| 5 | Gross income from activity that is not unrelated business income | 5 | |
| 6 | Expenses attributable to income entered on line 5 | 6 | |
| 7 | Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12 | 7 | |

Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

- A B C D checkboxes

Enter amounts for each periodical listed above in the corresponding column.

Table with 4 columns (A, B, C, D) and 2 rows (Gross advertising income, Add columns A through D)

Table with 4 columns (A, B, C, D) and 2 rows (Direct advertising costs by periodical, Add columns A through D)

4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8.

Table with 4 columns (A, B, C, D) and 4 rows (Readership costs, Circulation income, Excess readership costs, Excess readership costs allowed as a deduction)

a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13

Part X Compensation of Officers, Directors, and Trustees (see instructions)

Table with 4 columns: 1. Name, 2. Title, 3. Percentage of time devoted to business, 4. Compensation attributable to unrelated business

Total. Enter here and on Part II, line 1

Part XI Supplemental Information (see instructions)

Blank lines for supplemental information

DESCRIPTION

AMOUNT

FILM ROYALTIES

20,017.

THEATRE OPERATIONS

1,086.

OTHER EXPENSES

37,830.

TOTAL TO SCHEDULE A, PART II, LINE 14

58,933.

| | |
|------------------------------------------------------------------------------------------------|--------------|
| For calendar year 2020, or other tax year beginning 07 01 20 and ending 06 30 21 | DOR Use Only |
|------------------------------------------------------------------------------------------------|--------------|

| | |
|---------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| MARBLES KIDS MUSEUM 201 EAST HARGETT STREET RALEIGH NC 27601 | Federal Employer ID Number ***** N.C. Secretary of State ID Number NAICS Code |
|---------------------------------------------------------------------------|-------------------------------------------------------------------------------------|

| | | | | | |
|-----------------------------------------|--------------------------------------------|------------------------------------------------|--------------------------------------------------------------------|---------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Initial Return | <input type="checkbox"/> Short Year Return | <input type="checkbox"/> Captive REIT | <input type="checkbox"/> Non U.S./Foreign | <input type="checkbox"/> NC-Rehab | <input type="checkbox"/> NC-478 is attached |
| <input type="checkbox"/> Final Return | <input type="checkbox"/> Amended Return | <input checked="" type="checkbox"/> Tax Exempt | <input type="checkbox"/> Combined Return (Approved Taxpayers Only) | <input type="checkbox"/> Has Escheatable Property | |

MARB 201 27601 *****

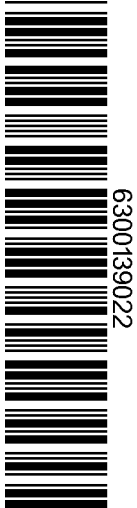
PP ***** PFSP F IR N FR N SR N AR N

TN 9198571057 RE N TE Y NF N CR N NCR N 478 EP N FDEXT N

| | |
|--------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| Federal Extension Were you granted an automatic extension to file your 2020 federal income tax return (Form 1120)? | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
|--------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|

MARBLES KIDS MUSEUM

| | | |
|-------------------------|---------|----------------------|
| 201 EAST HARGETT STREET | RALEIGH | NC 27601 |
| GR | 0 09 | 0 30 0 |
| TA | 0 10 | 13157 22 256357 34 0 |
| 01 | 0 11 | 0 24 EU 0 |
| HCE | N 13 | 0 26 35A 0 |
| 02 | 0 15 | 0 27A 35B 0 |
| 03 | 0 16 | 13157 27B 0 38 0 |
| 05 | 0 17 | 1000000 27C 0 39 0 |
| 06 | 0 18 | 13157 27D 0 40 0 |
| 07 | 0 19 | 0 27E 0 41 0 |
| 08 | 0 20 | 13157 29 0 0 0 |



| | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sch. A Computation of Franchise Tax 1. Net Worth 0 Holding Company Exception N 2. Investment in N.C. Tangible Property 0 3. Appraised Value of N.C. Tangible Property 0 4. Taxable Amount 0 5. Total Franchise Tax Due 0 6. Payment with Franchise Tax Extension 0 7. Tax Credits 0 8. Franchise Tax Due 0 | 9. Franchise Tax Overpaid 0 Sch. B Computation of Corporate Income Tax 10. Federal Taxable Income 13157 11. Adjustments to Federal Taxable Income 0 12. Net Income Before Contributions 13157 13. Contributions to Donees Outside N.C. 0 14. N.C. Taxable Income 13157 15. Nonapportionable Income 0 16. Apportionable Income 13157 17. Apportionment Factor 100.0000% |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

I declare and certify that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Refund Due 0 Payment Due 0

PRESIDENT & CEO **919-857-1057**

Signature and Title of Officer: _____ Date _____ Corporate Phone Number _____

Check here if you authorize the North Carolina Department of Revenue to discuss this return and attachments with the paid preparer below.

PAID PREPARER USE ONLY If prepared by a person other than taxpayer, this certification is based on all information of which the preparer has any knowledge.

JOHN NORMAN **704-998-5200** ****_*******

Signature of Paid Preparer: _____ Date _____ Preparer's Phone Number _____ Preparer's FEIN, SSN, or PTIN _____

FEIN
 SSN
 PTIN

CD-405 Line-by-Line Information

N.C. Education Endowment Fund: You may contribute to the N.C. Education Endowment Fund by making a contribution or designating some or all of your overpayment to the Fund. To make a contribution, enclose Form NC-EDU and your payment of 0

| Sch. B Computation of Corporate Income Tax | Sch. D Investment in N.C. Tangible Property |
|----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|
| 18. Income Apportioned to N.C. 13157 | Inventory valuation method |
| 19. Nonapportionable Income Allocated to N.C. 0 | 1. Total inventories located in N.C. 0 |
| 20. Income Subject to N.C. Tax 13157 | 2. Total furniture, fixtures, and M & E located in N.C. 0 |
| 21. % Depletion over Cost - N.C. Property 0 | 3. Total land and buildings located in N.C. 0 |
| 22. State Net Loss (Attach schedule) 256357 | 4. Total leasehold improvements and other N.C. tangible property 0 |
| 23. Income Before Contributions to N.C. Donees -243200 | 5. Add Lines 1 through 4 0 |
| 24. Contributions to N.C. Donees 0 | 6. Accumulated depreciation, depletion, and amortization with respect to N.C. tangible property 0 |
| 25. Net Taxable Income -243200 | 7. Debts existing for the purchase or improvement of N.C. real estate 0 |
| 26. N.C. Net Income Tax 0 | 8. Investment in N.C. Tangible Property 0 |
| 27. Payments and Credits | Sch. E Appraised Value of N.C. Tangible Property |
| a. Income Tax Extension 0 | 1. County tax value of N.C. tangible property 0 |
| b. 2020 Estimated Tax (previous payments if amended) 0 | 2. Appraised value of N.C. tangible property 0 |
| c. Partnership (include Form D-403, NC K-1) 0 | Sch. G Federal Taxable Income Before NOL Deduction |
| d. Nonresident Withholding (include 1099 or W-2) 0 | 1. a. Gross receipts or sales 0 |
| e. Tax Credits 0 | b. Returns and allowances 0 |
| 28. Add Lines 27a through 27e 0 | c. Balance - Line 1a minus Line 1b 0 |
| 29. Income Tax Due 0 | 2. Cost of goods sold (Attach schedule) 0 |
| 30. Income Tax Overpaid 0 | 3. Gross Profit (Line 1c minus Line 2) 0 |
| Tax Due or Refund | 4. Dividends (Attach schedule) 0 |
| 31. Franchise Tax Due or Overpayment 0 | 5. a. Interest on obligations of U.S. and its instrumentalities 0 |
| 32. Income Tax Due or Overpayment 0 | b. Other interest 0 |
| 33. Balance of Tax Due or Overpayment 0 | 6. Gross rents 0 |
| 34. Underpayment of Estimated Income Tax 0 | 7. Gross royalties (Attach schedule) 0 |
| EU. Exception to Underpayment of Estimated Tax | 8. Capital gain net income (Attach schedule) 0 |
| 35. a. Interest 0 | 9. Net gain (loss) (Attach schedule) 0 |
| b. Penalties 0 | 10. Other income (Attach schedule) 0 |
| c. Add Lines 35a and 35b 0 | 11. Total Income 0 |
| 36. Total Due 0 | 12. Compensation of officers (Attach sch., including addresses) 0 |
| 37. Overpayment 0 | 13. Salaries and wages (less employment credits) 0 |
| 38. 2021 Estimated Income Tax 0 | 14. Repairs and maintenance 0 |
| 39. N.C. Nongame and Endangered Wildlife Fund 0 | 15. Bad debts 0 |
| 40. N.C. Education Endowment Fund 0 | 16. Rents 0 |
| 41. Amount to be Refunded 0 | 17. Taxes and licenses 0 |
| Sch. C Net Worth | 18. Interest 0 |
| 1. Total assets 0 | 19. Charitable contributions 0 |
| 2. Total liabilities 0 | 20. a. Depreciation 0 |
| 3. Line 1 minus Line 2 0 | b. Depreciation included in cost of goods sold 0 |
| 4. Accumulated depreciation, depletion, and amortization permitted for income tax purposes (Attach sch) 0 | c. Balance - Line 20a minus 20b 0 |
| 5. Line 3 minus Line 4 0 | 21. Depletion 0 |
| 6. Affiliated indebtedness (Attach schedule) 0 | 22. Advertising 0 |
| 7. Line 5 plus (or minus) Line 6 0 | 23. Pension, profit-sharing, and similar plans 0 |
| 8. Apportionment factor 0.0000% | 24. Employee benefit programs 0 |
| 9. Net Worth 0 | 25. Reserved for future use 0 |
| | 26. Other deductions (Attach schedule) 0 |
| | 27. Total Deductions 0 |
| | 28. Taxable Income Per Federal Return Before NOL and Special Deductions 0 |
| | 29. Special Deductions 0 |
| | 30. Federal Taxable Income 0 |

Legal Name (First 10 Characters)

MARBLES KI

Federal Employer ID Number

Sch. H Adjustments to Federal Taxable Income

| | | |
|-----------------------------------------------------------------|-----|---|
| 1. Additions | | |
| a. Taxes based on net income | 1a. | 0 |
| b. Contributions | 1b. | 0 |
| c. Royalties to related members | 1c. | 0 |
| d. Net interest expense to related members | 1d. | 0 |
| e. Expenses attributable to income not taxed | 1e. | 0 |
| f. Bonus depreciation | 1f. | 0 |
| g. Section 179 expense deduction | 1g. | 0 |
| h. Other (Attach schedule) | 1h. | 0 |
| 2. Total Additions | 2. | 0 |
| 3. Deductions | | |
| a. U.S. obligation interest (net of expenses) (Attach schedule) | 3a. | 0 |
| b. Other deductible dividends | 3b. | 0 |
| c. Royalties received from related members | 3c. | 0 |
| d. Qualified interest expense to related members | 3d. | 0 |
| e. Bonus depreciation | 3e. | 0 |
| f. Section 179 expense deduction | 3f. | 0 |
| g. Other (Attach schedule) | 3g. | 0 |
| 4. Total Deductions | 4. | 0 |
| 5. Adjustments to Federal Taxable Income | 5. | 0 |

Sch. I Contributions

| | | |
|-----------------------------------------------------------------------------------------------|-----|-----|
| 1. Contributions to Donees Outside N.C. | | |
| a. Total contributions to donees outside N.C. | 1a. | 0 |
| b. Multiply Schedule B, Line 12 by 5%, if Line 12 is greater than zero. Otherwise enter zero. | 1b. | 658 |
| c. Amount Deductible | 1c. | 0 |
| 2. Contributions to N.C. Donees | | |
| a. Total contributions to N.C. donees other than those listed in Line 2d | 2a. | 0 |
| b. Multiply Sch. B, Line 23 by 5%, if Line 23 is greater than zero. Otherwise enter zero. | 2b. | 0 |
| c. Enter the lesser of Line 2a or 2b | 2c. | 0 |
| d. Total contributions to the State of N.C. and its political subdivisions | 2d. | 0 |
| e. Amount Deductible | 2e. | 0 |

Sch. F Other Information - All Taxpayers Must Complete this Schedule

| | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>1. a. State of incorporation</p> <p> b. Date incorporated</p> <p>2. Date of N.C. Certificate of Authority</p> <p>3. a. Reg or principal trade or bus. in N.C. COMMERCIAL I</p> <p> b. Reg or principal trade or bus. everywhere COMMERCIAL I</p> <p>4. Principal place bus. is directed or managed RALEIGH</p> <p>5. What was the last year the IRS redetermined the corporation's federal taxable income?</p> <p>6. a. Were adjustments reported to N.C.? N</p> <p> b. If so, when?</p> <p>7. Does this corporation finance or discount its receivables through a related or an affiliated company? N</p> | <p>8. Is this corporation subject to franchise tax but not N.C. income tax because the corporation's income tax activities are protected under P.L. 86-272? (If yes, attach explanation) N</p> <p>9. Officers' names and addresses:</p> <p> President</p> <p> Vice-President</p> <p> Secretary</p> <p> Treasurer</p> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Explanation of Changes for Amended Return:

Sch. L Balance Sheet per Books

| Assets | Beginning of Tax Year | | End of Tax Year | |
|-----------------------------------------------------------------------|-----------------------|-----|-----------------|-----|
| | (a) | (b) | (c) | (d) |
| 1. Cash | | 0 | | 0 |
| 2. a. Trade notes and accounts receivable | 0 | | 0 | |
| b. Less allowance for bad debts (| 0) | 0 | 0) | 0 |
| 3. Inventories | | 0 | | 0 |
| 4. a. U.S. government obligations | | 0 | | 0 |
| b. State and other obligations | | 0 | | 0 |
| 5. Tax-exempt securities | | 0 | | 0 |
| 6. Other current assets (Attach end of year sch) | | 0 | | 0 |
| 7. Loans to shareholders | | 0 | | 0 |
| 8. Mortgage and real estate loans | | 0 | | 0 |
| 9. Other investments (Attach end of year sch) | | 0 | | 0 |
| 10. a. Buildings and other depreciable assets | 0 | | 0 | |
| b. Less accumulated depreciation (| 0) | 0 | 0) | 0 |
| 11. a. Depletable assets | 0 | | 0 | |
| b. Less accumulated depletion (| 0) | 0 | 0) | 0 |
| 12. Land (net of any amortization) | | 0 | | 0 |
| 13. a. Intangible assets (amortizable only) | 0 | | 0 | |
| b. Less accumulated amortization (| 0) | 0 | 0) | 0 |
| 14. Other assets (Attach end of year sch.) | | 0 | | 0 |
| 15. Total Assets | | 0 | | 0 |
| Liabilities and Shareholders' Equity | | | | |
| 16. Accounts payable | | 0 | | 0 |
| 17. Mortgages, notes, and bonds payable in less than 1 year | | 0 | | 0 |
| 18. Other current liabilities (Attach end of year schedule) | | 0 | | 0 |
| 19. Loans from shareholders | | 0 | | 0 |
| 20. Mortgages, notes, and bonds payable in 1 year or more | | 0 | | 0 |
| 21. Other liabilities (Attach end of year schedule) | | 0 | | 0 |
| 22. Capital stock: a. Preferred Stock | 0 | | 0 | |
| b. Common Stock | 0 | 0 | 0 | 0 |
| 23. Additional paid-in capital | | 0 | | 0 |
| 24. Retained earnings - Appropriated (Attach end of year schedule) | | 0 | | 0 |
| 25. Retained earnings - Unappropriated | | 0 | | 0 |
| 26. Adjustments to shareholders' equity (Attach end of year schedule) | | 0 | | 0 |
| 27. Less cost of treasury stock | (| 0) | (| 0) |
| 28. Total Liabilities and Shareholders' Equity | | 0 | | 0 |

Sch. M-1 Reconciliation of Income (Loss) per Books with Income per Return

| | | | |
|----------------------------------------------------------------------|------|-------------------------------------------------------------------------|------|
| 1. Net income (loss) per books | 0 | 7. Income recorded on books this year | |
| 2. Federal income tax | 0 | not included on this return: | |
| 3. Excess of capital losses over capital gains | 0 | Tax-exempt interest | \$ 0 |
| 4. Income subject to tax not recorded on books this year: | 0 | | |
| 5. Expenses recorded on books this year not deducted on this return: | | 8. Deductions on this return not charged against book income this year: | |
| a. Depreciation | \$ 0 | a. Depreciation | \$ 0 |
| b. Charitable Contributions | \$ 0 | b. Charitable Contributions | \$ 0 |
| c. Travel and entertainment | \$ 0 | | |
| 6. Add Lines 1 through 5 | 0 | 9. Add Lines 7 and 8 | 0 |
| | 0 | 10. Income | 0 |

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Legal Name (First 10 Characters)

MARBLE KI

Federal Employer ID Number

Sch. M-2 Retained Earnings Analysis

| | | | |
|---------------------------------|---|---------------------------|---|
| 1. Balance at beginning of year | 0 | 5. Distributions: a. Cash | 0 |
| 2. Net income (loss) per books | 0 | b. Stock | 0 |
| 3. Other increases: | | c. Property | 0 |
| | | 6. Other decreases: | 0 |
| | 0 | 7. Add Lines 5 and 6 | 0 |
| 4. Add Lines 1, 2, and 3 | 0 | 8. Balance at End of Year | 0 |

Sch. N Nonapportionable Income

| (A) Nonapportionable Income | (B) Gross Amounts | (C) Related Expenses | (D) Net Amounts | (E) Net Amounts Allocated Directly to N.C. |
|----------------------------------------------|-------------------|----------------------|-----------------|-----------------------------------------------|
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| 1. Nonapportionable Income | | | 0 | |
| 2. Nonapportionable Income Allocated to N.C. | | | | 0 |

Explanation of why income listed is nonapportionable income rather than apportionable income:

Sch. O Computation of Apportionment Factor

Part 1. Domestic and Other Corporations Not Apportioning Franchise or Income Outside N.C. 100.0000%

Part 2. Corporations Apportioning Franchise or Income to N.C. and to Other States

State Net Loss Apportionment

Are you electing to apportion receipts based on income-producing activities due to a State Net Loss?

Yes No

| | 1. Within North Carolina | 2. Total Everywhere |
|--------------------------------------------------------------------------|--------------------------|---------------------|
| 1. Gross Receipts Subject to Apportionment | 0 | 0 |
| 2. Gross Rents Subject to Apportionment | 0 | 0 |
| 3. Gross Royalties Subject to Apportionment | 0 | 0 |
| 4. Dividends Subject to Apportionment | 0 | 0 |
| 5. Interest Subject to Apportionment | 0 | 0 |
| 6. Other Apportionable Income | 0 | 0 |
| 7. Share of Receipts from Noncorporate Entities Subject to Apportionment | 0 | 0 |
| 8. Total | 0 | 0 |
| 9. N.C. Apportionment Factor | | 0.0000% |

Part 3. Special Apportionment Formulas 0.0000%

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