Form 990

Return of Organization Exempt From Income Tax Under seaton 501(a), 527, or 4647(c)(1) of the internal Revenue Code (except black lung

CMB No. 1845-0047

2011

Open to Public

benuit trust or private (cundation) Inspection ► The organization may have to use a copy of this return to satisfy state reporting requirements. Department of the Treasury Internal Revenue Service 20 12 03/31 2011, and ending For the 2011 calendar year, or tax year beginning D Employer Identification cumber O Name of organization Raily Foundation, Inc. Check if applicable: Doing Business As Children's Cencer Research and Family Assistance Foundation 20-1950849 Accress change E Telephone comber Number and street for P.O. box if mail is not delivered to street address: Roden/suite Name change 404-847-1270 Suite 370 5776 Glenridge Orive, Building B Initial return City or town, state of country, and ZIP + 4 Terestrated 1,811,400 G Gross receipts 8 Sandy Springs, GA 30328 Amended return H(a) is this a group return for attlistant . Yes V No Application pending P Name and address of principal officer: Hilis Are all affiliates included? 🔲 Yes 🔲 Ho Daan Crowe, Same as C above ij "No." attech a list. (see instructions)) 4 (605021 (PO.) 4947(60)(1) or 527 **□** 501(a) (**[**] 50(16)(3) Tex-exempt status Hist Group exemption number 🕨 www.rallyfoundation.org Wahulter > ĞA 2005 M State of legal demicile: L Year of formation: Form of argentration:

Corporation □ Trust □ Association □ Other ► Summery Part I Briefly describe the organization's mission or most significant activities: Rally Foundation, a 501(c)(3) non-profit organization, empowers volunteers across the country to raise swareness and funds for childhood cancer research to find batter treatments with fewer long-term side effects and, ultimately, cures. **Lethitles & Governance** Check this box ▶☐ If the organization discontinued its operations or disposed of more than 25% of its nat assets. 10 Number of voting members of the governing body (Part VI, line 1a) 9 Number of Independent voting members of the governing body (Part VI, line 1b) 4 7 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 8 3,500 B Total number of volunteers (estimate if necessary) Û **7**a Total unrelated business revenue from Part VIII, column (C), line 12 Ð 76 Net unreleted business taxable income from Form 990-T, line 34 Current Year Prior Year 1,515,208 1,153,650 Contributions and grants (Part VIII, line 1h) . Terrentee Program service revenue (Part VIII, line 20) 5,869 3,102 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . (165,524) (186,505) Other revenue (Part VIII. column (A). Ines 5, 6d, 8c, 9c, 10c, and 11e) . 11 1,352,788 Total revenue-add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,002,820 12 692,769 770,423 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 13 D Benefits paid to or for members (Part IX, column (A), line 4) . 14 151,853 Salaries, other compensation, employee benefits (Part IX, column (A), lines 6-10) 139,907 15 Professional fundraising fees (Part IX, column (A), line 11e) . 18a CONTRACTOR OF THE PROPERTY OF Total fundraising expenses (Part IX, column (D), line 25) 83.R11 118,725 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 1.041.001 916,478 Total expenses. Add fines 13-17 (must equal Part IX, column (A), fine 25) 18 88.344 311,785 Revenue less expenses. Subtract line 18 from line 12 19 End of Your Beginning of Current Year 947,897 738,739 Total assets (Part X, line 16) 20 493,462 ERR GRO Total liabilities (Part X, line 26) . 21 454,436 142,650 Net assets or fund balances. Subtract line 21 from line 20 Signature Block Part II Under penaltics of perjuly. I declare that I have examined this return, including eccompanying echadules and statements, and to the best of my knowledge and belief. It is true, correct, and complete. Declaration of preparer feath than officer) is based on all information of variety preparer has any knowledge. Sign Here Type or oriet name and title Print/Type preparer's name Properer's eigneture Check 🔲 4 Paid Preparer Firm's EIN >

May the IRS discuss this return with the preparer shown above? (see instructions)

Firm's name >

Frants address 🕨

Use Only

Phone no.

Yes Nao

Form 990 (2011)

n 980		
	(2011) Statement of Program Service Accomplishments Statement of Program Service Accomplishments	
rt II	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III	<u> L</u>

	Rally Foundation, a 501(c)(3) non-pront drgamization, emperiors for childhood cancer research to find better treatments with fewer long-term side effects and, ultimately, cures.	
,		
	Did the organization undertake any significant program services during the year which were not listed on the	
2	prior Form 990 or 990-EZ?	✓ No
	and the state of the same of t	
3	and the experience copy conduction of make significant Changes in now it contacted any pro-	
•	services?	⊘ No
	If "Yes," describe these changes on Schedule O.	seument h
4	to a serious for each of the thing lattices (II(II(IIII) Scivices, Go 1000	mount (
	expenses. Section 501(c)(3) and 501(c)(4) digalizations and december 15 miles and expenses, and revenue, if any, for each program service reported.	
	(Code:) (Expenses \$ 763,025 including grants of \$ 720,420) (Revenue \$	
4a	And the second County Property	
	Rally Foundation Research Grants Program: Rally Foundation supports all phases of childhood cancer research from science at the bench (very early research) to	
	Shoot II and III aird making triple including targeted therapies. DNA Studies and Sulvivorsity Studies. Truly 1 Contracts	
	the day had a hale find the collaborative recentch of more than 5,000 physicians, scienusis and new sec at 200	
	to a place notice wide. These physicians and murses treat more than 90% of the Children in the US wan canter. Enjury	
	and of these children are enrolled in clinical trials. Rally gives research grants once a year during us usual year	
	fourth quarter - January through March. In 2011-2012, Rally Foundation funded 45 Such grants, uniquigit 5 total	
	grants to over \$3,000,000 supporting 116 research projects.	
4b	(Code:) (Expenses \$163,566 including grants of \$0) (Revenue \$	
40)
40	Dath: Coundation Family Emergency Find:)
40	Raily Foundation Family Emergency Fund: Raily Foundation has established a resource for parents whose children are currently going through treatment)
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40	Raily Foundation Family Emergency Fund: Raily Foundation has established a resource for parents whose children are currently going through treatment)
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40	Raily Foundation Family Emergency Fund: Raily Foundation has established a resource for parents whose children are currently going through treatment	
	Raity Foundation Family Emergency Fund: Raity Foundation has established a resource for parents whose children are currently going through treatment for cancer and need additional help with financial responsibilities.	
	Raily Foundation Family Emergency Fund: Raily Foundation has established a resource for parents whose children are currently going through treatment)

Form **990** (2011)

orm 990		- T.	Yes	No
Part I	Unecklist of nequilion objects foundation? If "Vos."	+		<u> </u>
1 !		1	√	
	complete Schedule A	2	✓	
3	Did the organization engage in direct or indirect political campaign downwards	3		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying download.	4		✓
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives members by a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives members by a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives members by a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives members by a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives members by a section 501(c)(6) organization that receive	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets.	8	_	1
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10	_	1
11	If the organization's answer to any of the following questions is "Yes," then complete Scriedule B, Faits VI,			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If Tres,	11a	1	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	110		1
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	110		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X fold the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	116	\top	1
	a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12	<u>,</u> ✓	
ŀ	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12	$\overline{}$	1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	_	√
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14	╬	
ļ	bid the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14	ь	1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	10	5	1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	1	7	1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII lines 1c and 8a? If "Yes." complete Schedule G, Part II.	1	в ,	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	1	-	1
20	 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H. b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 	20	b	90 (20

art l	Checklist of Required Schedules (continued)	<u> </u>	res	No
	es and other assistance to any government or organization			
21	Did the organization report more than \$5,000 or grants and other assistance to any and II	21	✓	
22	Did the organization report more than \$5,000 of grants and other assistance to members as a second of the complete schedule I. Parts I and III.	22		✓
23	organization's current and former officers, directors, trustoss, t	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of the state \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	24a 24b		1
C	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
	" - Labelt of locator for bonds outstanding at any time during the year?	24d		1
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in all excess between the section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in all excess between the section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in all excess between the section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in all excess between the section of the organization engage in all excess between the section of the organization engage in all excess between the section of the organization engage in all excess between the section of the organization engage in all excess between the section of the organization engage in all excess between the section of the organization engage in all excess between the section of the organization engage in all excess between the section of the organization engage in all excess between the section of the organization engage in all excess between the section of the organization engage in all excess between the section of the organization engage in all excess between the section of the organization engage in all excess between the section of the organization engage in all excess between the section of the organization engage in all excess between the section of the organization engage in all excess between the section of the organization engage in all excess between the organization engage in	25a		/
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled antity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		/
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	28a		
a b	Schodule I Part IV	28b		1
C	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	200		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	T	1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	1 32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	34		1
35a	Bild the appreciant have a controlled entity within the meaning of section 512(b)(13)?	35	<u>a </u>	1
_	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	33	b	1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes " complete Schedule R, Part V, line 2	30	<u>;</u>	✓
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? If "Yes," complete Schedule R,	3	,	/
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	<u> </u>		90 (20
		-	orm 3	730 (2

Part \	Statements Regarding Other IRS Filings and Tax Compliance				
Tare	Check if Schedule O contains a response to any question in this Part V	<u>····</u>		Yes	No
		al 7	\neg		
1a	=		- 1		
b			ŀ		
С	Did the organization comply with Dackup Withholding fules for reportable payment		10		
	the description windings to Drize Willies:	1			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	a 7	1		
			2b	✓_	L
b	Statements, filed for the calendar year ending with of within the year end end of the calendar year ending within the year end end of the year end of the year.	ctions)			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to simple the year? Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		✓
3a	Did the organization have unrelated business gross income of \$1,000 of these configuration and Schedule O. If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	[3b		<u> </u>
b)(1101 GG.110111)			
4a	At any time during the calendar year, did the organization have an interest and count, or over, a financial account in a foreign country (such as a bank account, securities account, or over, a financial account in a foreign country (such as a bank account, securities account, or over, a financial account in a foreign country (such as a bank account, securities account, or over, a financial account in a foreign country (such as a bank account, securities account, or over, a financial account in a foreign country (such as a bank account, securities account, or over, a financial account in a foreign country (such as a bank account, securities account, or over, a financial account in a foreign country (such as a bank account, securities account, or over, a financial account in a foreign country (such as a bank account, securities account, or over, a financial account in a foreign country (such as a bank account).	other financial	į	1	
	account)?		4a		1
			ĺ		
b	Conjunctions for filing requirements for Form 1D F 90-22.1, Report of Foreign Bank and Financial	Accounts.			
	and the approximation a porty to a prohibited tax shelter transaction at any time during the tax ye	sar	5a	ـــــ	1
5a	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter to	ransaction?	5b	ـــــ	1
b			5c	—	
6a	one the organization have annual gross receipts that are normally greater than \$100,000.), and did the	_	1	1,
	the state of the second state of the state o		6a	—	- ✓
b	organization solicit any contributions that were not tax december. If "Yes," did the organization include with every solicitation an express statement that such c	ontributions or			
_	=:tto warp not tay deductible?		6b	┼	┿
7	2	11	١.		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and p	artly for goods			
	and services provided to the Davor?		7a		+
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	+	+
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property to	r which it was	7c		1
	required to file Form 8282?	7d	10	+	
d	If "Yes," indicate the number of Forms 8282 filed during the year		7e		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	it contract?	7f		17
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benef	1800 as required?	7g		┤ `
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8	a Form 1098-C?	7h		+
r	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file	3) supporting			1
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(v a sponsoring			
	organizations. Did the supporting organization, or a donor advised fund maintained by	y a spondoning	8		
	organization, have excess business holdings at any time during the year?		Ť	1	7 7 7
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?		9a	,	
8			9k		
40	Section 501(c)(7) organizations. Enter:			T	
10	to at the second analysis and included on Part VIII line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .	10b] .		
11	Section 501(c)(12) organizations. Enter:		7		
	Gross income from members or shareholders	11a			
	Gross income from other sources (Do not net amounts due or paid to other sources				
	against amounts due or received from them.)	11b	_ _		
12	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu	of Form 1041?	12	<u>a</u>	
	o If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	-1		.
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		1	\pm	
	a. Is the organization licensed to issue qualified health plans in more than one state?		13	13	
	Note. See the instructions for additional information the organization must report on Schedule	e U.			
	Enter the amount of reserves the organization is required to maintain by the states in which	14051	1		- 1
	the organization is licensed to issue qualified health plans	13b	\dashv		
	c Enter the amount of reserves on hand	130	14	<u>_</u>	1
14	Did the organization receive any payments for indoor tanning services during the tax year?	Schedule O		4b	- `
	b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in S				200 00

Part \	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Schedule O contains a response to any question in this Part VI	ee insi	truction	ons.
Section	on A. Governing Body and Management	—	V 1	
		-	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			ا د العالم
	committee, explain in Schedule O.			\$ 1.
	Enter the number of voting members included in line 1a, above, who are independent . 1b 9			
р 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?	2	1	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		_
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6		✓
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?	7a		✓
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Ý	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	✓_	 -
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 in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.) Yes	No
		10a	165	1
10a	Did the organization have local chapters, branches, or affiliates?	Iua		-
Ь	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		-
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	1		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	V	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
•	describe in Schedule O how this was done	12c	1	ļ
13	Did the organization have a written whistleblower policy?	13	✓	
14	Did the organization have a written document retention and destruction policy?	14	/	<u> </u>
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?	4-		
а	The organization's CEO, Executive Director, or top management official	15a 15b		
þ	Other officers or key employees of the organization	130	+	1
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			1
16a	with a taxable entity during the year?	16a		1
b	the state of the s			
	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?	16b		
8004	ion C. Disclosure	1,00	1	J
17	List the states with which a copy of this Form 990 is required to be filed ► AZ, CT, FL, GA, NH, NJ, NY, PA, SC	C, TN,	UT, V	A, WA
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501	(c)(3)	s only
	☐ Own website ☑ Another's website ☑ Upon request			••
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict and financial statements available to the public during the tax year.			policy
20	State the name, physical address, and telephone number of the person who possesses the books and records	3 Of th	0- 446	А
	organization: ► Christi Kruse, 5775 Glenridge Drive, Bldg. B, Suite 370, Sandy Springs, GA 30328 404-847-1270 or 7	,,,-3/	J-770	<u> </u>

Form 990 (2011	1)	Turkes Van Empleyoog His	theet Compensated	Employees, and
Part VII	Compensation of Officers, Director	irs, Trustees, Key Employees, Fil	11691 Combonday	and the second
	Independent Contractors	to the Bort VII		

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

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

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

Check this box if neither the organization	nor any related	i orga	niza	tior	100	mper	1S8	ted any current	officer, director,	or trustee.
(A) Name and Titte	(B) Average hours per week (describe	(do no box, u office	ot che intess r and	Positi eck r per a di	tion nore son rect	than o is both artrust	ne an	(D) Reportable compensation from the	(E) Reportable compensation from related comanizations	(F) Estimated emount of other compensation
	hours for related organizations in Schedute O)	Individual trustee or director	Institutional trustee	Officer	Kay employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Dean Crowe - Founder & CEO	45	1		1				108,837	0	11,000
(2) Christi Kruse - Treasurer	15	1						12,230	0	
(3) Peggy Fulghum - Chair	5	1							0	
(4) Carole Anne Orsborn - Secretary	5	1							0	
(5) Reid Crowe - Founder	5	1							0	
(6) Rick Fossum - Creative Director	5	1							0 0	
(7) Blaine Hess - Vice-president	5	1							0	
(8) Joy Posthauer - Vice-president	5	1							0 0	
(9) Kevin Isakson - Vice-president	5	1							0 0)
(10) Larry Deist - Vice-president	5	1							0	0
(11)										
(12)										
(13)										
(14)										Form 990 (26

) 066 mo ⁻		0	_	d noit	ziui	ebic	p e c	mon	acrosation t	Total number of independent confrom 1500 Total more than \$100,001 Total	2
	above) who	batzil azont c	ot b	ətimil	ton	1 10	<u>ц</u> .	nibid	3010 320100		
	secrices to	nondupsen							address	Name and business	
(C) Compensation	(6	3)				21.116	one	suadu		Complete this table for your five highe compensation from the organization. I year.	
xst s'noitszinsgro er	eived more than It nithiw to thiw	octors that reconding	Stra	oo ine	pue	də	pui :	bətsz	et compen	ion B. Independent Contractors Complete this table for your five highe	t P
									504 4 :110	for services rendered to the organization	
subiv	ibni 10 noitasin	unrelated orga	VUE	s mori	noi	its2	uou	шоэч		· · · · · · · · · · · laubivibni	S
yons au u	mpensation flor Schedule J for	and other cor complete	noit ,esY	suad Seuas	.000 iwo:	o el 50,0	det S18	repor than	the sum of a greater	employee on line 1a? If "Yes," complete For any individual listed on line 1a, is is organization and related organization	Þ
sated 3	ghest compens	nployee, or hi	uə /	e, key idual	este: vibn	uri ii As	ns. ' OL	ector,	officer, dir	Did the organization list any former	3
N SOA										reportable compensation from the organ	 Z
ło 000,	more than \$100	who received	(9۸	d abo	÷ 912il	es.	041	ot be	timil ton tur	Total (add lines 1b and 1c) Total number of individuals (including b	P
00,11	LS	119,08	∢ ◀		•			A noi	t VII, Sect	Total from continuation sheets to Par	o 1p
00'11	L	90'611	4	• •	· —	· ·		· ·		lstot-du?	
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noitasinagno bətalər bna enoitasinagno		noitssinsgro (OSIM-6eor/S-W) je	Highest compensated employee	employee	Ser	Institutional trustee	Individual trustee or director	not enor betales snottasinagro elubertos ni (O		
onher noisensamoo front	related organizations (W-2/1099-MISC)	from the	Former	E E	10139 X 8	Officer	1 =-		hours per week (describe		
to Invoms	Reporable mon noisenegmo:	Reportable compensation	lu	no nedi S both a	SI UOS	Deuz	ssəli	box, ur	9gs19vA	(A) 9lii) bns 9msN	
(₹) betsmits∃	(3)	(a)	1 9	oo ucq		ijisoʻ			(8)	\ \'	

Part	VIII	Statement of Revenue		(4)	(8)	(C)	(D)
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
9 0	1a	Federated campaigns	1a 35,354				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b 0				
2 8	c	Fundraising events	1c 796,652				
it s	ď	Related organizations	1d 0				
S.E	е	Government grants (contributions)	1e 0				
Sign	f	All other contributions, gifts, grants,					
F E		and similar amounts not included above		San San San			
ĒÖ	g	Noncash contributions included in lines 1a	-1f: \$ 207,670				
a Co	h	Total. Add lines 1a-1f	<u> ▶</u>	1,515,208			
음			Business Code				
Ven	2a						
Program Service Revenue	b						
/ice	С					<u> </u>	
Sel	d						
E	е				-		<u> </u>
g	f	All other program service reven				1	
<u> </u>	g	Total. Add lines 2a-2f	<u> </u>			1	
	3	Investment income (including		2.402			3,102
		and other ourmen arrivaries,		3,102		<u> </u>	
	4	Income from investment of tax-exe					
	5	Royalties	il (ii) Personal		-		
			(II) (II) Fersonal	-			
	6a	Gross rents		4		A STATE	
	b	Less: rental expenses		-			
	С	Rental income or (loss)		4			
	_ d	Net rental income or (loss) . Gross amount from sales of (i) Secur	ities (ii) Other				
	7a	Ologa dilibolit ilolli adica di	(11) 011.01				
	١.	assets other than inventory					
	b	Less: cost or other basis and sales expenses .					
		· · · · · · · · · · · · · · · · · · ·		-			
	C					1	
	d	Net gain or (loss)	· · · · · · · · · · · · · · · · · · ·		 		
ā	8a	Gross income from fundraising					
eune	Oa.	events (not including \$ 796,6					
Š		of contributions reported on line		Albert Here			
Œ		See Part IV, line 18		o			
Other Reve	b			⊣			
Ō	1 -		· '	(165,524)		(165,524)
	9a	Gross income from gaming acti					
	"	See Part IV, line 19	· a				
	Ь						
		At all and and the sale from many					
	10a	Gross sales of inventory,	less				
		returns and allowances	· a				
	l t	Less: cost of goods sold	. b				
		Net income or (loss) from sale	s of inventory $ ightharpoonup$			1	
		Miscellaneous Revenue	Business Code				
	112	3					
	t	·			 		
	(
			•		- 		A STATE OF THE STA
	100	Total. Add lines 11a-11d Total revenue. See instruction		1,352,78	36		1,352,786
	12	i Ofai Leveline. See insurction		1,002,71			- 000 004

Part IX Statement of Functional Expenses

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

_	Check if Schedule O contains a respons				
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	720,419	720,419		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	50,004	50,004		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	86,785	80,673	2,445	3,667
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 8	Other salaries and wages	54,695	31,101	12,869	10,725
9	Other employee benefits	358	281	10	67
10	Payroll taxes	10,015	6,491	1,855	1,669
11	Fees for services (non-employees):				
	Management				
	-				
b	Legal	17 270	11,057	3,284	2,938
C	Accounting	17,279	11,057	3,204	2,530
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	30,738	26,895	1,850	1,993
12	Advertising and promotion				
13	Office expenses	19,804	11,892	2,563	5,349
14	Information technology	566	479	0	87
15	-				
16	Occupancy	45.354	15 114	0	240
17	Travel	15,354	15,114		240
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	9,541	9,471	0	70
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	3,236	2,071	615	550
23	Insurance	3,676	2,353	698	625
24	Other expenses, Itemize expenses not covered	****			
4	above. (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column			فتعينا بإنعماء فتنا	
	(A) amount, list line 24e expenses on Schedule O.)				
_	Cumpling	12,589	8,292	0	4,297
a	Supplies	5,942			
b	Printing	3,342			1,5,5
C	***************************************				
d	All				
е	All other expenses	1 212 222	220 522	20 400	20 240
25	Total functional expenses. Add lines 1 through 24e	1,041,001	976,593	26,189	38,219
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)				
			·····		Form 990 (2011)

Page 12	Page	1	2
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	XI Reconciliation of Net Assets				
Part	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI	<u>· · · </u>	<u>· · · </u>	<u>· · · </u>	ᆜ
		1		1,352	
1				1.041	
2	- A Court agust Port IV column (A) (Ine 25)	_			,785
3	- Cubtract line 2 from line 1				,650
4	r the lease of bosioping of year (must equal Part X, line 33, column (1))	_			0
5		1			
6	Other changes in net assets of fund balances (explain in Control of S). Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	<u></u>		454	,435
Part	- Departing				П
	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII	<u>· · · · · · · · · · · · · · · · · · · </u>	一一	Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain Schedule O.		2a		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2b	1	<u> </u>
b				Ť	
С	the time do or 3h does the organization have a committee that assumes responsibility	ant?	2c	✓	Ì
	If the organization changed either its oversight process or selection process during the tax year, sapar				
d	issued on a senarate basis, consolidated basis, or both:	were			
3a	Separate basis Consolidated basis Both consolidated and separate basis As a result of a federal award, was the organization required to undergo an audit or audits as set for the second of the sec		3a		1
b	and the second state of the required audit of audits? If the organization did not under	jo the dits	3b	00	
	required about of account, and a second of		For	m 991	0 (2011)