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79700

Form

Department of the Treasury

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2009 Open to Public

Inter	VE-S		The organization may have to use a copy of this return to satisfy state reporting requ	irements	Inspection
<u>A</u>	fer the 2009	calendar y	ear, or tax year beginning 07/01/09 , and ending 06/30/10		
В	Check if applicab		C Name of organization	D Emp	loyer identification number
	Address change	use IRS label or	SKY RANCH FOUNDATION, INC]	
П	Name change	print or	Doing Business As	13	-1970360
\equiv	·	type.	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Tele	ohone number
\sqsubseteq	Initial return	See	P.O. BOX 8420	54	0-891-7201
Ш	Termination	Specific	City or town, state or country, and ZIP + 4	G Gross re	
П	Amended return	Instruc- tions.	FREDERICKSBURG VA 22404		
\equiv		F 31-	e and address of principal officer	H(a) is th	is a group return for
Ш	Application pend	ing · · · · · · · · · · · · · · · · · ·	s and address of principal officer	1 ''	ates? Yes X No
				H(b) Are	all affiliates
_	Tau auamat a	Y Y	501(c) (3) ◄ (insert no.) 4947(a)(1) or 527	┤ ""	o," attach a list (see instructions)
÷	Tax-exempt s		501(c) (3) ◀ (insert no.) 4947(a)(1) or 527	-	
_	Website: ► Type of organiza			1961	M State of legal domicile SD
	rype or organiza Part I	Summa		<u> </u>	IN State of legal dominicile DD
	T				
	1	•	he organization's mission or most significant activities	•	
Se	TC	RAISE	FUNDS FOR, AND MAKE CONTRIBUTIONS TO SKY RANCH FOR BOYS	•	
Jan					
Je.					
Activities & Governance	į.	k this box			1 00
જ	3 Numb	per of voting	members of the governing body (Part VI, line 1a)	3	33
ies	4 Numl	per of Indep	endent voting members of the governing body (Part VI, line 1b)	4	31
ĕ	5 Total	number of	employees (Part V, line 2a)	5	0
Act	6 Total	number of	volunteers (estimate if necessary)	6	75
	7a Total	gross unre	lated business revenue from Part VIII, column (C), line 12	7a	
	b Net u	inrelated bu	siness taxable income from Form 990-T, line 34	7b	0
			Prior Yo		Current Year
ø	8 Conti	ributions an	d grants (Part VIII, line 1h)	77,871	223,331
Revenue	9 Progr	ram service	revenue (Part VIII, line 2g)		
ě	10 Inves	tment incor		6,684	
Œ	11 Other	r revenue (F		1,570	
	12 Total	revenue -	add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,757	476,945
	13 Gran	ts and sımıl	ar amounts paid (Part IX, column (A), lines 1–3)	30,897	730,700
	14 Bene	fits paid to	or for members (Part IX, column (A), line 4)		
Ø	15 Salar	ies, other c	ompensation, employee benefits (Part IX, column (A), lines 5–10)		
nses	1	•	draising fees (Part IX, column (A), line 11e)		
per	b Total		expenses (Part IX, column (D), line 25) 66,725		
20 龄 per	17 Othe	•		19,996	193,759
20	18 Total	evnenses		30,893	
60	10 Pour	inua lace av		58,136	
€8	g To Heve	nue iess ex	Beginning of C		End of Year
els.	20 Total	assets (Pa	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	19,340	3,020,359
1964 1964	21 Total	liabilities (F	Part X, line 26)		
-Net Assets on	22 Net a	ssets or fu		19,340	3,020,359
	Part II		re Block		· · · · · · · · · · · · · · · · · · ·
Z			ties of perjury, I declare that I have examined this return, including accompanying schedules and statements,	and to the	best of my knowledge
Z		and belief, if	is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which	n preparer h	as any knowledge
E	i.	V	ha Allan	- 1 <i>11</i> :	-9-7010
3	911	Connet	ge of officer	Da	
пе		Signati	JUNGAN H. CAMESON Treasures	Da	ie
		Tuno			
		▼ Type of	r print name and title		Preparer's identifying number
Pa	id	Preparer's	Date Check self-	ſ	(see instructions)
		signature	/ / / / / / / / / / / / / / / / empi	oyed ▶	_ P00027615
	eparer's	Firm's name	STEVE GUY & ASSOCIATES, P.C.	EIN	▶ 20-1817360
US	se Only	if self-emplo	A 4000 COMMIDATION DOTION	Phon	e
		address, an		no	▶ 540-891-7555
-	- 45 - 1DO -1		oturn with the preparer shown above? (see instructions)		U Vaa U Na

	ribe the organization's mission. E FUNDS FOR, AND	MAKE CONTRIBUTIONS TO SK	Y RANCH FOR BOYS	•
the prior Follif "Yes," des Did the organiservices? If "Yes," des Describe the Section 501	rm 990 or 990-EZ? scribe these new services on Sche anization cease conducting, or make scribe these changes on Schedule e exempt purpose achievements for (c)(3) and 501(c)(4) organizations	te significant changes in how it conducts, any prog O. or each of the organization's three largest program and section 4947(a)(1) trusts are required to repo	gram services by expenses rt the amount of grants and	Yes X No
4a (Code) (Expenses \$ 7	78,290 including grants of \$ 73 FOR BOYS FYE JUNE 30, 20	30,700) (Revenue \$)
			·	
4b (Code) (Expenses \$	including grants of \$) (Revenue \$	
4c (Code.) (Expenses \$	including grants of \$) (Revenue \$)

_			ii.	
4d	Other program ser	vices. (Describe in Schedule O)		
	(Expenses \$	including grants of \$) (Revenue \$	

4e Total program service expenses ▶

778,290

Form **990** (2009)

2 Is to core core core core core core core cor			Yes	No
2	the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	ļ		
3 Dicc car 4 See Sci Sci Sci Sci See Note Sci See Note Sci Sci See Note Sci	mplete Schedule A	1	Х	
14 See Sci	the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
4 See Sci	d the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
Sci See not	ndidates for public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
5 Se not not the cor the cor the se Dicc cor qual 11 St 1 VIII	ection 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
not the correction of the corr	hedule C, Part II	4	.	<u> </u>
6 Dick the correct	ection 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	_		
## the core the core the core the core in	tice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	_5_	-	
7 Dick the 8 Dick cor 9 Dick X;; cor 10 Dick Dick Sci Dick of i Dick fr Dick Trep Dick The 12 Dick Sci 12A Wa If " 13 Is I 14a Dick If " 15 Dick Or The Dick The The Dick The	d the organization maintain any donor advised funds or any similar funds or accounts where donors have			
7 Dick thee 8 Dick cord of 10 Dick of 1 Dick o	e right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			v
## the ## ## ## ## ## ## ## ## ## ## ## ## ##	mplete Schedule D, Part I	6	\dashv	X
8 Dice core core core core core core core co	d the organization receive or hold a conservation easement, including easements to preserve open space,	_	l	x
9 Dic	e environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
9 Dick	d the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	ا ،		x
X; corr 10 Dic qua 11 Is 1	mplete Schedule D, Part III d the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	8		
10	or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	- 1		
10 Dice qual qual 11 Is 1 VIII Dice Sci Dice of I Dice of I	mplete Schedule D, Part IV	9		x
11	d the organization, directly or through a related organization, hold assets in term, permanent, or			
11	asi-endowments? If "Yes," complete Schedule D, Part V	10	\mathbf{x}	
VIII	the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
Dick Sci Dick Sci Dick of i Dick rep Dick The i Dick D	I, VIII, IX, or X as applicable	11	\mathbf{x}	
Sci of I of	d the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
Dic of I Dic orep To Dic or	hedule D, Part VI			
of I Dictory Dictory Dictory Dictory Dictory Dictory Dictory 12 Dictory 13 Is 1 14a Dictory 15 Dictory 16 Dictory 17 Dictory 18 Dictory 19 Dictory 19 Dictory 19 Dictory 19 Dictory 19 Dictory 10 Dictory 11 Dictory 12 Dictory 13 Dictory 14 Dictory 15 Dictory 16 Dictory 17 Dictory 18 Dictory 19 Dictory 19 Dictory 19 Dictory 19 Dictory 10 Dictory 11 Dictory 12 Dictory 13 Dictory 14 Dictory 15 Dictory 16 Dictory 17 Dictory 18 Dictory 19 Dictory 19 Dictory 19 Dictory 19 Dictory 10 Dictory 10 Dictory 11 Dictory 12 Dictory 13 Dictory 14 Dictory 15 Dictory 16 Dictory 17 Dictory 18 Dictory 19 Dictory 19 Dictory 10 Dictory 10 Dictory 10 Dictory 10 Dictory 10 Dictory 11 Dictory 12 Dictory 13 Dictory 14 Dictory 15 Dictory 16 Dictory 16 Dictory 17 Dictory 18 Dictory 19 Dictory 19 Dictory 19 Dictory 10 Dictory 10 Dictory 10 Dictory 10 Dictory 10 Dictory 11 Dictory 12 Dictory 13 Dictory 14 Dictory 15 Dictory 16 Dictory 17 Dictory 18 Dictory 18 Dictory 19 Dictory 10 Dic	the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more		2	, .
of in Dick rep Dick r	its total assets reported in Part X, line 169 If "Yes," complete Schedule D, Part VII	-	,	,
Dick rep Dick rep Dick rep Dick rep Dick rep Dick rep Sci 12 Wa If " 13 Is I 14a Dick Dick rep Dick re	d the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	•	٠,	
rep Page Page Page Page Page Page Page Page	its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	,	, ž, ,	şa.
Dice the the the the the the the the the th	d the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets		2,000	ş *
Dick the	ported in Part X, line 16 ⁹ If "Yes," complete Schedule D, Part IX			
the the state of t	d the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		` '	
12 Dio Sci	d the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
Sci 12A Wa 15" 13 Is 1 14a Dicc bus 15 Dicc org 16 Dicc on 17 Dicc on 18 Dicc Pa 19 Dicc I2A Wa	e organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12A War If " 13 Is 1 14a Dice bus org 15 Dice org 16 Dice to in 17 Dice on 18 Dice Pa 19 Dice In 19	d the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
15 Dice to 18 Dice Par 19 Dice	hedule D, Parts XI, XII, and XIII.	12	X	
13 Is 1 14a Dicc b Dicc bus 15 Dicc org 16 Dicc to i 17 Dicc on 18 Dicc Pa 19 Dicc	as the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
14a Dick b Dick bus 15 Dick corg 16 Dick to I 17 Dick con 18 Dick Pa 19 Dick	Yes," completing Schedule D, Parts XI, XII, and XIII is optional.			
b Dick bust 15 Dick org 16 Dick to it 17 Dick on 18 Dick Pa 19 Dick	the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
bus 15 Diccorg 16 Diccord 17 Diccord 18 Diccord Pa 19 Diccord	d the organization maintain an office, employees, or agents outside of the United States?	14a		X
15 Did org 16 Did to 1 17 Did on 18 Did Pa 19 Did	d the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			35
org 16 Did to 1 17 Did on 18 Did Pa 19 Did	siness, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
16 Dic to 17 Dic on 18 Dic Pa 19 Dic	d the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			v
to 1 17 Diction 18 Diction Pa 19 Diction	ganization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
17 Did on 18 Did Pa 19 Did	d the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	40		7
on 18 Did Pa 19 Did	individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
18 Did Pa 19 Did	d the organization report a total of more than \$15,000 of expenses for professional fundraising services			v
Pa 19 Did	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
19 Dic	d the organization report more than \$15,000 total of fundraising event gross income and contributions on	10	v	
	ort VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
14 0	d the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		¥
	Yes," complete Schedule G, Part III d the organization operate one or more hospitals? If "Yes," complete Schedule H	19 20	-	X
20 Dic	u ine organization operate one or more nospitals? It it es, complete schedule fi		990	

Form 990 (2009) SKY RANCH FOUNDATION, INC Part IV Checklist of Required Schedules (continued)

	!		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21	<u>x</u>	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	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? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		<u>x</u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	the same and the same of the s	24d	 ∤	
25a		- 1		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a		ŀ	
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or		•	
	990-EZ? If "Yes," complete Schedule L, Part I	25b		<u> </u>
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		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			7.7
20	If "Yes," complete Schedule L, Part III	27	· ·	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		* '	40000
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			x
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	001-		x
_		28b		
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	202		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c		$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$
30	Did the organization receive more than \$25,000 in hor-cash contributions? If Yes, complete schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		
30	conservation contributions? If "Yes," complete Schedule M	20		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		
٠.	Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			-42,
-	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	JE		
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	-55		
	III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	54		
	Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	-55		
-	organization? If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	55		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	<u> </u>		
_	19? Note . All Form 990 filers are required to complete Schedule O.	38		x
		50	990	(0000)

	Statements regarding other mornings and Tax Compliance	_			-		
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		Ī		4	Yes	No
	U.S. Information Returns. Enter -0- if not applicable	.	3				
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1a 1b	0		ł		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and re			 -	ļ		
	gaming (gambling) winnings to prize winners?	portabl	IC	10	- -		 -
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 1		10	+		
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	0				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	-		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see				+		
	instructions)						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by					
	this return?	,		3a			X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	,		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authori	ty		T		
	over, a financial account in a foreign country (such as a bank account, securities account, or other fir	nancial		ł			
	account)?			4a			X
b	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				ŀ	
_	and Financial Accounts				_ _		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	4		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.			5b	4		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Reg	ardıng			1		
	Prohibited Tax Shelter Transaction?			<u>5c</u>	4		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne		1.	1		
b	organization solicit any contributions that were not tax deductible?			<u>6a</u>	+	X	
•	If "Yes," did the organization include with every solicitation an express statement that such contributed gifts were not tax deductible?	ons or				~	
7	Organizations that may receive deductible contributions under section 170(c).			6b	+	X	
· a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	aoode					
	and services provided to the payor?	goods				x	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7 <u>a</u>		$\frac{x}{x}$	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	ıs		' ''	+		
	required to file Form 8282?	.0		7c			x
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		··•	\dagger	T I	
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p						
	benefit contract?			7e	-		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr	act?		7f	T		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g	ī		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0	as			T		
	required?			_7h	┙		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting						
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				-		
_	organization, have excess business holdings at any time during the year?			8	4		
9	Sponsoring organizations maintaining donor advised funds.				-		
а	Did the organization make any taxable distributions under section 4966?			9a	\neg		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			<u>9b</u>	4		
10	Section 501(c)(7) organizations. Enter:						
a	Initiation fees and capital contributions included on Part VIII, line 12	10a					
b ∣1	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter.	10b	 -				
a	Gross income from members or shareholders	44=					
b	Gross income from other sources (Do not net amounts due or paid to other sources against	11a					
~	amounts due or received from them)	11b					
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1041?		_12a	╬		
	The state of the s	120			ㅗ		

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

Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body	1a	33			
b	Enter the number of voting members that are independent	1b	31	<u>_</u>		
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		X
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		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was	filed?		4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?			5		X
6	Does the organization have members or stockholders?			6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members					
	of the governing body?			7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during					
	the year by the following:					
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
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		X
	tion B. Policies (This Section B requests information about policies not required by the	ntern	al			
<u>Rev</u>	renue Code.)					
					Yes	No
	Does the organization have local chapters, branches, or affiliates?			10a		X
þ	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with those of the organization?			10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			- 1		
	form?			11		X
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give					
	rise to conflicts?			12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe in Schedule O how this is done			12c		
13	Does the organization have a written whistleblower policy?			13		X
14	Does the organization have a written document retention and destruction policy?			14		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?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b		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?			16a		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate					
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard					_
	the organization's exempt status with respect to such arrangements?			16b		L '
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed IL, NJ, NY, VA					_
12	Section 6104 requires an organization to make its Forms 1023 for 1024 if applicable), 000, and 000 T (501(a)/3)	ادراسم				

- available for public inspection. Indicate how you make these available. Check all that apply.
 - Own website X Another's website X Upon request
- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public.
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization DUNCAN CAMERON 4211 OAKHILL RD

FREDERICKSBURG

VA 22404

540-891-7201

Form 990 (2009) SKY RANCH FOUNDATION, INC

13-1970360

Page 7

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

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. Use Schedule J-2 if additional space is needed
- 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. 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

(A) Name and Title	(B) Average	(B) (C) Average Position (check all that apply)						(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	or director		Officer		Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
DUNCAN CAMERON										
TREAS/ADMIN	40.00	X	L	X				111,336	0	(
MIKE DONOHOE				į						
EXEC COMMITT		X						0	0	(
RALPH D AGUERA										
PRESIDENT		X		X				0	0	C
BARRY BECTON										
SECRETARY		X		X				0	0	C
DON CIMINI										
DIRECTOR		X						0	0	(
RAYMOND HERRMANN	JR					1				
EXEC VP		X		X				0	0	(
MIKE NIEHAUS										
EXEC VP		X		X				0	0	
STEVE BELLINI			ŀ							
EXEC COMMITT		x						0	0	(
BRAD BOSWELL			ŀ							
EXEC COMMITT		X						0	0	
DR. PETER CRESSY										
EXEC COMMITT		X						0	0	
BILL EARLE										
EXEC COMMITT		X						0	0	
STEPHEN GREENBER	;									
EXEC COMMITT		X						0	0	
GEORGE MCCARTHY										
EXEC COMMITT		X						0	0	
GERRY RUVO										
EXEC COMMITT		X						0	0	
CRAIG WOLF										
EXEC COMMITT		X	L					0	0	
WILLIAM ANDERSON										
DIRECTOR		X	<u> </u>					0	0	
DORI BRYANT										
DIRECTOR		x		1				0	0	

Part VII Section A. Officers	, Directors, Trus	stees	s, Ke	y En	nplo	yees	, an	d Highest Compensated	Employees (continued)	
' (A) Name and Title	(B) Average hours per	⊢	_	chec		hat a		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
MIKE BRZICA									_	-
DIRECTOR		X				<u> </u>		0	0	
TIM CONDRON DIRECTOR		x						o	o	
FRED COOPER	 	<u> </u>	 			 			U	
DIRECTOR		x						lo	o	(
JAY DAVIS										
DIRECTOR		x	_					0	0	(
PEGGY DONOVAN										
JODI DUTTENHEFER		X			_			0	0	
ED SKY RANC		x						0	o	
CHARLES FORMAN									J	•
DIRECTOR		x			<u> </u>			0	0	(
KERRY GUMAS										
DIRECTOR		X	_	_	<u> </u>	<u> </u>		0	0	(
CHRISTINE HELLER DIRECTOR		x						0	o	
BARB HUBBARD	 	-	_			 		<u> </u>		`
DIRECTOR		x						0	0	
SUZANNE RIGA										
DIRECTOR		х			_	<u> </u>		0	0	(
JACK SHEA DIRECTOR		x						0	0	
WILLIAM SLONE	 	^		┢		\vdash		<u> </u>	0	<u> </u>
DIRECTOR		x						i o	o	
1b Total							>	111,336		
Total number of individuals (ii reportable compensation from	•			thos	e lıs	ted a	bov	e) who received more than	\$100,000 in	
									4 a d	Yes No
3 Did the organization list any for employee on line 1a? If "Yes,								byee, or nignest compensa	tea	3 X
4 For any individual listed on fir	e 1a, is the sum	of re	port	able	com	pens	satio			
the organization and related of individual	organizations gre	ater '	than	\$150	0,00	0.5 14	"Ye	s," complete Schedule J to	r such	4 X
5 Did any person listed on line									or	
services rendered to the orga		" cor	nple	te So	chec	lule .	for	such person		5 X
Section B. Independent Contract 1 Complete this table for your fi		enes	ted i	nder	nenr	lent (contr	ractors that received more	than \$100,000 of	
compensation from the organ	<u>ization</u>		ilcu i	11001		icini (,0110			
Name and	(A) d business address						<u> </u>	Descrip	(B) otion of services	(C) Compensation
										
	<u>.</u>						 			
							1			
								120.1-0.12		
							-			
			•				<u> </u>			
2 Total number of independent more than \$100,000 in compe	•	_				ed to	thos	se listed above) who receiv	/ea	0

Part ·V		nent of Reve			LINC		13-13/0360	-	Page 9
		<u> </u>	iuc			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
2⊈ 1a	Federated can	npaigns	1a						
<u>- 1-1</u>	Membership d	· -	1b						
c Big	Fundraising ev	vents [1c						
<u>ye</u> q	Related organ	zations	1d						
<u>î.E</u> e	Government grants	contributions)	1e						-
្តី ត	All other contribution								
됳	and similar amounts	not included above	1f	22:	3,331	:			
<u> </u>	Noncash contribution	ns included in lines 1a-1	lf \$						
	Total. Add line	s 1a-1f			▶	223,331			
Program Service Revenue				Bus	n. Code				
စ္တို 2a									
<u>₩</u> b	•								·
∯ c				<u> </u>					
S q				<u> </u>					
E e									
[] f	All other progra	am service rever	nue						
<u> </u>	Total. Add line				•				
3		ome (including o	lividend	ls, interest, a	nd				
	other sımılar a	•			▶	72,852			72,852
4	Income from in	vestment of tax-	exemp	t bond proce	eds ▶ L				
5	Royalties				▶			•	
		(ı) Real		(II) Persoi	nal				*
6a	Gross Rents								
b	Less rental exps								
C	, / [
d 7a	Net rental inco				•			-	
'a	sales of assets	(i) Securities		(II) Othe	r				
	other than inventory	2,625,	803						
b	Less cost or other								
	basis & sales exps	2,559,							
	Gain or (loss)		208				:		
	Net gain or (lo	•	_		<u> </u>	66,208	66,208	· · · · · · · · · · · · · · · · · · ·	
		m fundraising ever	nts						
ַבַּ פַּב	(not including \$								
g		eported on line 1c).	- 1						
Other Revenu	See Part IV, line		a _		,213				
5 b	Less direct ex		b∟		2,730				
		(loss) from fund		events	-▶	96,483			96,483
9a		m gaming activities	- 1						
١.	See Part IV, line		a -		——				1
	Less direct ex		b∟						
		(loss) from gami	ng activ	vities	•				
10a	Gross sales of	-			,				
1.	returns and all		a -		3,215				
	Less cost of g		₽Ĺ		3,407	44 000			
C		(loss) from sales	of inve		P	14,808			14,808
		ellaneous Revenue		Bus	n. Code				
11a	OIL & GAS	LEASE		<u> </u>		3,263			3,263
b			•	<u> </u>					<u> </u>
C	A.II 41			<u> </u>					
d	All other reven				 +	2 222			
l e	Total. Add line		_		- ▶ -	3,263	66 665		40
12	rotal Hevenue	e. See instruction	ıs			476,945	66,208	0	187,406

Form 990 (2009)

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).

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C)	(D). Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	730,700	730,700		· · · · · · · · · · · · · · · · · · ·
2	Grants and other assistance to individuals in				r.
	the U S See Part IV, line 22				· · · · · · · · · · · · · · · · · · ·
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				1
	U.S. See Part IV, lines 15 and 16			······································	*
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
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		·		
8	Pension plan contributions (include section 401(k)				
3	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	10,853		10,853	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other			·	
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	9,536		719	8,817
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	27 464	37 464		
22	Depreciation, depletion, and amortization	37,464	37,464		
23	Insurance		<u></u>		,
24	Other evenence Hamiza evenence not	1			´ !
24	Other expenses Itemize expenses not				,
	covered above. (Expenses grouped together and labeled miscellaneous may not exceed			,	!
	5% of total expenses shown on line 25 below)				ţ
а	CONSULTANT	111,336		55,668	55,668
b	SPECIAL CONTRIBUTION	10,126	10,126		
c	BANK CHARGES	2,795		2,795	
d	MISCELLANEOUS	2,012	_	1,483	
e	SERVICES	1,764		1,764	
f	All other expenses	7,873		6,162	
25	Total functional expenses. Add lines 1 through 24f	924,459	778,290	79,444	66,725
26	Joint costs. Check here ▶ ☐ If following				
	SOP 98-2. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation			 	
DAA	· — — — — — — — — — — — — — — — — — — —				Form 990 (2009)

Form 990 (2009)

Balance Sheet Part·X 1 (A) (B) End of year Beginning of year Cash-non-interest bearing 1 18,676 2,679 2 Savings and temporary cash investments 50,000 50,000 Pledges and grants receivable, net 3 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 6 Assets Notes and loans receivable, net 7 Inventories for sale or use 8 56,708 49,692 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 2,087,869 other basis Complete Part VI of Schedule D 10a 1,712,717 412,617 375,152 b Less accumulated depreciation 10b 10c 2,811,339 2,542,836 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 14 Intangible assets 15 Other assets See Part IV, line 11 15 3,349,340 3,020,359 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 Accounts payable and accrued expenses 17 18 Grants payable 18 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 26 Net Assets or Fund Balances Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34. 3,206,188 27 2,841,317 Unrestricted net assets 68,152 76,673 28 Temporarily restricted net assets 28 75,000 102,369 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 3,349,340 3,020,359 33 Total net assets or fund balances 33 3,349,340 3,020,359 Total liabilities and net assets/fund balances

Form **990** (2009)

orm	990 (2009) SKY RANCH FOUNDATION, INC 13-1970360		Pag	je 12
Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		Ì	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	1		,
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in	I		
	Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			1
	issued on a consolidated basis, separate basis, or both			-
	Separate basis Consolidated basis Both consolidated and separate basis			;
За	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?	3a		<u>x</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		Form	990	(2009)

SCHEDULE, A (Form 990 or 990-EZ)

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

			SKY RANCH FO	UNDATION,	INC					13-	-1970	360		
Pá	art i	Reas	on for Public Charity	Status (All orga	ınizations	s must o	complet	e this	oart.)	See in	structi	ons.		
he	orga	ınızatıon ıs not	a private foundation becaus	e it is. (For lines 1 th	rough 11,	check only	one box	.)						
1		A church, co	nvention of churches, or ass	ociation of churches	described	ın sectior	170(b)(1)(A)(i).						
2		A school des	scribed in section 170(b)(1)(a	A)(ii). (Attach Sched	lule E)									
3		A hospital or	a cooperative hospital service	ce organization desc	cribed in se	ction 170	(b)(1)(A)(i	iii).						
4		A medical re	search organization operated	d in conjunction with	a hospital	described	ın sectio	n 170(b	(1)(A)(i	ii). Ente	r the hos	spital's name),	
		city, and stat	e									•		
5		An organizat	ion operated for the benefit o	of a college or unive	rsity owned	or operat	ed by a g	overnme	ental uni	t descri	bed in			
		section 170((b)(1)(A)(iv). (Complete Part	lf)	·	•	, ,							
6		A federal, sta	ate, or local government or g	overnmental unit de	scribed in s	ection 17	'0(b)(1)(A)(v).						
7	\Box		ion that normally receives a						rom the	genera	l public			
			section 170(b)(1)(A)(vi). (Co			•					•			
8		A community	trust described in section 1	70(b)(1)(A)(vi). (Co	mplete Part	: II)								
9			ion that normally receives (1				contribut	ions, me	mbersh	np fees,	and gro	SS		
			activities related to its exem								-			
		support from	gross investment income ar	nd unrelated busines	s taxable ır	ncome (le	ss section	511 tax) from t	ousines	ses			
		acquired by t	he organization after June 3	0, 1975 See sectio	n 509(a)(2)	. (Comple	te Part III)						
10		An organizat	ion organized and operated (exclusively to test fo	r public saf	ety. See s	ection 50)9(a)(4).						
11	X	An organizati	ion organized and operated o	exclusively for the be	enefit of, to	perform t	he functio	ns of, or	to carr	y out the	е			
		purposes of o	one or more publicly support	ed organizations des	scribed in s	ection 509	9(a)(1) or	section	509(a)(2	2). See	section			
			neck the box that describes t	he type of supporting	g organızat	ion and co	mplete lii	nes 11e	through	11h				
		a 🗶 Type	el b Type II	c 🗌 Type I	II-Function	ally integr	ated	d [Тур	e III–Ot	her			
е	X	By checking	this box, I certify that the org	anization is not conf	trolled direc	tly or indi	ectly by o	ne or m	ore disc	qualified				
		persons othe	r than foundation managers	and other than one	or more pu	blicly supp	orted org	janizatio	ns desc	ribed in	section			
		509(a)(1) or s	section 509(a)(2)											
f		If the organiz	ation received a written dete	rmination from the I	RS that it is	a Type I,	Type II,	or Type	III supp	orting				
		organization,	check this box											
g		Since Augus	t 17, 2006, has the organizat	tion accepted any gi	ft or contrib	ution from	n any of th	ne						
		following per	rsons?											,
		(i) A persor	n who directly or indirectly co	ntrols, either alone	or together	with perso	ons descr	ibed in (II)			<u></u>	Yes	No
		and (III)	below, the governing body of	f the supported orga	nızatıon?							11g(ı)		X
		(ii) A famıly	member of a person describ	ped in (i) above?								11g(ıı)	ļ	X
		(iii) A 35% c	controlled entity of a person of	described in (i) or (ii)	above?							11g(111)	X
h		Provide the	following information about the	ne supported organi	zation(s)	- ·		T		.,				
(i)		e of supported	(ii) EIN	(iii) Type of orga			organization		ou notify		ls the	(vii) Am		
	orç	ganization		(described on lin above or IRC s			sted in your document?	col (I)	nzation in of your	organizat (i) organi	zed in the	sup	oort	
				(see instructi		, , , , , , , , , , , , , , , , , , ,		sup	ort?	U	S ?			
						Yes	No	Yes	No	Yes	No			
SI	ĆΥ	RANCH I	OR BOYS, INC.	_								_		
			46-0253315	6			X	X		X	-	7	30,	<u>700</u>
						 	ļ			_	 			
						1	<u> </u>			 				
						1				├ ──	 			
						ļ					├			
			I			1	I	I	I	1	ı			

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

Schedule A (Form 990 or 990-EZ) 2009

730,700

Sche	edule A (Form 990 or 990-EZ) 2009 SKY					3-1970360	Page 2
Pa	Support Schedule for O (Complete only if you che)(1)(A)(iv) and	170(b)(1)(A)(vi)
Sec	tion A. Public Support	ookoa tiio box t	<u> </u>	100114111.			
	lendar 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	Total. 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	Public support. Subtract line 5 from line 4	۶	,				
	tion B. Total Support						
Ca	lendar 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	Total support. Add lines 7 through 10			lósi		<u> </u>	
12	Gross receipts from related activities, etc	,				12	
13	First five years. If the Form 990 is for the	-	, secona, tnira, to	urth, or tifth tax ye	ar as a section 50	1(c)(3)	. ┌
500	organization, check this box and stop her tion C. Computation of Public St		200		·		
		· ''	_ 	(6)		144	9/
14 15	Public support percentage for 2009 (line 6	7. 7	•	nn (1))		14	<u>%</u>
15	Public support percentage from 2008 Sch			10. and line 14 in	00.4/0.0/	<u>[15]</u>	<u> %</u>
16a	33 1/3 % support test—2009. If the organ				33 1/3 % or more,	, cneck this box	. г
_	and stop here. The organization qualifies		•		45 00 4/0 0/		
b	33 1/3 % support test—2008. If the organ				15 IS 33 1/3 % OF I	more, check this	. ┌
17-	box and stop here. The organization qual				0 40b	- 44 400/	
17a	10%-facts-and-circumstances test—200	•					
	more, and if the organization meets the "fa			=	•		
	organization meets the "facts-and-circums		-	· · · · · · · · · · · · · · · · · · ·	-		▶ _
b	10%-facts-and-circumstances test—200 more, and if the organization meets the "facts-and-circums organization meets the "facts-and-circums"	acts-and-circumstai	nces" test, check	this box and stop	here. Explain in P	art IV how the	▶ [
18	organization meets the "facts-and-circums Private foundation. If the organization did						
. –			,,	_,,, 011			

Schedule A (Form 990 or 990-EZ) 2009

Page 3 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 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 7a received from disqualified persons 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 Add lines 7a and 7b Public support (Subtract line 7c from Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Amounts from line 6 Gross income from interest, dividends, 10a payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business 11 activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or 12 loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 Public support percentage from 2008 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 33 1/3 % support tests—2009. 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 33 1/3 % support tests—2008. 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

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

Schedule A (Form 990 or 990-EZ) 2009 SKY RANCH FOUNDATION, INC

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

SCHEDULE, D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009
Open to Public

Open to Public Inspection

Name of the organization Employer identification number SKY RANCH FOUNDATION, 13-1970360 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year 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? 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990. Part IV. line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space 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 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year Number of states where property subject to conservation easement is located ▶ 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, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes No 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, 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) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Sche	edule D (Farm 990) 2009 SKY RANCH	FOUNDATION,	INC	1	3-1970	360	Page 2
Pa	art III Organizations Maintaining	Collections of Art,	Historical Treas	sures, or	Other Sir	milar Assets (
3	Using the organization's acquisition, accessic collection items (check all that apply)						<u> </u>
а	Public exhibition	d Loan	or exchange progran	18			
b	Scholarly research	e Other		13			
c	Preservation for future generations	C _ Guite		- - -			
4	Provide a description of the organization's co	llections and explain how	they further the orga	nızatıon's ex	empt purpo	se in	
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to	receive donations of art,	historical treasures,	or other sim	ılar		
Da	art IV Escrow and Custodial Arra				word "V	oo" to Form O	Yes No
	IV, line 9, or reported an an			alion ansi	weleu 1	es to Follil 9	90, Fait
10	· · · · · · · · · · · · · · · · · · ·						
ıa	Is the organization an agent, trustee, custodia	an or other intermediary to	or contributions or otr	ner assets no	ot		
L	included on Form 990, Part X?		- 4-61-				☐ Yes ☐ No
D	If "Yes," explain the arrangement in Part XIV	and complete the followin	g table				A
	Decrees halous						Amount
С.	• • • • • • • • • • • • • • • • • • • •					1c	
a	Additions during the year					1d	-
е.	Distributions during the year					1e	
1	Ending balance					1f	
2a		orm 990, Part X, line 217					
	If "Yes," explain the arrangement in Part XIV			- F 0	00 0 11	N/ 1 40	
Pa	ert V Endowment Funds. Comp	T T					/ \
		(a) Current year	(b) Prior year	(c) Two yea	rs back (d)	Three years back	(e) Four years back
1a	3 . ,	2,743,187	3,735,395				
b		-	· 				
С	Net investment earnings, gains,	0.45 605	54B 464			^	
	and losses	245,607	-547,461		*		
	Grants or scholarships	-			~ <		
е	Other expenditures for facilities	50- 000				, `	
_	and programs	625,000	444,747			, *	
f	Administrative expenses					4.4.	· · · · · · · · · · · · · · · · · · ·
g	End of year balance	2,363,794	2,743,187		\$ *	,	
2	Provide the estimated percentage of the year	end balance held as.					
а	Board designated or quasi-endowment	%					
þ	Permanent endowment ►%						
С	Term endowment ▶ %						
За	Are there endowment funds not in the posses	ssion of the organization t	hat are held and adm	inistered for	the		
	organization by.						Yes No
	(i) unrelated organizations						3a(i) X
	(ii) related organizations						3a(ii) X
b	If "Yes" to 3a(II), are the related organizations	•					3b
4	Describe in Part XIV the intended uses of the						
Pa	irt VI Investments—Land, Buildi		<u>nt. See Form 99</u>	<u>0, Part X,</u>	<u>line 10.</u>		
	Description of investment	(a) Cost or other basis	(b) Cost or oth		(c) Accumi	F	(d) Book value
	4274	(investment)	basis (other		deprecia	tion	
1a	Land .			,104			116,104
b	Buildings		1,867				1,867,483
С	Leasehold improvements			,794			57,794
d	Equipment		46	,488			46,488
	Other				1,71	2,717	-1,712,717
Tota	I. Add lines 1a through 1e (Column (d) must e	gual Form 990, Part X, co	olumn (B), line 10(c)	1		>	375,152

Schedule D (Form 990) 2009 SKI RANCH FOUNDATION		13-13/0300	Page 3
Part VII Investments—Other Securities. See Form 9	90, 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	
Financial derivatives			
Closely-held equity interests			
Other			
	1 1 1 1		
	_		
		-	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	•		
Part VIII Investments—Program Related. See Form 9	990, Part X, line 13.		
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market	
		- "	<u></u> .
1200			
			7-74-7-4-1
——————————————————————————————————————			
	<u>''</u>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)		***	
Part IX Other Assets. See Form 990, Part X, line 15.			
(a) Description		(1) Book value
<u> </u>			
			
	· · · · · · · · · · · · · · · · · · ·		
			· <u>-</u>
Total (Column /b) must squal Form 000. Book V. and (D) line 15	,		,
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) Part X Other Liabilities. See Form 990, Part X, line	25	<u> </u>	
1 (a) Description of liability	(b) Amount	1	
Federal income taxes	(b) Amount	1	
i ederal income taxes	- -	1	
		1	
		†	
		1	
		†	
		†	
	 	1	
		1	
	 - -	1	
		1	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	-	1	
2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the org		ents that reports the	
= to receive mirrait Arry, provide the text of the houndle to the oil	juinealivii o mianolai olaltiilt	אווט מומנ ובטטונס נווכ	

organization's liability for uncertain tax positions under FIN 48

Sche	edule D (Form 990) 2009 SKY RANCH FOUNDATION, INC		13-197036		Page 4
Pa	art XI Reconciliation of Change in Net Assets from Form 990 to	Audi	ted Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	476,945
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	924,459
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3	-447,514
4	Net unrealized gains (losses) on investments			4	118,533
5	Donated services and use of facilities			5	
6	Investment expenses .			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net). Add lines 4 through 8			9	118,533
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			10	-328,981
	art XII Reconciliation of Revenue per Audited Financial Statemen	nts W	ith Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements			1	595,478
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		140 500		
a	Net unrealized gains on investments	2a	118,533		
þ		2b		ŀ	
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	_2d			446
е	Add lines 2a through 2d			2e	118,533
3	Subtract line 2e from line 1		1	3	476,945
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		* 3	
b	Other (Describe in Part XIV)	4b		` ' ' 	
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	476,945
Rε	art XIII Reconciliation of Expenses per Audited Financial Stateme	ents '	With Expenses per F	<u> Petur</u>	
1	Total expenses and losses per audited financial statements			1	924,459
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.		1		
а	Donated services and use of facilities	2a		, ,	
b	Prior year adjustments	2b	*		
С	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1		•	3	924,459
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			- XX	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
C	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	924,459
Pε	ert XIV Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lin	nes 1a	and 4, Part IV, lines 1b		
and 2	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lin	es 2d	and 4b Also complete		
	part to provide any additional information		•		
			. – – – – –		
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Schedule D (F	-arm 990) 20	009 SK	Y RANC	H FOUNDATIO	N, INC	13-1970360	Page 5
Part XIV	<u>Suppler</u>	mental Ir	nformatio	on (continued)			
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SCHEDULE, G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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.

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

See separate instructions

OMB No 1545-0047

Open To Public Inspection

Employer identification number Name of the organization SKY RANCH FOUNDATION, INC 13-1970360 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I 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. Mail solicitations Solicitation of non-government grants а Internet and email solicitations Solicitation of government grants Phone solicitations 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? 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. (III) Did fund-(i) Name of individual (ii) Activity (iv) Gross receipts (v) Amount paid to (vi) Amount paid to raiser have or entity (fundraiser) from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of ontributions col (i) Yes No

Total 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.

Page 2

P	art I		vent 5.000	s. Complete on Form 990	if the orga 0-EZ. line	nization answe 6a. List events	red "Yes" t with gross	o Form 990, Pa	rt IV, line	18, or re	porte	d
•				(a) Event #1 LL OF FA (event type)		(b) Event	#2	(c) Other even	ts	(d) Total e (add col (a col () throug	jh
Revenue	1 2	Gross receipts Less Charitable contributions		11	19,213					11	L9,2	13
	3	Gross revenue (line 1 minus line 2)		11	19,213					11	19,2	<u> 13</u>
	4	Cash prizes				···.						
	5	Noncash prizes								·		
sesuec	6	Rent/facility costs										
Direct Expenses	7	Food and beverages				 						
۵	8	Entertainment			720							
	10	Other direct expenses Direct expense summan	y Add		22,730	d)		<u>.</u>	> (22,7 22,7	
	11	Net income summary C							<u> </u>	9	22,7 96,4	183
LP	art I	than \$15,000				wered "Yes" to	Form 990,	Part IV, line 19	, or repo	rted more	!	
Revenue				(a) Bingo		(b) Pull tabs/ir bingo/progressiv		(c) Other gamır		(d) Total gam		
æ 	1	Gross revenue										
ses	2	Cash prizes										
t Expenses	3	Noncash prizes										
Direct	4	Rent/facility costs				<u></u>						
	5	Other direct expenses		1 : -								
	6	Volunteer labor		Yes No	%	Yes No	% 	Yes No	%			
	7	Direct expense summary	/ Add	lines 2 through 5	in column (d)			•)
	8	Net gaming income sum	mary	Combine line 1,	column d, ar	nd line 7			•			
9 a b	is t	er the state(s) in which th he organization licensed t No," Explain	_			•				9a	Yes	No
10a		re any of the organization	ı's gan	ning licenses reve	oked, suspei	nded or terminated o	during the tax	year [?]		- 10a		-
b		es," Explain	-		·		-					
11		es the organization operat		-			t			11		
12		he organization a grantor, ned to administer charitat		=	oia trust or a	i member of a partn	ersnip or othe	er entity		12		

Sche	dule G (Fqrm 990 or 990-EZ) 2009 SKY RANCH FOUNDATION, INC	13-197036	0	Р	age 3
				Yes	No
13	Indicate the percentage of gaming activity operated in:				
а	The organization's facility	13a %			
b	An outside facility	13b %			
14	Provide the name and address of the person who prepares the organization's gaming/special events books				
	and records				
	Name				
	Address ▶				
15a	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			1
	amount of gaming revenue retained by the third party ▶ \$				
С	If "Yes," enter name and address of the third party				
			^	35	
	Name >		`,	١,	٠.
	Address		,		` '
10	Common manager informations		> ,		* - 3
16	Gaming manager information:		, ,		,
	Name ▶				
	Name >		1 8 %		·
	Gaming manager compensation ▶ \$,	1	
	Calling manager compensation P \$				
	Description of services provided ▶				^*,
	Description of services provided P		r śź	(2000)	
	Director/officer Employee Independent contractor		1		
			/ vg		(C. C.
17	Mandatory distributions:		' %		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to] (3		
	retain the state gaming license?		17a	<i>in</i>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent			11/2	ź 23
	in the organization's own exempt activities during the tax year.		۱.		J? š

Schedule G (Form 990 or 990-EZ) 2009

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Department of the Treasury Internal Revenue Service Name of the organization

Part

Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22. Governments, and Individuals in the United States

1545-0047	60	
OMB No	20	

▶ Attach to Form 990.

SKY RANCH FOUNDATION, INC

Open to Public Inspection

Employer identification number 13-1970360

Part I General Information on Grants and Assistance	d Assistance							
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	the amount of the gance?	rants or ass	sistance, the grantees'	eligibility for the grants	or assistance, an	q	☐ Yes 💢 No	2
2	o asa an billionia	graffit furius	III IIIe Oliifed States		: 3:			
Fart II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to	overnments an	d Organ	izations in the Un	ited States. Com	plete if the org	Janization ansv	wered "Yes" to	
Form 990, Fart IV, line Z1, Tor any recipient that received more that Part IV and Schedule I-1 (Form 990) if additional space is needed	ecipient that re)) if additional s	ceived m pace is r	iore inan \$5,000. needed	Cneck this box if	no one recipie	nt received mo	ore than \$5,000. Use	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
SKY RANCH FOR BOYS, INC.								
SKY RANCH SD 57724	46-0253315	3	730,700					
2 Enter total number of section 501(c)(3) and government organizations	organizations					•		

Schedule I (Form 990) 2009

Schedule I (Form 990) 2009

Schedule I (Fo	Schedule I (Form 990) 2009 SKY RANCH FOUNDATION, INC	UNDATION, INC		13-1970360		Page 2
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.	to Individuals in the (Form 990) if addition	• United States. Cornal space is needed.	nplete if the organiza	tion answered "Yes" to For	
"	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(e) Method of valuation (book, Fig. Description of non-cash assistance FMV, appraisal, other)
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	omplete this part to p	provide the information	on required in Part I,	line 2, and any other addition	onal information.

79700

SCHEDULE,J (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 2009

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I

SKY RANCH FOUNDATION, INC

Questions Regarding Compensation

Employer identification number

13-1970360

				Yes	No
12	Check the appropriate box(es) if the organization provided any	of the following to or for a person listed in Form		İ	i
14	990, Part VII, Section A, line 1a Complete Part III to provide a	•			i
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	H	Ì		
	Tax indemnification and gross-up payments	Payments for business use of personal residence Health or social club dues or initiation fees			i
	Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)			
	Discretionary spending account	Personal services (e.g., maid, chaulleur, cher)			ł
b	If any of the boxes on line 1a is checked, did the organization	follow a written policy regarding payment			ŧ
	or reimbursement or provision of all of the expenses described				
	explain	, and the same of	1b		
2	Did the organization require substantiation prior to reimbursing	or allowing expenses incurred by all			
	officers, directors, trustees, and the CEO/Executive Director, r		2		
	, , , , , , , , , , , , , , , , , , , ,				
3	Indicate which, if any, of the following the organization uses to	establish the compensation of the			,
	organization's CEO/Executive Director Check all that apply.	·			:
	X Compensation committee	Written employment contract			
	Independent compensation consultant	Compensation survey or study			,
	Form 990 of other organizations	Approval by the board or compensation committee			1
	_				
4	During the year, did any person listed in Form 990, Part VII, S	ection A, line 1a, with respect to the filing			j
	organization or a related organization				
а	Receive a severance payment or change-of-control payment?		4a		X
b	Participate in, or receive payment from, a supplemental nonqu	ualified retirement plan?	4b		X
C	Participate in, or receive payment from, an equity-based comp	pensation arrangement?	4c		х
	If "Yes" to any of lines 4a-c, list the persons and provide the a	applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must co	mplete lines 5–9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, die	d the organization pay or accrue any			
	compensation contingent on the revenues of:			<u> </u>	
а	The organization?		5a		X
b	Any related organization?		5b		X
	If "Yes" to line 5a or 5b, describe in Part III				1
6	For persons listed in Form 990, Part VII, Section A, line 1a, die	d the organization pay or accrue any			,
	compensation contingent on the net earnings of				
а	The organization?		6a		X
b	Any related organization?		6b		Х
	If "Yes" to line 6a or 6b, describe in Part III			_	
7	For persons listed in Form 990, Part VII, Section A, line 1a, die	d the organization provide any non-fixed			
	payments not described in lines 5 and 67 If "Yes," describe in	Part III	7	X	
8	Were any amounts reported in Form 990, Part VII, paid or acc	rued pursuant to a contract that was			
	subject to the initial contract exception described in Regs sec	tion 53 4958-4(a)(3)? If "Yes," describe			
	in Part III		8		x
9	If "Yes" to line 8, did the organization also follow the rebuttable	e presumption procedure described in			
	Regulations section 53 4958-6(c)?		9		

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

Schedule J (Form 990) 2009

Schedule J (Form 990) 2009

Part II Officer

SKY RANCH FOUNDATION, INC

13-1970360

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

Page 2

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

							_	
(A) Name	(b) breakdo (i) Base compensation	ž	(ii) Bonus & incentive (iii) Bonus ation compensation compensation reportable compensation	r.	(C) Hetirement and other deferred compensation	(U) Nontaxable benefits	(E) Total of columns (B)(I)–(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
DUNCAN CAMERON		103,336	8,000	0	0	0	111,336	0
	(E) (S)	0	0	0	0	0	0	0
- 3	(E)							
	(ii)							
)))	(ii)							
	(E)							
)	(ii)							
	(E)						•	
	(3)							
	(n) (i)							
	(u)							
)	(II)							
)	(1) (i)							
))	(n) (t)							
)	(u) (u)							
)	(II)							
)	(ii)					•	•	
							Schedu	Schedule J (Form 990) 2009

Page 3

SKY RANCH FOUNDATION, INC

13-1970360

79700

Schedule J (Form 990) 2009 SKY RANCH FOUNDATION, INC 13–1970360

*Part III | Supplemental Information Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part

for any additional information

PART I, LINE 7 - NON-FIXED PAYMENTS PROVIDED

ANNUAL BONUS PAYMENT TO DUNCAN CAMERON \$8,000

Schedule J (Form 990) 2009

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ▶ See the Instructions for Form 990.

Name of the Organization

SKY RANCH FOUNDATION, INC

Employer Identification number 13-1970360

	ANCH FOUL								13-19/	0360
Part I Continuation o Employees	f Officers, D	irec	tors	s, T	rus	tee	s, K	ey Employees, and I	Highest Compensat	ed
(A) Name and Title	(B) Average hours	Posi	tion ((f	C) k all t	that a	pply)	(D) Reportable	(E) Reportable	(F) Estimated
Name and The	perweek	Individual trustee or director			Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
DONNA CRECCA DIRECTOR		x						0	0	
PAUL HOUSTON	1	-	\vdash	\vdash		╁	_			
DIRECTOR		x						o	0	
JOHN MCDONNELL			-		\vdash					
DIRECTOR		x						0	0	
								- ···		
					_	-		,		
-										
	1						_			
									,	
							_			
·										

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

SKY RANCH FOUNDATION, INC

Employer identification number 13-1970360

FORM 990, PART I, LINE 6

BOARD MEMBERS, WAABI CHAPTER CHAIRPERSONS, VOLUNTEER FUNDRAISERS

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990 NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL EVERY FIVE YEARS A COMMITTEE IS APPOINTED FROM MEMBERS TO NEGOTIATE A COMPENSATION AGREEMENT FOR THE ADMINISTRATOR/TREASURER OF THE FOUNDATION.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION NO DOCUMENTS AVAILABLE TO THE PUBLIC

4562

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return. OMB No 1545-0172 Attachment Sequence No

Department of the Treasury Internal Revenue Service Name(s) shown on return

SKY RANCH FOUNDATION, INC

Identifying number 13-1970360

Business or activity to which this form relates INDIRECT DEPRECIATION **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount. See the instructions for a higher limit for certain businesses. 250,000 2 Total cost of section 179 property placed in service (see instructions) 2 800,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 13 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr. 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 37,464 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 0 17 17 MACRS deductions for assets placed in service in tax years beginning before 2009 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (business/investment use (g) Depreciation deduction placed in (e) Convention (f) Method period only-see instructions) service 19a 3-year property þ 5-year property С 7-year property 10-year property e 15-year property 20-year property S/L 25-year property 25 yrs Residential rental 27 5 vrs. S/L MM property 27 5 yrs. MM S/L Nonresidential real MM S/L 39 yrs property MM S/L Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year 12 yrs S/L S/L c 40-year 40 yrs Summary (See instructions.) Part IV 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

SKY RANCH FOUNDATION FINANCIAL REPORT JUNE 30, 2010



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INDEPENDENT AUDITORS' REPORT

To the Board of Directors Sky Ranch Foundation

We have audited the accompanying statement of financial position of Sky Ranch Foundation (the "Foundation") as of June 30, 2010, and the related statements of activities, functional expenses and cash flows for the year then ended. These financial statements are the responsibility of the Foundation's management. Our responsibility is to express an opinion on these financial statements based on our audit.

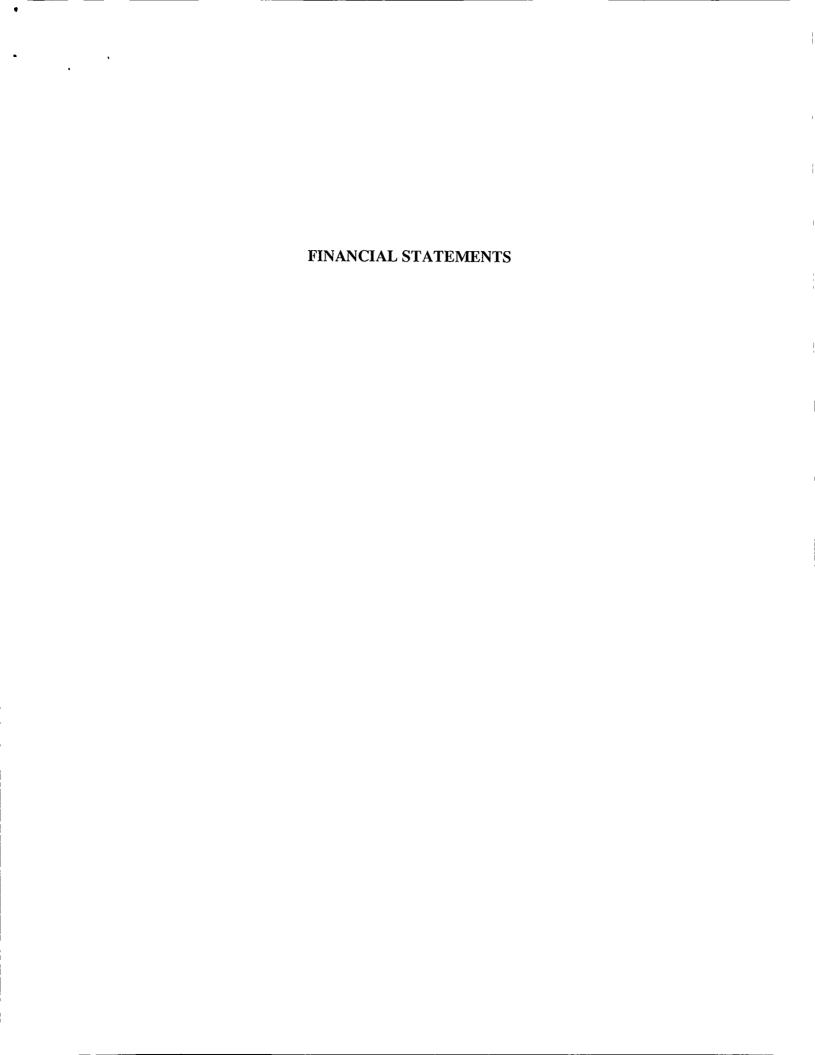
We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as, evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Sky Ranch Foundation at June 30, 2010, and the changes in its net assets and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

Steve Gry + Associates, PC

Fredericksburg, Virginia November 3, 2010

4900 SOUTHPOINT DRIVE • FREDERICKSBURG, VA 22407 540/891-7555 • FAX 540/891-7543 • www.steveguycpa.com • cpa@steveguycpa.com



STATEMENT OF FINANCIAL POSITION

June 30, 2010

ASSETS		
CURRENT ASSETS		
Cash and cash equivalents	\$	2,679
Contributions receivable		50,000
Prepaid Expenses		49,692
Total current assets	\$	102,371
INVESTMENTS	\$	2,542,836
PROPERTY AND EQUIPMENT		
Land	\$	116,104
Buildings		1,867,483
Property improvements		57,794
Furnishings		46,488
	\$	2,087,869
Less accumulated depreciation		1,712,717
		375,152
	\$	3,020,359
LIABILITIES AND NET ASSETS		
NET ASSETS		
Unrestricted:		
Designated by Board as Endowment	\$	2,363,794
Net investment in property and equipment		375,152
Undesignated		102,371
Total unrestricted net assets	\$	2,841,317
Temporarily restricted - Student Loan Fund		76,673
Permanently restricted - Davis/Carlos Fund		102,369
Total net assets		3,020,359

STATEMENT OF ACTIVITIES

Year Ended June 30, 2010

SUPPORT	U ı	nrestricted		nporarily stricted	manently estricted		Total
Contributions	\$	223,331	\$		\$ -	\$	223,331
Special Events		96,483		-	-		96,483
Sale of Holiday Cards, less cost of \$11,407		14,808		-	-		14,808
Total support	\$	334,622	\$		\$ 	\$	334,622
INCOME FROM INVESTMENTS							
Dividend and interest income	\$	69,183	\$	1,825	\$ 1,844	\$	72,852
Net realized gain on sale of investments		101,192		<i>-</i>	188		101,380
less investment advisor fees		(34,064)			(1,108)		(35,172)
Net unrealized gain on investments		85,392		6,696	26,445		118,533
Oil & gas lease		3,263		-	· •		3,263
Income from investments	\$	224,966	\$	8,521	\$ 27,369	\$	260,856
Total support and income from investments		559,588	_\$_	8,521	 27,369	_\$_	595,478
FUNCTIONAL EXPENSES							
Program services	\$	778,290	\$	-	\$ -	\$	778,290
Management and general		79,444		-	-		79,444
Fund raising		66,725					66,725
Total functional expenses	_\$	924,459	\$		\$ -	\$	924,459
Increase (decrease) in net assets	\$	(364,871)	\$	8,521	\$ 27,369	\$	(328,981)
Net assets at beginning of year		3,206,188		68,152	 75,000		3,349,340
Net assets at end of year		2,841,317		76,673	 102,369		3,020,359

STATEMENT OF FUNCTIONAL EXPENSES

Year Ended June 30, 2010

		Supporti	ng Services	
	Program	Management	Fund	
	Services	and General	Raising	Total
Audit fees	\$ -	\$ 10,853	\$ -	\$ 10,853
Bank charges	-	2,795	-	2,795
Consultant	-	55,668	55,668	111,336
Insurance	-	800	-	800
Meals & entertainment	•	1,224	-	1,224
Miscellaneous	-	1,483	529	2,012
Postage & shipping	-	1,267	385	1,652
Printing	-	-	1,326	1,326
Real estate taxes	-	1,080	-	1,080
Services	-	1,764	-	1,764
Sky Ranch for Boys, Inc.	730,700	-	-	730,700
Supplies	•	891	-	891
Telephone	-	900	-	900
Travel	-	719	8,817	9,536
Other	10,12	5 -	<u> </u>	10,125
Total expenses before depreciation	\$ 740,82	5 \$ 79,444	\$ 66,725	\$ 886,994
Depreciation	37,46	5		37,465
Total expenses	\$ 778,29	9 79,444	\$ 66,725	\$ 924,459

STATEMENT OF CASH FLOWS

Year Ended June 30, 2010

CASH FLOWS FROM OPERATING ACTIVITIES		
Decrease in net assets	\$	(328,981)
Adjustments to reconcile increase in net assets		
to net cash used by operating activities:		
Depreciation		37,465
Net realized gains on sales of investments less fees		(66,208)
Net unrealized gains on investments		(127,440)
Reinvested capital gains, dividends & interest		(72,849)
Changes in operating assets and liabilities:		
Decrease in prepaid expenses	~	7,016
Net cash (used in) operating activities		(550,997)
CASH FLOWS FROM INVESTING ACTIVITIES		
Net transfers from investments	_\$	535,000
Net cash provided by investing activities	_\$_	535,000
Decrease in cash and cash equivalents	\$	(15,997)
Cash and cash equivalents:		
Beginning		18,676
Ending	\$	2,679

NOTES TO FINANCIAL STATEMENTS

Note 1. Summary of Significant Accounting Policies Follows

Nature of Activities:

Sky Ranch Foundation (the "Foundation") is a charitable organization organized under South Dakota state law, whose primary activities are to raise funds for, and make contributions to Sky Ranch for Boys, Inc., (the "Ranch") a not-for-profit corporation also organized under the laws of South Dakota. The Foundation's property and equipment is located in South Dakota and is used by the Ranch to conduct its operations. The funds contributed to and expended for the benefit of the Ranch by the Foundation, are used to purchase and maintain buildings, equipment, and supplies, as well as provide tuition for boys attending the Ranch.

The primary source of contributions to the Foundation is the United States alcohol beverage industry. The Foundation raises funds primarily through the efforts of its paid and unpaid officers and directors. There are no employees of the Foundation.

Support and Revenue:

Contributions are generally available for unrestricted use unless specifically restricted by the donor. Unconditional promises to give are recorded when received as contributions receivable. Unconditional promises to give due in the next year are reflected as current receivables and are recorded at their net realizable value. Unconditional promises to give due in subsequent years are reflected as long-term receivables and are recorded at the present value of their net realizable value, discounted using risk-free interest rates.

Contributions of cash and other assets are reported as temporarily restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. Contributions received with donor-imposed restrictions that are met in the same year in which the contributions are received are classified as unrestricted contributions.

Financial Statement Presentation:

The Organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

NOTES TO FINANCIAL STATEMENTS

Estimates:

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Cash and Cash Equivalents:

For the purpose of the statement of cash flows, cash and cash equivalents include all demand deposit accounts the Foundation maintains at a bank.

Accounts Receivable:

In conjunction with certain special events and program services, the Foundation extends credit to various individuals and groups. The Foundation had no accounts receivable at June 30, 2010.

Investments:

Investments are composed of publicly-traded marketable and debt securities with readily determinable fair values. All investments are reported at their fair values in the statement of financial position and unrealized gains and losses for the year are included in the statement of activities. Investment income and gains restricted by a donor are reported as increases in unrestricted net assets if the restrictions are met (either by passage of time or by use) in the reporting period in which the income and gains are recognized.

Property and Equipment:

The Foundation capitalizes at cost all expenditures for property improvements, buildings and furnishings for which it retains title. Other capital expenditures made on behalf of Sky Ranch for Boys, Inc., are expensed as incurred since, the Foundation does not assume title to such property. U.S. generally accepted accounting principles require not-for-profit organizations to recognize the cost of using long-lived tangible assets (depreciation) in general-purpose external financial statements. The Foundation depreciates its property and equipment using the straight-line method over estimated useful lives of fifteen to thirty-five years.

Allocation of Expenses:

Expenses are charged to program services, management and general, and fund raising based on direct expenditures incurred. Consultant fees are allocated equally between administration and fund raising based on the approximate time spent for those activities.

NOTES TO FINANCIAL STATEMENTS

Contributed Services:

No amounts have been reflected in the financial statements for contributed services. The Foundation generally pays for services requiring specific expertise. However, many individuals volunteer their time and perform tasks that assist the Foundation with programs, solicitations, and various administrative assignments. The value of donated services is not reflected in these statements, since it is not susceptible to objective measurement or valuation.

Income Taxes:

The Foundation is a not-for-profit organization as described in Section 501(c)(3) of the Internal Revenue Code (the "Code") and it is exempt from Federal income taxes on related income pursuant to Section 501(a) of the Code. The Internal Revenue Service has not classified the Foundation as a private foundation.

For the year ended June 30, 2010 management is highly confident that the full amount of the Foundation's deductions for tax purposes will be allowed. Therefore, no adjustments to these financial statements have been included for uncertain tax positions.

Date of Management Evaluation:

Management has evaluated subsequent events through November 3, 2010, the date on which the financial statements were available to be issued.

Note 2. Agreement with Sky Ranch for Boys, Inc.

Per terms of an agreement with Sky Ranch for Boys, Inc., dated November 26, 2007, the Foundation leases its land, buildings and equipment to the Ranch for a nominal fee of \$1 per year. The agreement requires the Ranch to maintain the premises, have insurance and pay the taxes for the property. The term of the lease is July 1, 2007 through July 1, 2012 with the Ranch having an option to renew the term for one additional five year period.

Additionally, the Foundation and the Ranch have entered into a trademark license agreement dated November 26, 2007, whereby the Ranch grants the Foundation the exclusive right to use the Sky Ranch trademark for permitted activities including lawful solicitation and fund raising for the benefit of the Ranch.

Subject to a memorandum of understanding between the Foundation and Ranch dated December 8, 2008, it is agreed that certain substantial transfers of funds from the Ranch to the Foundation may be subject to special conditions as determined by agreement.

NOTES TO FINANCIAL STATEMENTS

Note 3. Promises to Give

Included in "Contributions Receivable" are the following unconditional promises to give.

A .	1	
Amounts	due	1111.

Less than one year	\$	25,000
One to five years		25,000
Net unconditional promises to give	<u>\$</u>	50,000

The present value of cash flows from recorded promises to give does not vary significantly from the stated value. This being the case, no discount has been recorded. Additionally, the Foundation believes this receivable will be collected in full, therefore, no allowance has been established.

Note 4. Related parties

Per terms of an agreement dated February 5, 2006, the Foundation Treasurer receives a monthly fee for fund raising and administrative services provided to the Foundation. The term of the agreement is from April 1, 2006 through March 31, 2011. The fees for the year ended June 30, 2010, were \$103,336. Additionally, during the year ended June 30, 2010 the Foundation awarded and paid the Treasurer an \$8,000 bonus.

Note 5. Investments

At June 30, 2010, the cost, market value and unrealized appreciation (depreciation) of investments consisted of the following:

			Jun	e 30, 2010		
		Cost		Market Value	Ap	nrealized preciation preciation)
Designated Endowment Funds						
Merrill Lynch:						
Cash	\$	5,108	\$	5,108	\$	-
Money Funds		22,508		22,500		(8)
Equities		1,517,430		1,481,682		(35,748)
Fixed Income		875,145		956,873		81,728
Total Endowment Funds	\$	2,420,191	\$	2,466,163	\$	45,972
Student Loan Fund						
A G. Edwards Mutual Funds:						
American Mutual	\$	24,918	\$	19,437	\$	(5,481)
Fundamental Investors		22,559		21,748		(811)
Investment Company of America		24,467		18,898		(5,569)
Washington Mutual Investors		23,025		16,590		(6,435)
Total Student Loan Fund	\$	94,969	\$	76,673	\$	(18,296)
Total Investments	<u>\$</u>	2,515,160	\$	2,542,836	\$	27,676

NOTES TO FINANCIAL STATEMENTS

Note 6. Net assets

Designated by Board:

The Foundation's Board of Directors has decreed that certain investments shall be known as the Sky Ranch Endowment Fund. The principal of these funds comes mostly from estate gifts from deceased friends of the Ranch. It is the Board's intention that only a portion of the interest and dividend income generated each year be used to fund normal Foundation operations, and that the principal of the fund be allowed to grow. The Board has agreed to build the fund to the point that it generates up to \$500,000 annually in interest and dividends; such amount sufficient to fund a majority of the Foundation's annual activities. However, the Board reserves the right to use any portion of the designated funds including principal and income as it sees fit. At June 30, 2010, the market value of investments designated as endowment funds is \$2,363,794.

Temporarily Restricted:

The Foundation has created a Student Loan Fund per terms of a \$50,000 grant it received. The fund and the resulting investment income received is to be used only for higher education loans to Sky Ranch graduates and is therefore reported as temporarily restricted on the statement of financial position until such a time as it is used to make student loans. No student loans were made for the year ended June 30, 2010 and there are no outstanding loans as of that date. The temporarily restricted student loan balance at June 30, 2010 was \$76,673.

Permanently Restricted:

Per terms of a contribution the Foundation received in June 2005, \$100,000 has been invested in a separate fund referred to as the Davis/Carlos Scholarship Fund. Only the investment income from the fund is to be paid in support of scholarships to the Ranch. Income from the fund may also be used to support other ongoing Foundation operations. Investment gains to date through June 30, 2010 are approximately \$2,369 and the permanently restricted asset balance at June 30, 2010 is \$102,369.