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Form 990-EZ

# Short Form Return of Organization Exempt From Income Tax

Department of the Treasury  
Internal Revenue ServiceUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
(except black lung benefit trust or private foundation)► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form  
► The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150

2009

Open to Public  
Inspection

A For the 2009 calendar year, or tax year beginning April 1, 2009, and ending March 31, 2010

B Check if applicable  
 Address change  
 Name change  
 Initial return  
 Terminated  
 Amended return  
 Application pending

C Name of organization

Cystic Fibrosis Scholarship Foundation, Inc.

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

1555 Sherman Ave. #116

Room/suite

City or town, state or country, and ZIP + 4

Evanston, IL 60201

D Employer identification number

36-4300651

E Telephone number

847-328-0127

F Group Exemption  
Number ►

► Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting Method:  Cash  Accrual  
Other (specify) ►

I Website: ► cfscholarship.org

H Check ►  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)J Tax-exempt status (check only one) —  501(c)(3) ► (insert no.)  4947(a)(1) or  527K Check ►  if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ 184944

## Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

1	Contributions, gifts, grants, and similar amounts received . . . . .	1	122609
2	Program service revenue including government fees and contracts . . . . .	2	
3	Membership dues and assessments . . . . .	3	
4	Investment income . . . . .	4	3938
5a	Gross amount from sale of assets other than inventory . . . . .	5a	
b	Less: cost or other basis and sales expenses . . . . .	5b	
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .	5c	
6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ► <input type="checkbox"/>		
a	Gross revenue (not including \$ 37156 of contributions reported on line 1) . . . . .	6a	57447
b	Less: direct expenses other than fundraising expenses . . . . .	6b	41479
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . . . . .	6c	15968
7a	Gross sales of inventory, less returns and allowances . . . . .	7a	
b	Less: cost of goods sold . . . . .	7b	
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	7c	
8	Other revenue (describe ► tax refund) . . . . .	8	1000
9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ► 9 . . . . .	9	143515
10	Grants and similar amounts paid (attach schedule) . . . . .	10	91110
11	Benefits paid to or for members . . . . .	11	
12	Salaries, other compensation, and employee benefits . . . . .	12	
13	Professional fees and other payments to independent contractors . . . . .	13	
14	Occupancy, rent, utilities, and maintenance . . . . .	14	
15	Printing, publications, postage, and shipping . . . . .	15	6696
16	Other expenses (describe ► accounting, subscriptions, website, miscellaneous) . . . . .	16	3206
17	<b>Total expenses.</b> Add lines 10 through 16 ► 17 . . . . .	17	101012
18	Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	18	42503
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . .	19	241607
20	Other changes in net assets or fund balances (attach explanation) . . . . .	20	
21	Net assets or fund balances at end of year. Combine lines 18 through 20 ► 21 . . . . .	21	284110

## Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22	241607	22 284110
23		23
24		24
25	241607	25 284110
26		26
27	241607	27 284110

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat No 10642I

Form 990-EZ (2009)

G9



## Part V Other Information (Note the statement requirements in the instructions for Part V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . . . .	33	✓
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes . . . . .	34	✓
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? . . . . .	35a	✓
b If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .	35b	
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .	36	✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a	37a	
b Did the organization file Form 1120-POL for this year? . . . . .	37b	✓
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? . . . . .	38a	✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .	38b	
39 Section 501(c)(7) organizations. Enter:	39a	
a Initiation fees and capital contributions included on line 9 . . . . .	39b	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ► 0 ; section 4912 ► 0 ; section 4955 ► 0	40b	✓
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I . . . . .	40e	✓
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ► 0		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ► 0		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. . . . .		
41 List the states with which a copy of this return is filed. ► Illinois and New York		
42a The organization's books are in care of ► Mary Kay Bottorff Located at ► 1519 Hinman Ave Evanston, IL	Telephone no. ► 847-328-0127 ZIP + 4 ► 60201	
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	42b	✓
If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	42c	✓
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . . . If "Yes," enter the name of the foreign country: ►		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ► 43		NA
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	44	✓
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	45	✓

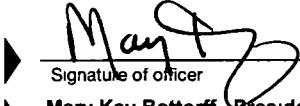
**Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46–49b and complete the tables for lines 50 and 51.

<b>46</b>	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	<b>Yes</b>	<b>No</b>																																								
<b>47</b>	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	<b>46</b>	<b>✓</b>																																								
<b>48</b>	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<b>47</b>	<b>✓</b>																																								
<b>49a</b>	Did the organization make any transfers to an exempt non-charitable related organization?	<b>48</b>	<b>✓</b>																																								
<b>b</b>	If "Yes," was the related organization a section 527 organization?	<b>49a</b>	<b>✓</b>																																								
<b>50</b>	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."	<b>49b</b>	<b>✓</b>																																								
<table border="1"> <tr> <th>(a) Name and address of each employee paid more than \$100,000</th> <th>(b) Title and average hours per week devoted to position</th> <th>(c) Compensation</th> <th>(d) Contributions to employee benefit plans &amp; deferred compensation</th> <th>(e) Expense account and other allowances</th> </tr> <tr> <td><b>None</b></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>		(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances	<b>None</b>																																			<b>f</b>	<b>Total number of other employees paid over \$100,000</b>
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances																																							
<b>None</b>																																											

**51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
<b>NONE</b>		

**d** Total number of other independent contractors each receiving over \$100,000

<p>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.</p> <p><b>Sign Here</b></p> <p>►  Signature of officer</p> <p>► <b>Mary Kay Bottorff President</b> Type or print name and title</p>		<b>Date</b>
<b>Paid Preparer's Use Only</b>	<b>Preparer's signature</b>	<b>Date</b>
		<b>Check if self- employed</b> ► <input type="checkbox"/>
		<b>Preparer's identifying number (See instructions)</b>
		<b>EIN</b> ►
		<b>Phone no</b> ►
<b>May the IRS discuss this return with the preparer shown above? See instructions</b>		

**SCHEDULE A**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

Cystic Fibrosis Scholarship Foundation, Inc.

Employer identification number  
36 4300651

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

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

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 9  An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I      b  Type II      c  Type III—Functionally integrated      d  Type III—Other
  - e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**.
  - f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
  - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
    - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
    - (ii) A family member of a person described in (i) above?
    - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
  - h Provide the following information about the supported organization(s).

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

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 <b>Total.</b> Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 <b>Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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 IV.)						
11 <b>Total support.</b> Add lines 7 through 10						
12 Gross receipts from related activities, etc (see instructions)					12	
13 <b>First five years.</b> 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 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a <b>33½% support test—2009.</b> If the organization did not check the box on line 13, and line 14 is 33½% or more, check this box and stop here. The organization qualifies as a publicly supported organization		► <input type="checkbox"/>
b <b>33½% support test—2008.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33½% or more, check this box and stop here. The organization qualifies as a publicly supported organization		► <input type="checkbox"/>
17a <b>10%-facts-and-circumstances test—2009.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		► <input type="checkbox"/>
b <b>10%-facts-and-circumstances test—2008.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		► <input type="checkbox"/>
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		► <input type="checkbox"/>

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**  
 (Complete only if you checked the box on line 9 of Part I.)
**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	145030	144915	104435	127565	122609	644554
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 <b>Total.</b> Add lines 1 through 5	145030	144915	104435	127565	122609	644554
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	11500	11880	11800	22000	18900	76080
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	11500	11880	11800	22000	18900	76080
8 <b>Public support</b> (Subtract line 7c from line 6)						568474

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	145030	144915	104435	127565	122609	644554
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	782	5656	8116	2911	3938	21403
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	782	5656	8116	2911	3938	21403
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 <b>Total support.</b> (Add lines 9, 10c, 11, and 12)	145812	150571	112551	130476	126547	665957
14 <b>First five years.</b> 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**

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	85 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	61 %

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	3 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	3 %
19a <b>33 1/3 % support tests—2009.</b> 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 ► <input checked="" type="checkbox"/>		
b <b>33 1/3 % support tests—2008.</b> 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 ► <input checked="" type="checkbox"/>		
20 <b>Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

## **Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No 1545-0047

2009

**Open To Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

**Name of the organization**

**Employer identification number**

Cystic Fibrosis Scholarship Foundation, Inc

36 | 4300651

**Part I** **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

**a**  Mail solicitations      **e**  Solicitation of non-government grants  
**b**  Internet and email solicitations      **f**  Solicitation of government grants  
**c**  Phone solicitations      **g**  Special fundraising events  
**d**  In-person solicitations

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

## Illinois and New York

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

	(a) Event #1 <u>Golf Tourney</u> (event type)	(b) Event #2 <u>Wine Tasting</u> (event type)	(c) Other events (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts . . . . .	11557	83046	94603
	2 Less: Charitable contributions . . . . .		37156	37156
	3 Gross income (line 1 minus line 2) . . . . .	11557	45890	57447
Direct Expenses	4 Cash prizes . . . . .			
	5 Noncash prizes . . . . .			
	6 Rent/facility costs . . . . .	2550	4500	7050
	7 Food and beverages . . . . .	2423	21634	24057
	8 Entertainment . . . . .			
	9 Other direct expenses . . . . .	577	9795	10372
	10 Direct expense summary. Add lines 4 through 9 in column (d) . . . . .			( 41479 )
	11 Net income summary. Combine line 3, column (d), and line 10 . . . . .			15968

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

	(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 . . . . .			-0-
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 Combine line 1, column d, and line 7 . . . . .			

9 Enter the state(s) in which the organization operates gaming activities: . . . . .	Yes	No
a Is the organization licensed to operate gaming activities in each of these states? . . . . .	9a	
b If "No," explain: . . . . .		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . .	10a	
b If "Yes," explain: . . . . .		
11 Does the organization operate gaming activities with nonmembers? . . . . .	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . .	12	

	Yes	No		
<b>13</b> Indicate the percentage of gaming activity operated in	13a	%	13b	%
a The organization's facility				
b An outside facility				
<b>14</b> Enter the name and address of the person who prepares the organization's gaming/special events books and records.	<p>Name ► _____</p> <p>Address ► _____</p>			
<b>15a</b> Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a			
b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____				
c If "Yes," enter name and address of the third party:				
Name ► _____				
Address ► _____				
<b>16</b> Gaming manager information.				
Name ► _____				
Gaming manager compensation ► \$ _____				
Description of services provided ► _____				
<input type="checkbox"/> Director/officer	<input type="checkbox"/> Employee	<input type="checkbox"/> Independent contractor		
<b>17</b> Mandatory distributions.	17a			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?				
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____				

## Cystic Fibrosis Scholarship Foundation, Inc

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School	CityState	Last	First	Amount
Adrian College	Adrian, MI 49221	Erhart	Brandon	1000
Auburn University Montgomery	Montgomery, AL 36124-4023	Avery	Andrew	1000
Baylor University	Waco, TX 76798-7048	Hemphill	Emily	1000
Boston University Student Accounting Services	Boston, MA 02215	Harkey	Mitchell	1000
Brigham Young University Idaho	Rexburg, ID 83460	Baldwin	Cynthia	500
California State University Long Beach	Long Beach, CA 90840	Myers	Kellisa	1000
Calvin College	Grand Rapids, MI 49546	Boerman	Joshua	1000
Chippewa Valley Technical College	Eau Claire, WI 54701	Brantner	Rachael	1000
College of Saint Benedict/St John's University	St Joseph, MN 56374	Novak	Anna	500
Community College of Philadelphia	Philadelphia, PA 19130	Schwab	James	1000
Eastern New Mexico University	Portales, NM 88130	Plyler	Hollee	1000
Elm's College	Chicapee, MA 01013-9921	Sullivan	Andrew	1000
Florida State University	Tallahassee, FL 32306-2430	Stafford	Carolyn	1000
Franciscan University of Steubenville	Steubenville, OH 43952	Hodson	Hayli	1000
Gardner-Webb University	Boiling Springs NC 28017	Johnson	Anna	1000
Georgia Tech	Atlanta, A 30332-0460	Norowski	Nathan	1000
Gordon College	Wenham, MA 01984	Entwistle	Kristen	1000
Gustavus Adolphus College	St Peter, MN 56082	Kirkvold	Michelle	2000
Illinois State University	Normal, IL 61790-2202	Barschdorf	Ryan	1000
Indiana University	Bloomington, IN 47405-1223	Pennock	Ryan	1250
Jefferson Community College	Louisville, KY 40202	Tapper	Sondra	1000
Johnson County Community College	Overland Park, KS 66210-1299	Kittleson	Kyle	500
Kansas State University	Manhattan, KS 66506-1104	Bowser	Tyler	1000
Kansas State University	Manhattan, KS 66506-0102	Simon	Christopher	1000
Liberty University	Lynchburg, VA 24502	Van Engen	Meagan	1000
Marian College	Fond du Lac, WI 54935	Walters	Molly	1000
Marshall University	Huntington, WV 25755	Sturgeon	Jennifer	610
Marymount Manhattan College	New York, NY 10021	Flores	Travis	1000
Massachusetts College of Liberal Arts	North Adams MA 01247	Clemons	Rebecca	500
Milwaukee School of Engineering	Milwaukee, WI 53202	Steffen	Brett	1000
Minnesota State University Moorhead	Moorhead, MN 56563	Aubrey	Ryan	1000
Monroe Community College	Rochester, NY 14623	Hughes	Sean	1000
New College of Florida	Sarasota, FL 34243-2109	Benedict	Helena	1250
North Carolina State University	Raleigh, NC 27695	Willoughby	Hannah	1000
North Dakota State University	Fargo, ND 58105-6050	Malone	Abigail	1000
North Greenville University	Tigerville, SC 29688	Stokes	Jack	1000
Northern Illinois University	DeKalb, IL 60015-2898	Rooney	Colleen	1000
Office of Student Finance Attn: Fiscal Unit	Minneapolis, MN 55455-0422	Studer	Sara	1000
Olivet Nazarene University	Bourbonnais, IL 60914-2345	Griffes	Joshua	1000
Onondaga Community College	Syracuse, NY 13215	Losier	William	2000
Ozaek Technical Community College	Springfield, MO 65802	Meier	Nicole	1000
Patrick Henry College	Purcellville, VA 20132	Flath	James	1000
Penn State University	University Park, PA 16802-1220	Bergan	Suzanne	2000
Portland State University	Portland, OR 97207	Giacci	Dana	1000
Rochester Community and Technical College	Rochester, MN 55904	Determan	Elizabeth	1000
Rochester Community and Technical College	Rochester, MN 55904	Myer	Tim	1000
Savannah College of Art and Design	Savannah, GA 31402-3146	Stroop	Taylor	1000
South Dakota State University	Brookings, SD 57007	Fischer	Nicholas	500
St Louis Community College Forest Park	St Louis, MO 63110	Coker	Kelsey	1000
SUNY Fredonia	Fredonia, NY 14063	Padasak	Christine	500
SUNY Genesco	Genesco, NY 14454	Smith	Lauren	1000
Texas A & M University	College Station, TX 77842-3016	Gorman	Iva	1000
The State University of New York @ Buffalo	Buffalo, NY 14260	Osborn	Katie	1000
Thiel College	Greenville, PA 16125	Auchter	Paul	1000

Truckee Meadows Community College	Reno, NV 89512	Stempeck	Haley	1000
Tulane University	New Orleans, LA 70118	Zimmer	Mya	1000
U of California Davis	West Sacramento, CA 95798-9062	Burgess	Nicole	1000
U N C.C	Charlotte, NC 28223	Cook	Jay	1000
University of Arkansas Fort Smith	Fort Smith, AR 72913	Grimes	Tammy	500
University of Texas @ Tyler	Tyler, TX 75799	Holland	Blair	1000
University of Chicago	Chicago, IL 60637	Zielinski	Mark	2000
University of Cincinnati	Cincinnati, OH 45221-0125	Meadows	John	1000
University of Dayton	Dayton, OH 45469	Van Tiem	Chris	500
University of Florida	Gainesville, FL 32611-4025	MacGibbon	Jacob	1000
University of Florida	Gainesville, FL 32611-4025	Mann	Kathrine	1000
University of Georgia	Athens, GA 30602-6114	Lunn	William Alexander	1000
University of Houston	Houston, TX 77204	Hernandez	Marla	1500
University of Maine	Orono, ME 04469-5703	Leighton	Katie	500
University of Massachusetts Dartmouth	North Dartmouth, MA 02747	Vigeant	Sheldon	1000
University of Minnesota, Twin Cities	Minneapolis, MN 55455-0422	Rasmussen	Kristi	1000
University of New Mexico	Albuquerque, NM 87131-001	Anglin	Kenneth	2500
University of North Carolina at Chapel Hill	Chapel Hill, NC 27599-1400	Brenton	Nicholas	1000
University of Pittsburgh	Pittsburgh, PA 15260	Furek	Jacob	500
University of Southern Maine	Portland, ME 04104	Donahue	Alexandra	1000
University of Southern Mississippi	Hattiesburg, MS 39406	Resor	Isabella	1000
University of Texas - Austin	Austin, TX 78713-7758	Hudson	Jeremiah	1500
University of Wisconsin Whitewater	Whitewater, WI 53190	Diebels	David	1000
Valencia Community College	Orlando, FL 32802	Abbott	Jeremy	1000
Vanderbilt University	Nashville TN 37203	Kharrazi	Jeremy	1000
Vermilion Community College	Ely, MN 55731	Miller	Maranda	1000
Virginia Tech	Blacksburg, VA 24061	Ornoff	Timothy	1000
Viterbo University	La Crosse, WI 54601	Weigel	Rebekah	1000
Washington State University	Pullman, WA 99164-1068	McCrea	Kevin	2500
Washington University	St Louis, MO 63130-4899	Wasserman	Natalie	2500
Wentworth Institute of Technology	Boston, MA 02115	Vigeant	Bryan	500
Western Michigan University	Kalamazoo MI 49008-5267	Caminiti	Cassandra	1000
Missouri State University	Springfield, MO 65897	Prather	Kayle	1000

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