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Ehrm 990

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements For the 2011 calendar year, or tax year beginning 2011, and ending D Employer Identification Number Check if applicable 20-0726745 Elves & More Address change 2200 Louetta Road #101 E Telephone number Name change Spring, TX 77388 281-907-0071 Initial return Terminated Amended return 868,586. G Gross receipts \$ F Name and address of principal officer David Moore H(a) Is this a group return for affiliates? Application pending Yes H(b) Are all affiliates included? Same As C Above Yes If 'No,' attach a list (see instructions) Tax-exempt status X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or Website: ► www.elvesandmore.org H(c) Group exemption number X Corporation L Year of Formation 2004 Form of organization Trust Other ► M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities. We use bicycles to (1) Strengthen Education (earn-a-bike contracts between students and teachers), (2) Drive Intervention (connect kids to mentors who keep them in school/out of trouble) and (3) Build Fitness and Health (riding and participating in after-school programs) Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 $\overline{10}$ Total number of individuals employed in calendar year 2011 (Part V. line 2a) 5 Total number of volunteers (estimate if necessary) 6 000 7a Total unrelated business revenue from Part VIII, column (C), line 12 7 a 0. 7b b Net unrelated business taxable income from Form 990-T, line 34 0. Prior Year **Current Year** 8 Contributions and grants (Part VIII, line 1h) 802,623. 752,807. 9 Program service revenue (Part VIII, line 2g) 247. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d). 586. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 954.-572. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 803,824 752,821. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 386,502 427,829. Benefits paid to or for members (Part IX, column (A), line 4) . Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 141,147 107,651 16a Professional fundraising fees (Part IX, column (A) line 14) b Total fundraising expenses (Part IX, column (D) 448 165,143 17 Other expenses (Part IX, column (A), lines [114-11d, 11f-24e) 162,500. 18 Total expenses Add lines 13-17 (must equal Plant IX) Hollum (A) 11/12 25 697,980. 692,792 Revenue less expenses Subtract line 18 from line 12 111,032 54,841 Beginning of Current Year End of Year GDEN. 243,469. 700,779. 20 Total assets (Part X, line 16) 21 26,441 428,910. Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from line 20 217,028 271,869 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Date Sian Here David Entrekin President Type or print name and title Print/Type preparer's name 8.8.13 P00072674 Jody Blazek Paid self-employed Preparer ► Blazek & Vetterling Use Only ► 2900 Weslayan, Suite 200 Firm's EIN > 76-0269860 Firm's address

Houston, TX 77027-5132

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

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Phone no

No

439-5739

X Yes

(713)

| Form 990 (2011) Elves & More | 20-0726745 | Page 2 |
|---|--|-----------------------|
| Part III Statement of Program Service Accomplishments | | |
| Check if Schedule O contains a response to any question in this Part III | | X |
| 1 Briefly describe the organization's mission By partnering with schools and community leaders, Elves & More: | is changing live | · S - |
| one bike at a time. Providing bicycles to underprivileged child | | to |
| O. D. I. the control of the control | an the area | |
| 2 Did the organization undertake any significant program services during the year which were not listed Form 990 or 990-EZ? | | X No |
| If 'Yes,' describe these new services on Schedule O. | , —— | |
| 3 Did the organization cease conducting, or make significant changes in how it conducts, any program s If 'Yes,' describe these changes on Schedule O | services? Yes | X No |
| 4 Describe the organization's program service accomplishments for each of its three largest program ser Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the a others, the total expenses, and revenue, if any, for each program service reported | rvices, as measured by examount of grants and allo | xpenses cations to |
| 4a (Code) (Expenses \$ 556,706. including grants of \$ 427,829.) (| (Revenue \$ |) |
| See Schedule O | | |
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| 4b (Code) (Expenses \$ including grants of \$) (F | Revenue \$ |) |
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| 4c (Code) (Expenses \$ including grants of \$) (R | Revenue \$ |) |
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| 4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$ | ١ | |
| 4e Total program service expenses ► 556, 706. | | |

| | m 990 (2011) EIVES & MOTE 20-072674 artifly Checklist of Required Schedules | ± 5 | | Page |
|------|---|------|----|----------|
| | | | Ye | s N |
| ٦ | Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If 'Yes,' complete Schedule A | 1 | X | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | X | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I | 3 | | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II | 4 | | X |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III | 5 | | × |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule Di Part I | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III | 88 | | x |
| 9 | Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV | 9 | | x |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V | 10 | | X |
| 11 | If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable | | Ž. | |
| i | a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI | 11 a | | x |
| ĺ | Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII | 11 b | | X |
| • | Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VIII | 11 c | | x |
| • | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX | 11 d | | х |
| • | e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X | 11 e | | X |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X | 11 f | | х |
| 12 a | Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII | 12a | X | _ |
| t | Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional | 12b | | х |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E | 13 | | X |
| 14 a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV | 14b | | Х |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV | 15 | | Х |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV | 16 | | Х |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) | 17 | | х |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II | 18 | х | |
| | | 19 | | Х |
| 20 a | Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H. | 20 | | <u>X</u> |

b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

| P | art IV Checklist of Required Schedules (continued) | | | |
|------|---|--------|--------|------|
| | | | Yes | N |
| 2 | 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 1? If 'Yes,' complete Schedule I, Parts I and II | 21 | ļ | Х |
| 22 | 2 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 | х | _ |
| 23 | Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's curren and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J | 23 | | Х |
| 24 | a 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, and 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 | | Х |
| | b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| | c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| | d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? | 24d | | |
| 25 | a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I | 25a | | Х |
| | b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I | 25b | | Х |
| 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 | | Х |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III | 27 | | х |
| | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV | 28a | | X |
| | b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV | 28b | х | |
| | c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV | 28c | | Х |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M | 30 | | Х |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I | 31 | | Х |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II | 32 | | х |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I | 33 | | Х |
| 34 | Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1. | 34 | | Х |
| 35 a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | Х |
| ł | Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 | 35b | | х |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 | 36 | | Х |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI | 37 | | Х |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 Note. All Form 990 filers are required to complete Schedule O | 38 | х | |
| BAA | | Form 9 | 90 (20 |)11) |

| Part V Statements Regarding Other IRS Filings and Tax Compliance | | | | |
|--|---|------------------|------------------------|--------------------|
| Check if Schedule O contains a response to any question in this Part V | | | | |
| | 1 1 | | Yes | N |
| 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable | 1a | _5 ,` " | . | 4 |
| b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | [1b] | <u> </u> | 17 | |
| c Did the organization comply with backup withholding rules for reportable payments to (gambling) winnings to prize winners? | vendors and reportable gaming | 1 c | | <u> </u> |
| 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax ments, filed for the calendar year ending with or within the year covered by this return | State- | 1 | A . 71A | |
| b If at least one is reported on line 2a, did the organization file all required federal empl | loyment tax returns? | 2b | X | _ |
| Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file | (see instructions) | 1 1 | | 1 |
| 3a Did the organization have unrelated business gross income of \$1,000 or more during to | the year? . | 3a | | > |
| b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Scheol | dule Q | 3 b | | Γ. |
| 4a At any time during the calendar year, did the organization have an interest in, or a sig financial account in a foreign country (such as a bank account, securities account, or or a significant country). | nature or other authority over, a other financial account)? | 4a | _ | } |
| b If 'Yes,' enter the name of the foreign country: ▶ | | 1 1 | ; | , ; . |
| See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank | k and Financial Accounts | | ; ji | , ' |
| 5a Was the organization a party to a prohibited tax shelter transaction at any time during | | 5a | | > |
| b Did any taxable party notify the organization that it was or is a party to a prohibited ta | | 5b | | > |
| c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? | | 5c | | H |
| 6a Does the organization have annual gross receipts that are normally greater than \$100, solicit any contributions that were not tax deductible? | ,000, and did the organization | | | Ι, |
| b If 'Yes,' did the organization include with every solicitation an express statement that s | such contributions or gifts were | 6a | | > |
| not tax deductible? | | 6b | , , | ., |
| 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution | and partly for goods and | | | ξ, |
| services provided to the payor? | • | 7a | <u>X</u> _ | |
| b If 'Yes,' did the organization notify the donor of the value of the goods or services prov | | 7b | Х | |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property Form 8282? | for which it was required to file | 7c | ı | X |
| d If 'Yes,' indicate the number of Forms 8282 filed during the year | 7 d | 70 | . 3 | |
| | | 7e | أتنكست | X |
| e Did the organization receive any funds, directly or indirectly, to pay premiums on a per | | 7f | | <u>-</u> 2 |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a person | | /' | | _^ |
| g If the organization received a contribution of qualified intellectual property, did the organization received a contribution of qualified intellectual property, did the organization received a contribution of qualified intellectual property, did the organization received a contribution of qualified intellectual property, did the organization received a contribution of qualified intellectual property, did the organization received a contribution of qualified intellectual property, did the organization received a contribution of qualified intellectual property, did the organization received as required? | | 7g | | |
| h If the organization received a contribution of cars, boats, airplanes, or other vehicles, d Form 1098-C? | lid the organization file a | 7h | | |
| 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supsupporting organization, or a donor advised fund maintained by a sponsoring organizationly holdings at any time during the year? | porting organizations. Did the tion, have excess business | 8 | | |
| 9 Sponsoring organizations maintaining donor advised funds. | ÷ | المنتفا | الإرب الدرجة المرجة | منسئك |
| a Did the organization make any taxable distributions under section 4966? . | | 9a | | |
| b Did the organization make a distribution to a donor, donor advisor, or related person? | | 9b | | |
| 10 Section 501(c)(7) organizations. Enter | | .6], | . } | ٠. |
| a Initiation fees and capital contributions included on Part VIII, line 12 | 10a | | | : ; |
| b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10 Ь |] ' | ' '.'. | 5 / ¹ 7 |
| 11 Section 501(c)(12) organizations. Enter | | 7- 1 | . , | |
| a Gross income from members or shareholders | 11 a | | : PH | 112 |
| b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | 11 6 | | | 5 H |
| 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in | lieu of Form 1041? . | 12a | | |
| b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year | 12 b | 3433 | 13 | |
| 13 Section 501(c)(29) qualified nonprofit health insurance issuers. | | | 11 12 | ,, |
| a is the organization licensed to issue qualified health plans in more than one state? | | 13a | [| _ |
| Note. See the instructions for additional information the organization must report on Sci | hedule O | 7,3 | 1. A | , , |
| b Enter the amount of reserves the organization is required to maintain by the states in | | | | ' |
| which the organization is licensed to issue qualified health plans . | 13b | 4° \$*# | " } 1 | 13 |
| c Enter the amount of reserves on hand | 13c | 1 4 | 11.1 | |
| 14a Did the organization receive any payments for indoor tanning services during the tax ye | | 14a | - | X |
| b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation | n in Scheaule U | 14b | | |

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. Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1 a If there are material differences in voting rights among members ild it of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are independent. 10 16 . . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents X since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a Х a The governing body? **b** Each committee with authority to act on behalf of the governing body? 8b Х Is there any officer, director or 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No Х 10 a Did the organization have local chapters, branches, or affiliates? 10a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b operations are consistent with the organization's exempt purposes? Х 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a Waser in b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a Х b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Х Schedule O how this is done 12 c See Schedule O Х 13 13 Did the organization have a written whistleblower policy? ... 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official See Schedule Q 15 a Х 15b **b** Other officers of key employees of the organization 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 16a taxable entity during the year? N. b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ► None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. X Upon request Own website Another's website Describe in Schedule 0 whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to See Schedule O the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization. Roberts 2200 Louetta Road, #101 <u>Spring TX 77388 281-907-0071</u>

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

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

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

- 1 a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

| Check this box if neither the organization | on nor any | relate | ed o | rgar | nızat | ion co | mpe | ensated any current o | fficer, director, or tru | stee. |
|--|--|-----------------------------------|-----------------------|----------------|--------------|--------------------------------|--------------|--|--|--|
| | | | | | C) | | _ | | | |
| (A) Name and title | (B) Average hours per week | unle | ss pe | ck m rson i | s bot | nan one h an off rustee) | box, icer | (D) Reportable compensation from the organization | (E) Reportable compensation from | (F) Estimated amount of other compensation |
| | (describe hours for related organiza- tions in Schedule O) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | (W-2/1099-MISC) | related organizations (W-2/1099-MISC) | from the organization and related organizations |
| (1) David Entrekin | | | | | | | | | | - |
| President | 5 | X_ | | X | L_ | | | 0. | 0. | 0. |
| (2) Thomas C. Davis | | | | | | | | | | |
| Vice President | 5 | X | | Х | | | | 0. | 0. | 0. |
| (3) Sally Clark |] | | | | | | | | | |
| Secretary | 2 | X | | X | | | _ | 0. | 0. | 0. |
| (4) David Key | | | | - 1 | | ł | - | | | |
| Treasurer | 2 | X | | Х | | | | 0. | 0. | 0. |
| (5) Jim Clepper |] | | | | - 1 | | ĺ | | | |
| Director | 2 | X | | | | | _ | 0. | 0. | 0. |
| (6) Jim Glanville | | | | ŀ | | | - 1 | | | |
| Director | 2 | X | | | _ | | | 0. | 0. | 0. |
| _(7) Dr. Philip Leggett | | - | | - | | | - 1 | _ | | |
| Director | 2 | X | | _ | | | | 0. | 0. | 0. |
| _(8) Robert Marsh | | | İ | - (| - [| ĺ | ĺ | _ | . 1 | |
| Director | 2 | _X_ | _+ | | | | _ | 0. | 0. | <u> </u> |
| (9) John Miller | _ | | ļ | - 1 | | | | | _ | |
| Director | 2 | Х | - | - | -4 | | | 0. | 0. | 0. |
| (10) David Moore | _ | | | - | J | | | | | _ |
| Director | 5 | Х | \dashv | | _ | | - | 0. | 0. | <u> </u> |
| (11) Kelli Weinzierl | | | | - 1 | - 1 | | - 1 | | | • |
| Director | 2 | X | \rightarrow | \dashv | - | | -} | 0. | 0. | 0. |
| (12) Lynda Layne Winne Director | 2 | х | | | | | | <u>0</u> . | 0. | 0. |
| (13) Rebecca Roberts | | | \neg | | \top | | | | | |
| Executive Direc | 50 | | | \mathbf{x} | } | | | 100,000. | 0. | 0. |
| (14) | | | | | | | | | | |
| | | | | | | | | | | |

| Part VII Section A. Officers, Directors, Trust | ees, l | Key | En | nple | oye | es, | an | d Highest Con | pensated I | Empl | oyees (cont) |
|---|--|--------------|-----------------------|--------------------------|--------------|---------------------------------|--------------|--------------------------------------|--|------|--|
| | | | | • | C) | | | | | | |
| (A) Name and title | (B) Average hours per | offi | cer a | heck ess pe nd a c | rson | than is bot or/trus | tee) | Reportable compensation from | (E) Reportable compensation frelated organiza | rom | (F) Estimated amount of other compensation |
| | week (describ e hours for related organi- zations | or dire | Institu | Officer | Key e | Highest compensated employee | Former | the organization (W-2/1099-MISC) | related organiza (W 2/1099-MIS | SC) | from the organization and related |
| | hours for related | ector | Institutional trustee | | Key employee | st com | " | | | İ | organizations |
| | organizations | ustee | truste | | 28 | pensa | | | 1 | | |
| | Sch O) | | o l | | | ted | | | | | |
| (15) | | | | | | | | | | | |
| (16) | | | | | | | | | | | |
| (17) | | | | | | | - | | | | |
| (18) | | | | | _ | | | | | | |
| (19) | | | | | | | | | | | |
| (20) | | | | | | | | | | | |
| (21) | | | | | | | | | | | |
| (22) | | | | | | | | | | | |
| (23) | | | | | | | | | | | |
| (24) | | | | | | | | | | | |
| (25) | | | | 1 | | | | | | | |
| 1 b Sub-total | | | | | _ | | - | 100,000. | | 0. | 0. |
| c Total from continuation sheets to Part VII, Section A | | | | | | 1 | > | 100,000. | | 0. | 0. |
| d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited | to thos | se In | sted | abo | ve) | | | | 100,000 of re | | 0. le compensation |
| from the organization ► 0 | | | | | | | | | | | · |
| 3 Did the organization list any former officer, director o on line 1a? If 'Yes,' complete Schedule J for such inc | r truste dividua | ee, k | сеу е | emp | loye | e, oi | r hig | ghest compensate | d employee | | Yes No |
| 4 For any individual listed on line 1a, is the sum of reporting organization and related organizations greater that such individual | ortable an \$150 | con 0,00 | nper 0? <i>l</i> : | isatı f 'Ye | on a | and o | othe lete | er compensation fr Schedule J for | om | | 4 X |
| 5 Did any person listed on line 1a receive or accrue cor for services rendered to the organization? If 'Yes,' co. | mpensa mplete | atior Sch | n from | m aı ıle J | าy น for | nrela such | ateo | י d organization or וז erson | ndividual | | 5 X |
| Section B. Independent Contractors | | | | | | | | | | | |
| 1 Complete this table for your five highest compensated compensation from the organization Report compens | | | | | | | | | | | ax year |
| (A) Name and business address | | | | | | | | (B) Description of | services | Co | (C) ompensation |
| | | | | | | | 4 | | | | |
| | | | | | | | + | | | | |
| | | | | _ | | | 7 | | | | |
| | | | | | | | + | | | | |
| 2 Total number of independent contractors (including bu \$100,000 in compensation from the organization ► 0 | | ımıte | ed to | tho | se l | ısted | d at | pove) who received | I more than | | |

| , | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
|-------------------------|---|----------------------|--|--|---|
| GIFTS, GRANTS | 1 a Federated campaigns 1 a b Membership dues 1 b c Fundraising events 1 c 314,494 d Related organizations 1 d | | | A Control of the Cont | |
| CONTRIBUTIONS, | e Government grants (contributions) 1 All other contributions, gifts, grants, and similar amounts not included above 9 Noncash contributions included in lns 1a-1f. \$ 642 h Total. Add lines 1a-1f | ► 752,807. | | The state of the s | |
| PROGRAM SERVICE REVENUE | Business Code 2 a b c d | | 1 | | |
| PROGRAI | f All other program service revenue g Total. Add lines 2a-2f | • | Fra Giliani | 12 L 2 L 2 L 2 L 2 L 2 L 2 L 2 L 2 L 2 L | |
| | Investment income (including dividends, interest and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties | 586. | | | 586. |
| | (i) Real (ii) Personal 6 a Gross rents. b Less rental expenses c Rental income or (loss) | | | Harry Sales | |
| | d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory b Less cost or other basis | | | | |
| | and sales expenses c Gain or (loss) d Net gain or (loss) | - | | | John Mary |
| OTHER REVENUE | 8a Gross income from fundraising events (not including \$\frac{314,494.}{01}\$ of contributions reported on line 1c) See Part IV, line 18 a 115,193 | | | | |
| ОТНЕ | b Less direct expenses b 115,765 c Net income or (loss) from fundraising events | -572. | | | -572. |
| | 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses b | | | | |
| | c Net income or (loss) from gaming activities | | | | |
| | b Less cost of goods sold c Net income or (loss) from sales of inventory . Miscellaneous Revenue Business Code | | | interior and a second | Wil. 11986 . |
| | b | | | | |
| | d All other revenue e Total. Add lines 11a-11d 2 Total revenue. See instructions | | 0. | 0. | ;; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; |

Part IX | Statement of Functional Expenses

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

| | Check if Schedule O contains a | response to any quest | ion in this Part IX | | |
|----------|--|-----------------------|------------------------------|--|--|
| Do 6b | o not include amounts reported on lines , 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| - | Grants and other assistance to governments and organizations in the United States See Part IV, line 21 | | | | |
| 2 | Grants and other assistance to individuals in the United States See Part IV, line 22 | 427,829 | . 427,829 | | The state of the s |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 | | | The state of the s | |
| 4 | Benefits paid to or for members | | | 大陸では、大学を大学を持つし、 | · 李维() / 李林() |
| 5 | Compensation of current officers, directors, trustees, and key employees | 100,000 | . 25,001. | 25,000. | 49,999. |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | 0 | 0. | 0. | 0. |
| 7 | Other salaries and wages. | | <u> </u> | <u> </u> | |
| 8 | Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions) | | | | |
| 9 | Other employee benefits. | | <u> </u> | <u> </u> | |
| 10 | Payroll taxes | 7,651. | 1,913. | 1,913. | 3,825. |
| 11 | Fees for services (non-employees) | | | | |
| | a Management | | | | |
| | b Legal | | | | |
| | c Accounting | 17,576. | 5,858. | 5,859. | 5,859. |
| (| d Lobbying | | | | |
| (| Professional fundraising services See Part IV, line 17 | | E. 1. P. P. 1. 1 | | |
| 1 | Investment management fees | | | | |
| 9 | g Other | 15,500. | 6,200. | 4,650. | 4,650. |
| 12 | Advertising and promotion | | <u> </u> | | |
| 13 | Office expenses | 10,646. | 2,331. | 619. | 7,696. |
| 14 | Information technology | 5,120. | 2,048. | | 3,072. |
| 15 | Royalties | | | | |
| 16 | Occupancy | 2,644. | 1,058. | 793. | 793. |
| 17 | Travel | 3,387. | 1,355. | 1,016. | 1,016. |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | | | | · · · · · · · · · · · · · · · · · · · |
| | Interest | | <u> </u> | <u> </u> | |
| | Payments to affiliates | | | | |
| | Depreciation, depletion, and amortization | 2 050 | 1 070 | 1 070 | |
| 23 | Insurance | 3,958. | 1,979. | 1,979. | |
| 24 | Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) | | | | |
| _ | Other bicycle program expenses | 75,808. | 75,808. | | |
| | Event expenses | 14,539. | ,5,000. | | 14,539. |
| | Other expenses | 13,322. | 5,326. | 3,997. | 3,999. |
| d | | 15,522. | 5,520. | | 5,555. |
| | All other expenses | | | | |
| | Total functional expenses. Add lines 1 through 24e | 697,980. | 556,706. | 45,826. | 95,448. |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation | | | | |
| | Check here ► | | | | |

| Pa | art) | (Balance Sheet | | | |
|-------------|-------|---|--|--|---------------------------|
| | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | | 1 | |
| | 2 | Savings and temporary cash investments | 204,313 | . 2 | 677,526. |
| | 3 | Pledges and grants receivable, net | 34,245 | | 23,157 |
| | 4 | Accounts receivable, net | 2,592 | . 4 | |
| | 5 | Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. | } `` [| 5 | |
| | 6 | Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) | V4. | 6 | |
| A S E | 7 | Notes and loans receivable, net | | 7 | |
| S E | 8 | Inventories for sale or use . | 2,319. | 8 | 96. |
| T S | 9 | Prepaid expenses and deferred charges | | 9 | |
| | 10 a | Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D | | | |
| | 1 | Less accumulated depreciation 10b | ************************************** | 10 c | |
| | 11 | Investments – publicly traded securities | | 11 | |
| | 12 | Investments – other securities See Part IV, line 11 | | 12 | |
| | 13 | Investments – program-related See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | | 14 | |
| | 15 | Other assets See Part IV, line 11 | | 15 | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 243,469. | 16 | 700,779. |
| | 17 | Accounts payable and accrued expenses . | 26,441. | 17 | 428,910. |
| | 18 | Grants payable | | 18 | |
| - 1 | 19 | Deferred revenue | | 19 | |
| ı. | 20 | Tax-exempt bond liabilities | | 20 | |
| Å | 21 | Escrow or custodial account liability Complete Part IV of Schedule D | | 21 | |
| L | 22 | Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. | Barrethur a service | 22 | |
| Ţ | 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | |
| E S | 24 | Unsecured notes and loans payable to unrelated third parties | <u>.</u> | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D | | 25 | |
| | 26 | Total liabilities. Add lines 17 through 25. | 26,441. | 26 | 428,910. |
| N E T | | Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29 and lines 33 and 34. | | , , š , , , , , , , , , , , , , , , , , | |
| Ą | 27 | Unrestricted net assets | 217,028. | 27 | 271,869. |
| SSET | 28 | Temporarily restricted net assets | | 28 | |
| š | | Permanently restricted net assets | | 29 | |
| 유 | | Organizations that do not follow SFAS 117, check here ► and complete | and a second | 7 | 31 31 N |
| - 1 | | lines 30 through 34. | | | |
| POZO | 30 | Capital stock or trust principal, or current funds | | 30 | |
| - 1 | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| B L L | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| ANCES | 33 | Total net assets or fund balances | 217,028. | 33 | 271,869. |
| ĘΓ | 34 | Total liabilities and net assets/fund balances | 243,469. | 34 | 700,779. |

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| Form 990 (2011) Elves & More | 20-0726745 | 5 Page 1 |
|--|--------------------|-----------------|
| Part XI Reconciliation of Net Assets | | |
| Check if Schedule O contains a response to any question in this Part XI | | |
| | | |
| 1 Total revenue (must equal Part VIII, column (A), line 12) | 1 | 752,821. |
| 2 Total expenses (must equal Part IX, column (A), line 25) | 2 | 697,980. |
| 3 Revenue less expenses Subtract line 2 from line 1 | 3 | 54,841. |
| 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 217,028. |
| 5 Other changes in net assets or fund balances (explain in Schedule O) | 5 | 0. |
| 6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) | . 6 | 271,869. |
| Part XII Financial Statements and Reporting | | |
| Check if Schedule O contains a response to any question in this Part XII | | |
| 1 Accounting method used to prepare the Form 990. Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O | | Yes No |
| 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 |
| c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for over- review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, expl | | 2c X |
| in Schedule O. d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year v separate basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis | vere issued on a | |
| 3a As a result of a federal award, was the organization required to undergo an audit or audits as set fort Audit Act and OMB Circular A-133? | h in the Single | 3a X |
| b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo or audits, explain why in Schedule O and describe any steps taken to undergo such audits | the required audit | 3b |
| 300 | | Form 990 (2011) |

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047 2011

Open to Public Inspection;

Employer identification number

Schedule A (Form 990 or 990-EZ) 2011

Name of the organization 20-0726745 Elves & More Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is. (For lines 1 through 11, check only one box) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h. 11 Type III — Functionally integrated Type III - Other Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization? 11 g (i) A family member of a person described in (i) above? 11 g (ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organization(s) (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (iv) Is the organization in column (i) listed in (v) Did you notify (i) Name of supported (vi) Is the (vii) Amount of support (ii) EIN e organization column (i) of your support? organization column (i) organized in the your governing document? Yes No Yes No Yes No (A) (B) (C) (D) (E) AND THE - P. 253. 1 136 to 2 1 Total

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

Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

| Se | ction A. Public Support | | | | | | |
|------------|---|---|--|--|---|---|--------------------|
| Cal beg | endar year (or fiscal year inning in) ► | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants') | 1,078,151. | 892,508. | 793,816. | 802,623. | 752,807. | 4,319,905. |
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | 0. |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | 0. |
| 4 | Total. Add lines 1 through 3 | 1,078,151. | 892,508. | 793,816. | 802,623. | 752,807. | 4,319,905. |
| 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) | | | | | | 458,727. |
| 6 | Public support. Subtract line 5 from line 4 | | | | | | 3,861,178. |
| Sec | tion B. Total Support | | 27 4 7 4 44 | du trataria de la | 4 | | 3,001,170. |
| Cale | ndar year (or fiscal year nning in) ► | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 7 | Amounts from line 4 | 1,078,151. | 892,508. | 793,816. | 802,623. | 752,807. | 4,319,905. |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 226. | 174. | 42. | 247. | 586. | 1,275. |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | 0. |
| 10 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) | | | | | | 0. |
| 11 | Total support. Add lines 7 through 10 | | | | | 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | 4,321,180. |
| 12 | Gross receipts from related activi | ties, etc (see inst | ructions) | | | 12 | 0. |
| | First five years. If the Form 990 organization, check this box and | stop here | | d, third, fourth, or | fifth tax year as | a section 501(c)(3 | s) <u>► □</u> |
| | tion C. Computation of Pub | | | | | 11 | 22 25 21 |
| | Public support percentage for 20 | | | e 11, column (f)). | | 15 | 89.35 % 80.72 % |
| | Public support percentage from 2 33-1/3% support test — 2011. If the and stop here. The organization of | ne organization di | d not check the b | ox on line 13, and | the line 14 is 33 | LL | |
| b | 33-1/3% support test — 2010. If the and stop here. The organization of | ne organization di | d not check a box | on line 13 or 16a | a, and line 15 is 3 | 3-1/3% or more, o | _ |
| | 10%-facts-and-circumstances tes or more, and if the organization in the organization meets the 'facts- | neets the 'facts-ar | nd-circumstances' | test, check this b | ox and stop here | . Explain in Part I | V how |
| | 10%-facts-and-circumstances tes or more, and if the organization norganization meets the 'facts-and | neets the 'facts-ar -circumstances' te | nd-circumstances' est The organizat | test, check this b ion qualifies as a | oox and stop here publicly supported | . Explain in Part I d organization | V how the ► |
| | Private foundation. If the organiz | ation did not chec | k a box on line 13 | 3, 16a, 16b, 17a, o | | | |
| AA | | | | | Sche | eaule 🗛 (Form 990 | or 990-EZ) 2011 |

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

| Section A. Public Support | | | | | | |
|--|--|---|--|--|--|--------------------------|
| Calendar year (or fiscal yr beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| Gifts, grants, contributions | (4) 2007 | (B) 2000 | (0) 2003 | (d) 2010 | (e) 2011 | (i) Total |
| and membership fees received (Do not include any 'unusual grants,') | | | | | | |
| 2 Gross receipts from admis- | | + | | | | |
| sions, merchandise sold or | | | | | 1 | |
| services performed, or facilitie | | | | | 1 | |
| furnished in any activity that is related to the organization's | ^ | 1 | | | | |
| tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the | | T | | | | |
| organization's benefit and either paid to or expended on its behalf | | } | | | | |
| 5 The value of services or | | | | | | |
| facilities furnished by a governmental unit to the | , | | |] | | |
| organization without charge | | | | | | |
| 6 Total. Add lines 1 through 5 | | | | | | |
| 7a Amounts included on lines 1, | | | | | | |
| and 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 | 1 | | | | | |
| and 3 received from other than disqualified persons that | 1 | į | | | | |
| exceed the greater of \$5,000 o | r [| | | | | |
| 1% of the amount on line 13 for the year | | l | | | | |
| c Add lines 7a and 7b . | | | | | | |
| | 4-46 | n is Merit meetind | WENT HOUSE ALANTICLICATE | Nage 10 10 10 10 10 10 10 10 10 10 10 10 10 | est destification of Section | |
| 8 Public support (Subtract line 7c from line 6.) | | | | | | |
| Section B. Total Support | | <u> </u> | <u> </u> | <u> </u> | · | |
| Calendar year (or fiscal yr beginning in) | (a) 2007 | (h) 2000 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| SELECTION TOUR ST. HOURS IN MUNICIPAL HILL | (a) 200/ | (D)2006 (| (6) 2009 | (4) 4010 | | (II) IU(a) |
| 9 Amounts from line 6 | (a) 2007 | (b) 2008 | (6) 2009 | (d) 2010 | (6) 2011 | (I) Total |
| 9 Amounts from line 6 10 a Gross income from interest. | (a) 2007 | (B) 2008 | (c) 2009 | (4) 2010 | (6) 2017 | (i) Total |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received | (a) 2007 | (b) 2008 | (c) 2009 | (4) 2010 | (6) 2011 | (I) Total |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, | (a) 2007 | (B) 2008 | (C) 2009 | (a) 2010 | (6) 2011 | (i) Total |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | (a) 2007 | (B) 2008 | (6) 2009 | (a) 2010 | (6) 2011 | (I) Total |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable | (a) 2007 | (B) 2008 | (C) 2009 | (a) 2010 | (6) 2011 | (I) Total |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | (a) 2007 | (B) 2008 | (C) 2009 | (a) 2010 | (6) 2011 | (I) Total |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 | (a) 2007 | (B) 2008 | (C) 2009 | (a) 2010 | (6) 2011 | (I) Total |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b | (a) 2007 | (B) 2008 | (C) 2009 | (a) 2010 | (6) 2011 | (I) Total |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business | (a) 2007 | (B) 2008 | (C) 2009 | (a) 2010 | (6) 2011 | (I) Total |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b | (a) 2007 | (B) 2008 | (E) 2009 | (a) 2010 | (6) 2011 | (I) Total |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | (a) 2007 | (B) 2008 | (C) 2009 | (a) 2010 | (6) 2011 | (I) Total |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | (a) 2007 | (B) 2008 | (C) 2009 | (a) 2010 | (6) 2011 | (I) Total |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in | (a) 2007 | (B) 2008 | (C) 2009 | (a) 2010 | (6) 2011 | (I) Total |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) | | (B) 2008 | (C) 2009 | (a) 2010 | (6) 2011 | (I) Total |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add ins 9, 10c, 11, and 12) | | | | | | (I) Total |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add ins 9, 10c, 11, and 12) 14 First five years. If the Form 990 | is for the organiza | | | | | (I) Total |
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| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add Ins 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and | is for the organizad stop here | ition's first, second | d, third, fourth, or | | a section 501(c)(3) | . ▶ |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add Ins 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and Section C. Computation of Pu | is for the organizad stop here bblic Support Po | ation's first, second ercentage | d, third, fourth, or | | a section 501(c)(3) | 8 |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add ins 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and Section C. Computation of Put 15 Public support percentage from | is for the organizadistop here Siblic Support Po | etion's first, second ercentage (f) divided by line Part III, line 15 | d, third, fourth, or | | a section 501(c)(3) | |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add ins 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and section C. Computation of Put Public support percentage from Section D. Computation of Investigation of Section D. Computation of Investigation similar processing from Section D. Computation of Investigation similar processing from Section D. Computation of Investigation similar processing from Section D. Computation of Investigation similar processing from Section D. Computation of Investigation similar processing from Section D. Computation of Investigation similar processing from Section D. Computation of Investigation similar processing from Section D. Computation of Investigation similar processing from Section D. Computation of Investigation processing from Section D. Computation of Investigation processing from Section D. Computation of Investigation processing from Section D. Computation of Investigation processing from Section D. Computation of Investigation processing from Section D. Computation of Investigation processing from Section D. Computation of Investigation processing from Section D. Computation of Investigation processing from Section D. Computation of Investigation processing from Section D. Computation of Investigation processing from Section D. Computation of Investigation processing from Section D. Computation of Investigation processing from Section D. Computation of Investigation processing from Section D. Computation processing from Section D. Computation processing from | Is for the organizad stop here Splic Support Polic Support Polic Support Polic Support Polic Schedule A, vestment Incom | ercentage If) divided by line Part III, line 15 The Percentage | d, third, fourth, or | fifth tax year as a | a section 501(c)(3) 15 16 | ▶ |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add lins 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and Section C. Computation of Public support percentage from Section D. Computation of Inv. 17 Investment income percentage | us for the organizad stop here Old Support Po Old (line 8, column 2010 Schedule A, vestment Incom for 2011 (line 10c, organization) | ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided | d, third, fourth, or 13, column (f)) | fifth tax year as a | 15 16 17 | ▶ |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add Ins 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and Section C. Computation of Public support percentage from Section D. Computation of Inv. 17 Investment income percentage | us for the organizad stop here Oll (line 8, column 2010 Schedule A, yestment Incom Tor 2011 (line 10c, from 2010 Schedule) | ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided e A, Part III, line 1 | d, third, fourth, or 13, column (f)). | fifth tax year as a | 15 16 17 18 | ▶ |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add Ins 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and Section C. Computation of Public support percentage from Section D. Computation of Inv. 17 Investment income percentage 19 a 33-1/3% support tests — 2011. It is not more than 33-1/3%, check | is for the organization of the organization of the organization of this box and stop | ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided e A, Part III, line 1 did not check the to | d, third, fourth, or e 13, column (f)) by line 13, column 7 box on line 14, areation qualifies as | fifth tax year as a | 15 16 17 18 than 33-1/3%, and ted organization | % % % line 17 ► |
| 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add Ins 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and section C. Computation of Public support percentage from Section D. Computation of Inv. 17 Investment income percentage 19 a 33-1/3% support tests — 2011. In page 19 a 33-1/3% support tests — 2011. In page 2011. | is for the organization of | ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided e A, Part III, line 1 did not check the te here. The organiz did not check a bo nd stop here. The | d, third, fourth, or e 13, column (f)) by line 13, column 7 box on line 14, areation qualifies as x on line 14 or line organization qualifies qualifies qualifies qualifies as the context of the context | fifth tax year as a nn (f)) nd line 15 is more a publicly suppor ne 19a, and line 16 lifies as a publicly | a section 501(c)(3) 15 16 17 18 than 33-1/3%, and ted organization is more than 33-1 supported organization supported organization is supported organization. | |

| Schedule A | (Form 990 | or 990-EZ | 2) 2011 | Elves | & More | | | | | 20-0 | / <u>26/45</u> | Page |
|------------|--------------------------------------|-----------|---------------------|---------------------|-------------------------|-----------------------|-------------------|-------------------------|------------------------|-------------------------|--------------------------------|---------------|
| Part IV | Supplem Part II, III (See Inst | ental In | formation or 17b: a | on. Com and Part | plete this III, line | s part to 12. Also | provide comple | the expla te this pa | anations rt for any | required b additiona | y Part II, Iir I informatic | ne 10; on. |
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SCHEDULE D

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Employer identification number

Elves & More 20-0726745 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 1 Total number at end of year Aggregate contributions to (during year) 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? Yes 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? No Part II | 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 education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat 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 2a a Total number of conservation easements b Total acreage restricted by conservation easements 2b 2 c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the lax 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? No 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 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes 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 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items **►** S (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 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 ▶\$ b Assets included in Form 990, Part X

| Cabadala D (Carra 000) 2011 Eleva | or C Moro | | | | | | 20-071 | 6745 | <u>.</u> | D |
|---|------------------|----------|-----------------------------|----------|----------------------------|---------------|--------------------------|---------------|----------------|-------------|
| Schedule D (Form 990) 2011 Elve | | ection | s of Art. Hist | orica | Treasures. | or Oth | 20-072 er Similar As | | | Page |
| Using the organization's acquisitems (check all that apply) | | | | - | | | | | | |
| a Public exhibition b Scholarly research | | | d Loan | | change programs | S | | | | |
| c Preservation for future gene | erations | | 0 00 | | | | | | | |
| 4 Provide a description of the org Part XIV | anızatıon's coll | lections | s and explain ho | w the | y further the orga | anızatıor | 's exempt purpo | se in | | |
| 5 During the year, did the organiz assets to be sold to raise funds | ation solicit or | receive | e donations of a | rt, his | torical treasures, | or othe | r sımılar 12 | Ye | ıc. | □No |
| Part IV Escrow and Custodia line 9, or reported an | al Arrangem | ents. | Complete if | the o | organization a | | | | | |
| 1a Is the organization an agent, truincluded on Form 990, Part X? | ıstee, custodiai | n, or ot | ther intermediar | y for o | contributions or o | ther ass | ets not | Ye | s | No |
| b If 'Yes,' explain the arrangemen | t in Part XIV a | nd com | nplete the follow | nng ta | ble: | | | | | |
| | | | | | | <u> </u> | | Amou | nt | |
| c Beginning balance | | | • | | | _ | c | | | |
| d Additions during the year | | | | | | <u> </u> | d | | | |
| e Distributions during the year | | | | | | | e | | | |
| f Ending balance | | | | _ | | | <u>f]</u> | | | |
| 2a Did the organization include an a | | m 990, | Part X, line 21. | ? | | • | | Ye | 5 | No |
| Part V Endowment Funds. Co | | oe ora | lanization and | CWAY | ad 'Ves' to Fo | rm 990 | Dart IV line | 10 | | |
| Fait V Lindownient Funds. Co | (a) Current | | (b) Prior yea | | (c) Two years bac | $\neg \tau -$ | f) Three years back | $\overline{}$ | Four yea | re back |
| 1 a Beginning of year balance | (a) current | <u></u> | (b) Thoryea | <u>'</u> | (C) IWO Jeals Dat | | 1) Tillee Jeal's Dack | 1 (6) | Tour yea | 12 Dack |
| b Contributions | | | | | | | | 3. 30.0 | ы. <i>i</i> ., | |
| c Net investment earnings, gains, and losses | | | | | | | | 3 859 1 | | 12 L. 23 |
| d Grants or scholarships | | <u> </u> | | | ··· | | | 1 - 4 | * , | |
| e Other expenditures for facilities and programs | | | | - | | | | , ; ; | (4, | , |
| f Administrative expenses . | | | | | | | | | | |
| g End of year balance | Ĺ | | | | | | | · · | | 1 |
| Provide the estimated percentag | e of the curren | it year | end balance (lin | ie 1g, | column (a)) held | as | | | | |
| a Board designated or quasi-endov | | | 8 | | | | | | | |
| b Permanent endowment ► | % | | | | | | | | | |
| c Temporarily restricted endowmer | | | % | | | | | | | |
| The percentages in lines 2a, 2b, | and 2c should | equal | 100% | | | | | | | |
| 3a Are there endowment funds not a organization by | n the possessi | on of t | he organization | that a | re held and admi | ınıstered | I for the | | Yes | No |
| (i) unrelated organizations | | | | | | | | 3a(i) | | |
| (ii) related organizations | | | | | | | | 3a(ii) | | |
| b If 'Yes' to 3a(II), are the related of | - | | | | | | | _3b_ | | L |
| 4 Describe in Part XIV the intended | | | | | | | | | | |
| Part VI Land, Buildings, and I | | | | | - " | /-\ A | | (-1) | D l | |
| Description of property | (| | or other basis vestment) | | Cost or other asis (other) | de | ccumulated preciation | (a) (| Book va | nue |
| 1 a Land | <u> </u> | | | | | , 'n 'ar | | | | |
| b Buildings | · | | | | | | | | | |
| c Leasehold improvements | - | | | | | | | | | |
| d Equipment | - | | | | | | | | | |
| e Other | in (d) must see | ıal For | m 990 Part V s | olumi | (B) line 10(c) \ | | | | | 0. |
| Total. Add lines 1a through 1e (Colum | ii (u) must equ | iai FUIT | II 33U, FAIL∧, C | Julil | (L), inte 10(c).) | | Schedu | le D (F | orm ga | |
| | | | | | | | Concad | | J J.J. | -, -0 . 1 |

TEEA3302L 01/16/12

Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)

2 FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

(9) (10) (11)

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| Schedule D (Form 990) 2011 Elves & More | 20-0 | 726745 Page 4 |
|---|----------------------------------|-------------------------------|
| Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Finan | icial Statements | |
| 1 Total revenue (Form 990, Part VIII, column (A), line 12) | | 752,821. |
| 2 Total expenses (Form 990, Part IX, column (A), line 25) | | 697,980. |
| 3 Excess or (deficit) for the year Subtract line 2 from line 1 | | 54,841. |
| 4 Net unrealized gains (losses) on investments | | |
| 5 Donated services and use of facilities | | |
| 6 Investment expenses | | |
| 7 Prior period adjustments | | |
| 8 Other (Describe in Part XIV.) | • | · |
| 9 Total adjustments (net) Add lines 4 through 8 | | |
| | 3 and 0 | 54,841. |
| 10 Excess or (deficit) for the year per audited financial statements. Combine lines PartiXII% Reconciliation of Revenue per Audited Financial Statemer | | |
| | its vitti Kevende per Keta | 1,122,394. |
| | | 1,122,394. |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: | 2a | |
| a Net unrealized gains on investments | 2b 253,808. | |
| b Donated services and use of facilities | | |
| c Recoveries of prior year grants | 2c | |
| d Other (Describe in Part XIV) | 2d | 252.222 |
| e Add lines 2a through 2d | | 2e 253,808. |
| 3 Subtract line 2e from line 1 | | 868,586. |
| 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 | | |
| a Investment expenses not included on Form 990, Part VIII, line 7b | 4a | |
| b Other (Describe in Part XIV) See Part XIV | 4b −115,765. | |
| c Add lines 4a and 4b | | -115,765. |
| 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) | 5 | |
| Part XIII Reconciliation of Expenses per Audited Financial Stateme | nts With Expenses per Re | |
| 1 Total expenses and losses per audited financial statements | 1 | 1,067,553. |
| 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 | | |
| a Donated services and use of facilities | 2a 253,808. | |
| b Prior year adjustments . | 2b | |
| c Other losses | 2c | |
| d Other (Describe in Part XIV) See Part XIV . | 2d 115,765. | 3 |
| e Add lines 2a through 2d | . 2 | |
| 3 Subtract line 2e from line 1 | 3 | |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| a Investment expenses not included on Form 990, Part VIII, line 7b | 4a | 2 |
| b Other (Describe in Part XIV) | 4b | |
| c Add lines 4a and 4b | 4. | |
| 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) | | 697,980. |
| Part:XIV: Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Pa | at III Imaa Ia and 4 Bart IV Ima | a 1h a=d 0h |
| Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, line any additional information | les 2d and 4b Also complete this | s part to provide |
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| | | 11. B /F 000: 500 |
| BAA TEEA3304L 05/25/11 | Sche | dule D (Form 990) 2011 |

| Schedule D (Form 990) 2011 Elves & More Part XIV Supplemental Information (continued) | 20-0726745 | Page ! |
|---|------------|-------------|
| Part XIV Supplemental Information (continued) | | |
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SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

Attach to Form 990 or Form 990-EZ. See separate instructions. Employer identification number Name of the organization

| Elves & More | | | | | 20-072674 | 15 |
|--|--------------------|-------------|-----------------------------|-----------------------------------|---------------------------------------|--|
| Partil Fundraising Activities. Com | plete if the orga | nization a | answered ' | Yes' to Form 990, Part | IV, line 17 | |
| 1 Indicate whether the organization | | | | llowing activities Check | all that apply | |
| a Mail solicitations | | | е | Solicitation of non | -government grants | |
| b Internet and email solicitation | ns | | f | Solicitation of gove | ernment grants | |
| c Phone solicitations | | | q |) - | | |
| d In-person solicitations | | | | , <u> </u> | , | |
| 2 a Did the organization have a written employees listed in Form 990, Pa | en or oral agree | ment with | any indivi | dual (including officers, | directors, trustees or k | key — — |
| employees listed in Form 990, Pa | ort VII) or entity | in connec | tion with p | professional fundraising | services? | Yes X No |
| b If 'Yes,' list the ten highest paid i compensated at least \$5,000 by t | he organization | tities (fun | draisers) p | oursuant to agreements | under which the fundra | niser is to be |
| (i) Name and address of individual | (ii) Activity | | fundraiser | (iv) Gross receipts from activity | (v) Amount paid to | (vi) Amount paid to |
| or entity (fundraiser) | | | dy or control ributions? | nom activity | (or retained by) fundraiser listed in | (or retained by) organization |
| | <u> </u> | <u> </u> | | | column (i) | |
| | | Yes | No | | | |
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
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| 10 | | | | | | |
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| Total | | | | lad as advibutes as had | . h | 0. |
| 3 List all states in which the organize or licensing | ation is register | ea or licer | isea to soi | icit contributions or has | been notified it is exer | npt from registration |
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| | | G (Form 990 or 990-EZ) 2011 Elves | | | 20-07 | |
|--------------|--------------|---|--|---|--|---|
| Pa | <u>rt:II</u> | Fundraising Events. Complete if more than \$15,000 of fundraising List events with gross receipts groups. | event contribution | nswered 'Yes' to Fo is and gross income | orm 990, Part IV, III e on Form 990-EZ, | ne 18, or reported lines 1 and 6b. |
| RE | | | (a) Event #1 Bicycle Ball (event type) | (b) Event #2 Golf Classic (event type) | (c) Other events 3 (total number) | (d) Total events (add column (a) through column (c)) |
| REVENU | 1 | Gross receipts | 339,478. | 43,000. | 45,055. | 427,533. |
| Ě | 2 | Less Charitable contributions | 233,090. | 43,000. | 36,250. | 312,340. |
| | 3 | Gross income (line 1 minus line 2) | 106,388. | | 8,805. | 115,193. |
| | 4 | Cash prizes | | | | |
| n | 5 | Noncash prizes | 2,553. | 10,196. | | 12,749. |
| D I R E C T | 6 | Rent/facility costs | 40,883. | 13,446. | 6,490. | 60,819. |
| | 7 | Food and beverages | | 4,083. | 709. | 4,792. |
| EXPESSES | 8 | Entertainment | 28,047. | | 6,648. | 34,695. |
| N S E | 9 | Other direct expenses | 1,761. | | 949. | 2,710. |
| 5 | 10 11 | Direct expense summary Add lines 4 thro Net income summary Combine line 3, co | = :: | | ▶ | 115,765. -572. |
| Pa | tilli | Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a. | | s' to Form 990, Part | IV, line 19, or rep | |
| REVENUE | | φτο,ουσ στη στιπ 350 <u>ΣΕ</u> , πιο σα. | (a) Bingo | (b) Pull tabs/Instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add column (a) through column (c)) |
| Ë | 1 | Gross revenue | | | | |
| E | 2 | Cash prizes | | | | |
| D X P R E | 3 | Non-cash prizes | | | | |
| ESTES | 4 | Rent/facility costs | | | | |
| | 5 | Other direct expenses | | | | difficulty (18 transport Service, America, Secretaristic, M.) |
| | 6 | Volunteer labor | Yes% | Yes% | Yes % | |
| | 7 | Direct expense summary Add lines 2 thro | ugh 5 in column (d) | | > | |
| | 8 | Net gaming income summary. Combine lir | nes 1, column (d) and l | ine 7 | • | |
| а | Is the | the state(s) in which the organization ope e organization licensed to operate gaming ,' explain | activities in each of the | ese states? | | Yes No |
| | | any of the organization's gaming licenses s,' explain | | _ | • | Yes No |

| Schedule G (Form 990 or 990 | EZ) 2011 Elves & Mor | ce | 2 | 0-0726745 | Page 3 |
|---|---|--|--------------------------|--|-------------|
| 11 Does the organization of | | | | Yes | No |
| 12 Is the organization a gra administer charitable gai | intor, beneficiary or trustee oming? | of a trust or a member of a partne | rship or other entity fo | rmed to Yes | ∏ No |
| 13 Indicate the percentage | of gaming activity operated | ın | | 1 1 | |
| a The organization's facility | · · · | | | 13a | 8 |
| b An outside facility | | | | 13b | 8 |
| 14 Enter the name and add | ress of the person who prep | ares the organization's gaming/sp | ecial events books and | records | |
| Name ► | | | | | |
| Address ► | | | | | |
| b If 'Yes,' enter the amoun | t of gaming revenue receivened by the third party • \$_ | rty from whom the organization red d by the organization ► \$ | | —————————————————————————————————————— | No |
| | | | | | |
| Address ► | | | | | 7 |
| Address | | | | | • |
| 16 Gamıng manager ınforma | ition | | | | |
| Name ► | | | | | |
| Gaming manager comper | nsation ► \$ | | | | |
| Description of services pro | ovided > | | | | |
| Director/officer | Employee | Independent contr | actor | | |
| 17 Mandatory distributions | | | | | |
| a Is the organization require state gaming license? | ed under state law to make o | charitable distributions from the ga | ming proceeds to reta | in the Yes | No |
| | | law to be distributed to other exe | mpt organizations or s | pent in the | |
| | ot activities during the tax ye | this part to provide the expl | anations required | by Part Llina 2 | <u></u> |
| columns (III) and | d (v), and Part III, lines | s 9, 9b, 10b, 15b, 15c, 16, a | nd 17b, as applica | ible. Also comp | lete |
| this part to prov | ide any additional infor | rmation (see instructions). | | | |
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| BAA | | TEEA3703L 05/20/11 | Schedule G | (Form 990 or 990- | EZ) 2011 |

| (Form 990) | Gra Gove | nts and Oth rnments, ar | ner Assistance nd Individuals i | Grants and Other Assistance to Organizations, Governments, and Individuals in the United States | is, ates | | OMB No. 1545-0047 |
|--|---|--|---|--|--|---|------------------------------------|
| Department of the Treasury Internal Revenue Service | Complete | Complete if the organizatio | _ | answered 'Yes' to Form 990, Part IV, lines 21 or 22. • Attatch to Form 990. | 21 or 22. | <u> </u> | Open to Public |
| Name of the organization Elves & More | | | | | | Employer identification number 20-0726745 | ation number |
| 드 | ants and Assistar | ice | | | | | |
| | s to substantiate the a e grants or assistance | ر ع م | nts or assistance, the | grantees' eligibility for t | he grants or assistanc | e, and | X Yes |
| 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States | procedures for monito | ring the use of gr | ant funds in the United | States See Part | rt IV | | ; |
| Farmis Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,0 Part II can be duplicated if additional space is needed | ce to Governmen or any recipient the additional space i | ts and Organi nat received m s needed | zations in the Uni lore than \$5,000. (| zations in the United States. Complete if the organization answered 'Yes' to lore than \$5,000. Check this box if no one recipient received more than \$5,000. | te if the organizat one recipient rec | ion answered 'Ye | ss' to \$5,000. ▼ |
| 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, | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| (1) | | | | | Cain | | |
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| (2) | | | | | | | |
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| <u>(3)</u> | | | | | | | |
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| (8) | | | | | 5 5 | | |
| | | | | | | | |
| 2 Enter total number of section 501(c)(3) and government organizations listed |) and government org | ions listed | in the line 1 table | | | | 0 |
| 1 | alle ille ille ille | lable | • | | | A | |

| 20-0726745 Pag | the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22 needed. |
|---|---|
| Schedule I (Form 990) (2011) Elves & More | Part III Grants and Other Assistance to Individuals in the United States. Comp Part III can be duplicated if additional space is needed. |

| F-2 | | | | | |
|--|--------------------------|-----------------------------|---|--|--|
| (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) | (f) Description of non-cash assistance |
| 1 Bicycles and helmets | 7,052 | | 427, 829. | Cost | Bicycles and helmets |
| 2 | | | | | |
| £ | | | | | |
| 4 | | | | | |
| 5 | | | | | |
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| 7 | | | | | |
| Partily Supplemental Information. Complete this part to provide the information required in Part I, line | olete this part to p | rovide the informa | tion required in Pa | 12 | and any other additional information. |
| Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S. | ing <u>Use of Grants</u> | Funds in U.S. | | | |
| ļ | ool officials | in the Houston | in the Houston Independent School | chool | |
| | | eight-county_G | eight-county Greater Houston Area. | Area. | |
| Focusing on children who are at risk, the Charity and ISDs select "feeder patterns" | at_risk,_the_C | narity and ISD | s select "feede | r patterns" | |
| of schools (a High School, and the Middle S | the Middle So | chools and Eler | and Elementary Schools that feed | that feed | |
| it), and work with administrators | and teach | ers to offer ea | offer earn-a-bike contracts to all | racts to all | |
| students who want one. Those contracts call | | for children | for children to improve their performance | r_performance | |
| in at least one of four areas, such as impr | such_as_impr | oved academics | oved academics, improved attendance, | ndance, | ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; |
| improved attitudes and behaviors or greater | ors or greater | participation in | in after-school programs | ol programs | |
| such as tutoring, Saturday school, or mento | hool, or mento | red_programs_(| red_programs_(like_sports). The_contracts | The contracts | |
| are aimed at getting children to take | В | step toward achie | achieving a better education, | education, and | |
| ВАА | | | | | Schedule I (Form 990) (2011 |

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No 1545-0047 2011

Open to Public

| nent of the Treasury Revenue Service |
|---|
| |

(9) (10) Complete if the organization answered
 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
 Attach to Form 990 or Form 990-EZ. ► See separate instructions.

| Name of the organization | | | | | | 1 | Employer | ıdentific | ation n | umber | | |
|--------------------------|-------------------------------|--|---|--|--------------|------------------------------|------------------|-----------------|---|---|--|-----------------|
| Elves & More | | | | | | | 20-07 | 2674 | 15 | | | |
| | Benefit Transaction | | | | | | | | | | | |
| Complete it | the organization answ | ered 'Ye | s' on Fo | rm 990, Part IV, line 2 | 5a or 25b | , or Form 99 | 0-EZ, P | 'art V, | line 4 | 0b. | | |
| 1 (a |) Name of disqualified person | | - 1 | | (b) Descrip | tion of transaction | n | | | | (c) Cor | rected |
| <u> </u> | | | | | | | | | | | Yes | No |
| (1) | | | | | | , | | | | | | ļ |
| (2) | | | | | _ | | | | | | ↓ | |
| (3) | | | | | | | | | | | | <u> </u> |
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| (5) | ···· | | | | | · | | | | | ļ | |
| (6) | | | | ······································ | | | | | | | | L |
| | of tax imposed on the | organiza | ition mai | nagers or disqualified p | ersons d | uring the yea | r unde | r _ A | | | | |
| section 4958 | | | | | | | • | . ► \$ | | | | |
| | of tax, if any, on line 2 | | | | 1 | •••• | | > \$ | | —— | | |
| | and/or From Inter | | | | | \ F7 D \ | | | | | | |
| | the organization answei | | | | | J-EZ, Part V, Balance due | | | | | | |
| (a) Name of interester | d person and purpose | the orga | to or from anization? | (c) Original principal amount | (0) | salance que | (e) In | default? | by bo | ard or | (g) Wi agreer | ritten ment? |
| | | | | | | | | T | comm | - | | |
| | | То | From | | | | Yes | No | Yes | No | Yes | No |
| (1) | | | ļ — | | | | | 1 | | | | |
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| (9) (10) | | | | | | | +- | | | -+ | \longrightarrow | |
| otal | | | Ll | ▶ \$ | | | 2000 | 85.23EB | - The Control of the | 385.73 | | <u> </u> |
| | Assistance Benef | itina In | tereste | | | | And And . | Atta Ca tu Line | State Life to | न पास्त्र | BRAIGH. | · gringe \$4 - |
| | he organization answer | | | | | | | | | | | |
| (a) Name of inte | | | | ship between interested person | and | | c) Amoun | t and tvr | ne of ass | | | |
| (a) Name of the | rested person | ` | , | the organization | | , | 0) / | t una typ | -c 01 433 | | | |
| (1) | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | |
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| (6) | | T | | | | | | | | | | |
| (7) | | | | | | | | | | | | |
| (8) | | | | | | | | | | | | |

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

Schedule L (Form 990 or 990-EZ) 2011

| Schedule L (Form 990 or 990-EZ) 2011 Elv | es & More | | 20-0726745 | Page 2 |
|--|---|---------------------------------------|--------------------------------|---|
| Part IV Business Transactions Inv Complete if the organization answe | volving Interested Pers | ons. IV line 28a 28h or 28d | | |
| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of transaction | (d) Description of transaction | (e) Sharing of organization's revenues? |
| (1) Wendy Brons | Wife of bd mbr | 13,140. | Sales of merch to org | Yes No |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) (6) | | | | |
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| Part V Supplemental Information | - | | | |
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047 **2011**

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
► Attach to Form 990 or 990-EZ.

Open to Public

Employer identification number

| Elves & More | 20-0726745 |
|---|-------------------------|
| Form 990, Part III, Line 4a - Program Service Accomplishments | |
| Elves & More focuses on at-risk children throughout Greater Hou | ston and uses new |
| bicycles as the principal way of doing this. Here's how: | |
| | |
| Strengthening Education: We partner with Independent School Dist | tricts to let children |
| earn_bicycles_through_contracts_with_their_teachers_Teachers_se | et_each_child's |
| specific goals-such as improved academics, better attendance, mo | ore-positive_attitudes_ |
| and participation in after-school activities; Students and their | parents sign |
| contracts to meet those goals. As the semester progresses, teach | ers use the contracts |
| to motivate students. At semester's end, those students who meet | their goals are |
| rewarded with new bicycles from Elves & More. Students who parti | cipated in our 2009 |
| earn-a-bike program consistently out-performed their peers in ac | ademics, attendance |
| and_attitudes | |
| | |
| Driving Intervention: In their own neighborhoods, at-risk childr | en_have_many_bad |
| mentors,"_such as drug dealers, gang leaders,_ex-convicts_and_t | hose who live lives |
| on welfare or live in the streets. Sadly, they have too few good | mentors. With a bike |
| to provide badly needed basic transportation, an at-risk child's | world_gets_much |
| larger. Sure, bikes let kids play, but they also enable them to | join after-school |
| programs, attend tutoring classes, go to the library, and partic | ipate in church and |
| community center activities of every stripe. At each of these, c | hildren_encounter |
| caring adult mentors who guide their lives in positive ways, enco | ouraging them to stay |
| in school and out of trouble. | |
| | |
| Building Fitness & Health: By providing two wheels to serve as ba | asic transportation |
| and permit participation in after-school programs, our bicycles e | encourage children to |

| Elves & More | 20-0726745 | |
|--|---------------------------------|--|
| Form 990, Part III, Line 4a - Program Service Accomplishments | | |
| get out and ride, as well as participate in a host of oth | her healthy activities which | |
| build muscle, burn fat and improve cardiovascular fitness. Studies show that | | |
| healthier bodies lead to better performance in school. Wi | ith more time spent in | |
| positive activities, the temptation to engage in drug use | e, crime and gang | |
| participation is greatly reduced, thereby reducing those | health risks which plague | |
| at-risk kids, too. | | |
| 115 771 Biggalog to date. During 2011 Flyes & More gave | 7 052 now bigwales to | |
| 115,771 Bicycles to date: During 2011, Elves & More gave | | |
| at-risk children, bringing its cumulative total of bicycl | les to 113,771 bicycles since | |
| | | |
| Form 990, Part VI, Line 11b - Form 990 Review Process | hand much we before | |
| The President reviews the Form 990 and provides a copy to | board members before | |
| filing. | | |
| Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement | | |
| The conflict of interest policy is monitored by careful s | | |
| transactions by the Executive Director, a treasury staff | | |
| accounting staff member. In addition, for key transaction | | |
| involved in the selection of vendors and the establishment | t of terms, and for the | |
| most significant transactions, either the Executive Commit | ttee (of the Board) or full | |
| Board approval is provided. Finally, the Charity obtains | independent audits from a | |
| third-party auditor who has access to the full Board of D | irectors. | |
| Form 990, Part VI, Line 15a - Compensation Review & Approval Process for 0 | CEO, Exec. Dir., or Top Mgtment | |
| Elves & More does not compensate any officers. It does compensate | mpensate its Executive | |
| Director following the process described below: | | |
| | | |
| 1. Information is gathered from Board Members (primarily) | and other charities about | |

| | | • | | | |
|----------|---|-------|--------|---------|------|
| Schedule | 0 | (Form | 990 or | 990-EZ) | 2011 |

Name of the organization

Page 2

Employer identification number

| Elves & More | 20-0726745 |
|---|--|
| Form 990, Part VI, Line 15a - Compensation Review & Approval Process for CEO, | Exec. Dir., or Top Mgtment (continued) |
| comparable compensation for persons serving in a similar capa | city in other |
| charitable organizations and in commercial businesses. | |
| 2. The performance of the individual is assessed by the President | dent and key board |
| members. | |
| 3. The capabilities and needs of the Charity are assessed | |
| 4. The proposed salary is presented to the board for approval, | the salary is set, |
| and written records documenting the process are retained. | |
| Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available | |
| Documents are available on the organization's website. | -~ |
| | |
| Form 990, Sch. B - Sch. of Contributors | |
| | |
| The contributions reported in Schedule B are considerably lower | r than those received |
| due to IRS restrictions on how amounts are reported there. The | major differences |
| are: (1) in-kind donations of services and facilities are not | reported, (2) |
| contributions from related entities and family members are rep | orted separately and |
| (3) contributions are reduced by any benefits provided by the | Charity in exchange |
| for such contributions. In addition, donated auction items are | not reported as |
| donations in Schedule B and amounts paid to purchase auction i | tems are reduced by |
| the value of such items. This listing below shows donors who w | ould have been listed |
| on Schedule B if their donations had not been excluded from re | porting under item 1 |
| above. | |
| | |
| Davis Brothers Construction (\$15,600), Freeman (\$34,038), LD Sy | ystems (\$3,619), |
| Reliant Park/SMG (\$200,000), RoNan Enterprises (\$4,838), U Hau | l Storage (\$552) |
| | |
| | |

2011 Schedule D, Part XIV - Supplemental Information Page 6

Elves & More 20-0726745

Schedule D, Part XII, Line 4b
Other Revenue Included On Form 990 But Not Included In F/S

Direct donor benefits Total \$\frac{5}{5} - \frac{-115}{15}, \frac{765}{765}.\$

Schedule D, Part XIII, Line 2d
Other Expenses And Losses Per Audited F/S

Direct donor benefits \$\frac{115}{5}, \frac{765}{15}.\$

Total \$\frac{5}{5} \frac{115}{115}, \frac{765}{765}.\$

2011

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Elves & More

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a better future in life before the children receive their bicycles. Once children receive their bicycles, they use them for fun, exercise and as basic transportation to and from their homes to participate in after-school sports and other programs where adult mentors help children stay in school and out of trouble.