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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

MENDE

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

The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

For the 2011 calendar year, or tax year beginning and ending Check if applicable C Name of organization D Employer identification number X Address CONNECTED NATION, INC. Name change 61-1394934 Doing Business As Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Termin-270-781-4320 360 EAST 8TH AVENUE 411 X Amended 16,063,794 City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-BOWLING GREEN, KY 42101 H(a) Is this a group return pending F Name and address of principal officer. THOMAS W. FERREE Yes X No for affiliates? SAME AS C ABOVE H(b) Are all affiliates included? Yes Tax-exempt status: X 501(c)(3) ___ 501(c) () (insert no.) 4947(a)(1) or If "No," attach a list, (see instructions) J Website: ► WWW.CONNECTEDNATION.ORG H(c) Group exemption number ▶ K Form of organization: X Corporation Year of formation: 2001 M State of legal domicile: KY Trust Association Other > Part I Summary Briefly describe the organization's mission or most significant activities: TO ACCELERATE ECONOMIC DEVELOPMENT THROUGH THE GROWTH AND APPLICATION OF TECHNOLOGY Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. 0436535253 HAY D 7 Number of voting members of the governing body (Part-VL line 1a) 5 Number of independent voting members of the governing bady (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2011 (Part V, line 24) 102 5 609 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C)/line 12 0. 7a b Net unrelated business taxable income from Form 990-T. line 34 0. 7h **Prior Year Current Year** 11,164,605. 16,054,726. 8 Contributions and grants (Part VIII, line 1h) 302,500. 10,000. 9 Program service revenue (Part VIII, line 2g) 14,799. -932. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0. 0. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 481,904. 16. 063,794. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 77,282. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 823,619. 13 0, n Benefits paid to or for members (Part IX, column (A), line 4) 6,019,011. 6,805,237. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 ი 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 17,238. b Total fundraising expenses (Part IX, column (D), line 25) 6,415,670. 8,233,561. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 12,511,963. 15,862,417. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 201,377. -1,030,059. Revenue less expenses, Subtract line 18 from line 12 Beginning of Current Year **End of Year** 2,307,942. 2,296,163. 20 Total assets (Part X, line 16) 3,240,211. 3,027,055. Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from line 2017 0 € 2015 -730,892 -932,269. 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. Signature of office Sign - 10- 1015 THOMAS FERREE, PRESIDENT Here Type or print name and title PTIN Check Print/Type preparer's name Preparer's signature Paid RICHARD C. SHIELDS, CPA RICHARD C. 03/19/15 SHIELDS P00852717 BLUE & CO. 35-1178661 Preparer Firm's name Firm's ElN 250 WEST MAIN STREET, SUITE Use Only Firm's address LEXINGTON, KY 40507 Phone no. 859-253-1100 X Yes_ May the IRS discuss this return with the preparer shown above? (see instructions)

SCANNED MAY

TY FOR ALL STATE LIBRARIES. IN SOME STATES,

OUCED EVENTS SUPPORT THAT STATE LIBRARY'S LAUNCH OF

edule O.)

Including grants of \$) (Revenue \$)

15,522,274.

Form 990 (2011)

SEE SCHEDULE O FOR CONTINUATION(S)

Total program service expenses

Form 990 (2011) CONNECTED NATION, INC.

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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		$_{\mathtt{X}}$
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		$_{\mathtt{X}}$
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, 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	В		Х
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		Х
0	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		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
ď	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	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	11f	x	
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		Х
ь	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	
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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
5	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		X
6	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		X
7	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	17		X
8	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		X
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	complete Schedule G, Part III	19		X
:0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			990 r	2011

_	i (commutety)			
_:	Dilli		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		х	ļ
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	_21_		<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			x
00	column (A), line 27 If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	22	 -	 ^-
23	· · · · · · · · · · · · · · · · · · ·	l		1
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		х	}
24-	Schedule J	_23	A_	
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, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			x
	Schedule K. If "No", go to line 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		
		24b	 -	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
ن.	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
2 5a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05-		х
_	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	i		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			х
ne	Schedule L, Part I	25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			х
27	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		_
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	27		х
00	of any of these persons? If "Yes," complete Schedule L, Part III	21	-	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	x	1
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X	
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200	-23	
·	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			 -
00	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
٠.	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	اٽ -		_ -
02	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
-	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	x	
34	Was the organization related to any tax-exempt or taxable entity?	<u> </u>		
•	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	000		
_	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	<u> </u>		 -
	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 19?	 		
	Note. All Form 990 filers are required to complete Schedule O	38	x	
		_ ~		

CONNECTED NATION, INC. 61-1394934 Page 5 Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response to any question in this Part V Yes No 57 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? Х 10 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 102 filed for the calendar year ending with or within the year covered by this return X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? X За b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? **b** If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5с 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? X 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 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 services provided to the payor? X 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 76 f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? R Sponsoring organizations maintaining donor advised funds. 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: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10h 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 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 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 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 Schedule O. **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 c Enter the amount of reserves on hand ... 14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a

Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI \mathbf{X} Section A. Governing Body and Management Yes No 8 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 5 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a b Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses in Schedule O 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No." go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 X 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a **b** Other officers or key employees of the organization X 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶KY Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website X Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization. 20 THE ORGANIZATION - 270-781-4320 EAST 8TH AVENUE, NO. 411, BOWLING GREEN, 42101

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

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

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

Check this box if neither the organization in	or any related	orga	nıza	tion	con	npen	sate	ed any current officer, d	rector, or trustee.	
(A)	(B)							(D)	(E)	(F)
Name and Title	Average	(do		Pos heck		l than d	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	erson is both an director/trustee)		an	compensation	compensation	amount of
	week				1	77,003	Γ	from	from related	other
	(describe	Frecto	ł	1	1	ŀ	1	the organization	organizations (W-2/1099-MISC)	compensation from the
	related	100	ate			sated		(W-2/1099-MISC)	(44-2/1055-141130)	organization
	organizations	truste	institutional trustee	1	ag	шрег	1	(** 27 : 600 11/100)		and related
	ın Schedule	lgngl	ntion	 	읦	stco	G.			organizations
	(describe hours for related organizations in Schedule	P de	Instit	Officer	Keye	Highest compensated employee	Former			
(1) BRIAN R. MEFFORD		1	Γ_							
CHAIRMAN & CEO / DIRECTOR	50.00	X	L	х	L.	L		213,705.	0.	11,211.
(2) R. ERIC MILLS	1	1		}		1	l	1		
SECRETARY/DIRECTOR	50.00	X	L	Х	L			0.	0.	0.
(3) JOHN DAVIES										
DIRECTOR	1.00	X	L		L			0.	0.	0.
(4) WENDY LAZARUS	i								li:	
DIRECTOR	1.00	X		L	_			0.	0.	0.
(5) GRANT E. SEIFFERT		l						_		
DIRECTOR	1.00	X		<u> </u>	_		_	0.	0.	0.
(6) ROY R. STALLMAN JR.				l				_	_	_
DIRECTOR	1.00	X	L	<u> </u>	_	L		0.	0.	0.
(7) THOMAS W FERREE		١ <u>_</u>							_	
CHIEF OPERATING OFFICER (PRESIDENT)	50.00	X	<u> </u>	X	<u> </u>	L.		194,841.	0.	19,200.
(8) LINDA JOHNSON VITALE				l					_	_
DIRECTOR	1.00	X	_	_		<u> </u>		0.	0.	0.
(9) JOHN HAMM		}		`					_	
TREASURER	50.00	Ļ	_	X	<u> </u>	\sqcup		120,425.	0.	14,704.
(10) MARK MCELROY		1			l			4 4-4	_	4
CHIEF STRATEGY OFFICER	50.00	 		X	<u> </u>	_		157,484.	0.	18,340.
(11) THOMAS FRITZ	F0 00	}						44-4-6		44
EXECUTIVE DIRECTOR, OH	50.00	}_ _	_	_	<u> </u>	X		145,156.	0.	16,397.
(12) THOMAS KOUTSKY	F0 00	l						454 000		4- 64-
CHIEF POLICY COUNCIL	50.00	┡	_		<u> </u>	X		174,002.	0.	<u>17,065.</u>
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Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	yee	s, aı	nd ŀ	ligh	<u>est</u>	st Compensated Employees (continued)						
(A)						(D)	(E)			(F)				
Name and title	Average	(do		Pos hecku) than d	ne	Reportable	Reportable	, }	Es	timate	b;	
	hours per	box	, unles	ss per	son ı	s both	an	compensation	compensation	on	an	nount	of	
	week	-	cer an	o a o	recto	or/trus	(ee)	from	from related			other	_	
	(describe hours for	Individual trustee or director						the	organization			pensa om the		
	related	5 E	tee			sated	ļ	organization (W-2/1099-MISC)	(W-2/1099-MI	³⁽⁾		om tne anızat		
	organizations	ruste	1 trustee		မ္မ	преп		(44-2/1099-141130)			•	d relat		
	in Schedule	dualt	otiona		ngloy	stcol	<u>ا</u>					anızatı		
	O)	lagi.	institutional 1	Officer	Key employee	Highest compensated employee	Form				Ū			
]				
		_	-			\vdash	├							
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				_			ļ							
					<u> </u>									
						T	\vdash							
		_	<u> </u>	_	_	_	Ļ_	 						
1b Sub-total	<u> </u>				L	┢	Ь—	1,005,613.		0.	9	6,9	17.	
c Total from continuation sheets to Part VI	. Section A	•				•		0.		0.		·	0.	
d Total (add lines 1b and 1c)	•				•	•		1,005,613.		0.	9	6,9		
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re		000 of reportable	 e				
compensation from the organization				_			_		·				10	
										1		Yes	No	
3 Did the organization list any former officer,		stee	е, ке	y en	npio	yee,	or I	highest compensated er	nployee on		,	- }	X	
line 1a? If "Yes," complete Schedule J for so 4 For any individual listed on line 1a, is the su		e co	mne	nea	tion	and	oth	ner compensation from t	he organization	ŀ	_3_			
and related organizations greater than \$150			-					•	ne organization	İ	4	x		
5 Did any person listed on line 1a receive or a			•						dual for services	İ				
rendered to the organization? If "Yes." com	•				-					ĺ	5	1	X	
Section B. Independent Contractors					7010	<u> </u>								
1 Complete this table for your five highest co										oensat	ion fro	om		
the organization. Report compensation for t	he calendar ye	ear e	ndın	g w	ith c	or wi	thin	the organization's tax y	ear					
(A) Name and business	address						Ì	(B) Description of s	ervices	C	Omne:	;) nsatioi	n	
THOROUGHBRED RESEARCH, 19		ÖΡ	L	ANI	Ε.		\dashv	Bodon priori or c	10171000		On po	-	<u> </u>	
SUITE 1017, LOUISVILLE, K					_,		}	RESEARCH SER	VICES	Ī	86	0,2	10.	
MILLS LAW FIRM							7							
86 WEST MAIN STREET, INEZ	, KY 41	22	4				þ	LEGAL		ı	43	9,72	20.	
MJ CONSULTING, 840 DEER CLOVER CIRCLE,														
CASTLE ROCK, CO 80108								ENGINEERING)	ı	19	7,10	00.	
ESRI											_			
380 NEW YORK STREET, REDL	ANDS, C	A	92	<u> 37</u>	3_		_	RESEARCH SER	VICES		10	3,42	<u> 29.</u>	
										i				
2 Total number of independent contractors (in	ncludina but no	ot lin	nited	l to 1	thos	e lis	l ted	above) who received me	ore than					
\$100,000 of compensation from the organization	=				4					ı				

Form 990 (2011)

Part VIII Statement of Revenue (D) (B) (C) (A) Revenue excluded from Total revenue Related or Unrelated exempt function business tax under sections 512, 513, or 514 revenue revenue 1 a Federated campaigns 1a b Membership dues c Fundraising events d Related organizations 1d 14473135. e Government grants (contributions) f All other contributions, gifts, grants, and 1f 1,581,591. similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 16054726. h Total. Add lines 1a-1f **Business Code** 10,000. 10,000. 2 a CONNECT PROGRAM PROFES 541519 f All other program service revenue 10,000. g Total. Add lines 2a-2f Investment income (including dividends, interest, and -932. -932.other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (II) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (II) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ ___ _ of contributions reported on line 1c). See Part IV. line 18 Other b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less. direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less. cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a d All other revenue e Total. Add lines 11a-11d 16063794. 10,000. 0. -932 Total revenue. See instructions.

Form 990 (2011) CONNECTED NAT 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).

COTTL	olete columns (B), (C), and (D). Check if Schedule O contains a respor	ise to any question in th	s Part IX		
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	823,619.	823,619.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1 100 521	1 060 645	31,698.	1 100
_	trustees, and key employees	1,102,531.	1,069,645.	31,030.	1,188.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	4,476,600.	4,410,756.	58,291.	7,553.
7	Other salaries and wages	4,470,000.	4,410,730.	30,231.	1,555.
8	Pension plan accruals and contributions (include	165,025.	162,202.	2,496.	327.
0	section 401(k) and section 403(b) employer contributions) Other employee benefits	637,021.	625,071.	10,642.	1,308.
9	Payroll taxes	424,060.	417,324.	6,069.	667.
10 11	Fees for services (non-employees):		417,324.	0,005.	
'' a	Management	39,543.	33,686.	5,823.	34.
a b	Legal	560,137.	477,172.	82,477.	488.
C	Accounting	44,150.	37,611.	6,501.	38.
d	Lobbying	11/1001	5,70220	- 0,5021	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				· .
12	Advertising and promotion	1,071,807.	1,058,542.	13,227.	38.
13	Office expenses	255,671.	248,720.	6,715.	236.
14	Information technology	381,733.	363,964.	17,241.	528.
15	Royalties				
16	Occupancy	299,665.	284,256.	14,951.	458.
17	Travel	728,291.	721,236.	6,358.	697.
18	Payments of travel or entertainment expenses	· · · · · · · · · · · · · · · · · · ·			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	48,763.	46,124.	135.	2,504.
20	Interest	57,301.	11,555.	45,727.	19.
21	Payments to affiliates .				
22	Depreciation, depletion, and amortization	484,420.	478,185.	6,050.	185.
23	Insurance .	59,621.	56,549.	2,981.	91.
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.)				
а	CONSULTANTS	1,737,929.	1,734,683.	2,446.	800.
b	RESEARCH	1,155,556.	1,155,556.		
C	COMPUTER DISTRIBUTIONS	993,285.	993,285.		
d	DATASETS	147,573.	147,573.		
e	All other expenses	168,116.	164,960.	3,077.	79.
<u>25</u>	Total functional expenses. Add lines 1 through 24e	15,862,417.	15,522,274.	322,905.	17,238.
26	Joint costs. Complete this line only if the organization		Ì		
	reported in column (B) joint costs from a combined		1	}	
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2011)
400044	01-23-12				Lorm WMU (2011

Part X | Balance Sheet (A) (B) Beginning of year End of year 576,668. 1,575,695. 1 Cash - non-interest-bearing 1 2 Savings and temporary cash investments 2 402,517. 66,557. 3 Pledges and grants receivable, net 3 395,977. 621,718. Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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) Notes and loans receivable, net 7 36,891. 10,900. 8 Inventories for sale or use 8 42,730. 50,316. Prepaid expenses and deferred charges a 10a Land, buildings, and equipment, cost or other 1,682,476 basis. Complete Part VI of Schedule D 10a 487.738 610,266. 194,738. b Less: accumulated depreciation 10b 11 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 9,566. 9,566. 15 Other assets. See Part IV, line 11 15 2,307,942. 2,296,163. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 1,689,520. 846,034. 17 Accounts payable and accrued expenses 17 Grants payable 18 18 114,680. 901,247. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Liabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 1,236,429. 1,071,047. Secured mortgages and notes payable to unrelated third parties 23 199,582. 198,582. 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 0 10,145. Schedule D 3,240,211 3,027,055. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances -1,<u>332,831</u>. -874,517. 27 Unrestricted net assets 27 143,625. Temporarily restricted net assets ... 400,562. 28 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances -932,269. -730,892. 33 Total liabilities and net assets/fund balances 2,307,942. 2,296,163.

Form	990 (2011) CONNECTED NATION, INC.	61-	139493	4	Page	e 12
	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI				[\Box
•						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	<u> 16,0</u>			
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,8			
3	Revenue less expenses. Subtract line 2 from line 1	_3	2	01,	<u>, 37</u>	<u>'7.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	- 9	32,	, 26	9.
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	-7	30,	89	2.
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII				[
		-	<u> </u>	Y	es	No
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	0.		1	- 1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		_2a	<u>. _</u>		X
b	Were the organization's financial statements audited by an independent accountant?		_2h	, 2	K	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		. 20	; 2	K	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.		T	Ī	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	l on a				
	separate basis, consolidated basis, or both:			ļ	ļ	
	Separate basis X Consolidated basis Both consolidated and separate basis				Ì	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Aud	ıt		- }	
	Act and OMB Circular A-133?		3a	1 2	ζ	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audi	t			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		24	. 1 3	7	

Form 990 (2011)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public Inspection

lame of t	he organizati		ED NATION, I	NC.) E		identification nur 1-1394934	nber
Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st complet	te this part	t.) See inst	ructions.		1 1331331	
ne organ 1	zation is not a A church, co A school des A hospital or A medical res	a private foundation nvention of churches cribed in section 17 a cooperative hospi search organization	because it is: (For lines 1 s, or association of church (0(b)(1)(A)(ii). (Attach Sotal service organization opperated in conjunction of	through 1 ches descr hedule E.) described i	1, check on settion	only one be ection 170 170(b)(1)	ox.) (b)(1)(A)(i) (A)(iii).	•	i). Enter	the hospital's nam	е,
5	section 170 A federal, sta An organizati section 170(A community	ion operated for the (b)(1)(A)(iv). (Complite, or local governm ion that normally recb)(1)(A)(vi). (Complet rust described in s	ent or governmental unit eives a substantial part o ite Part II.) section 170(b)(1)(A)(vi).	t described of its suppo (Complete	I in section ort from a	o n 170(b)(* governme	I)(A)(v). ntal unit or	from the	general p	oublic described in	
9	activities relations and to See section An organization An organization and the sections the amount of the organization and the organiz	ted to its exempt fur unrelated business to 509(a)(2). (Complete ion organized and op ion organized and op this box, I certify that in anagers and other that ation received a write to a transport of a persor in who directly or indepring body of the su	perated exclusively to test perated exclusively for the strons described in section organization and compled. Type II the organization is not than one or more publicly ten determination from the perate of the strong tender or the strong ten	in exception 511 tax st for public te benefit con 509(a)(1 tete lines 11 tetee lines 11	ons, and (2 x) from bus c safety. Sof, to perfo) or section le through le III - Fund directly or d organizati it is a Typontribution ether with	ee section more sinesses and the section of the functionally into the functions described in Type from any of the sine sections of the form any of the sine sections described in the sections of the sections of the sine sections of the sections of the sections of the sine section of the sections of the sections of the section of the se	than 33 1/cquired by on 509(a)(4 ctions of, a. See sectors of sectors of the folloof the folloof the folloof the folloof cquired by one or ribed in sectors of the folloof the folloof cquired by one of the folloof the folloof cquired by the folloof cquired by the folloof cquired by the folloof cquired by the folloof cquired by the folloof cquired by the folloof cquired by the folloof cquired by the folloof cquired by the folloof cquired by the folloof cquired by the folloof cquired by the folloof cquired by the folloof cquired by the folloof cquired by the folloof cquired by the following c	/3% of its so the organ I). or to carry ction 509(more discontion 509(III	out the part of th	rom gross investm fter June 30, 1975 purposes of one or eck the box that Type III - Other persons other than	ent
	Provide the formal of supported inization	ollowing information (ii) EIN	about the supported org (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the o	s). organization sted in your document?	organizat	ion in col.	(vi) Is organizatio (i) organiz U.S Yes	on in col. ed in the	(vii) Amount of support	i
otal											

Schedule A (Form 990 or 990-EZ) 2011 CONNECTED NATION, INC. 61-1394934 Page 2

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning 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.")	3841134.	9422112.	7549622.	11164605.	16054726.	48032199.
2	Tax revenues levied for the organ-						
	ızation's benefit and either paid to				1		
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total, Add lines 1 through 3	3841134.	9422112.	7549622.	11164605.	16054726.	48032199.
	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)						3447692.
6	Public support. Subtract line 5 from line 4						44584507.
	ction B. Total Support					l	123023071
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 4	3841134.	9422112.		11164605.		
•	Gross income from interest,	<u> </u>					
U	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	15,548.	10,284.	15,331.	14,799.	44,054.	100,016.
a	Net income from unrelated business	13,3101	10/2010	13,331.	11,,55.	11,031.	200,020.
7	activities, whether or not the	i					
	·	6,136.					6,136.
40	business is regularly carried on Other income. Do not include gain	0,130.					0,130.
10	or loss from the sale of capital						
	· ·						
44	assets (Explain in Part IV.) Total support. Add lines 7 through 10			·			48138351.
	• •	eta (ese metruatio			L		446,361.
	Gross receipts from related activities, First five years. If the Form 990 is for	•		I fourth or fifth to		12 E01(a)(3)	440,301.
13	organization, check this box and stop	_	iirst, second, triirt	i, iourin, or iiiin ta	ix year as a section	1 50 1(0)(3)	. □
Sec	tion C. Computation of Public	c Support Per	centage				
_	Public support percentage for 2011 (li			olumn (fl)		14	92.62 %
	Public support percentage from 2010		•	J. G. (1)		15	89.20 %
	33 1/3% support test - 2011. If the o	-	-	uling 12 and line :	14 is 22 1/20/ or m		
104	stop here. The organization qualifies			i iiile 13, and iiile	14 15 55 17576 01 111	ore, check this box	►X
.	33 1/3% support test - 2010. If the o		•	no 13 or 16a and	lino 15 io 22 1/20/	ar mara abaali thi	
U	and stop here. The organization quali				IIIIe 15 IS 33 1/3%	or more, check th	IS DOX
170		•	• • •		10 16a ar 16b a		
174	10% -facts-and-circumstances test						
	and if the organization meets the "fact					rt IV now the organ	ization _
L	meets the "facts-and-circumstances" t				•	7	100/
o	10% -facts-and-circumstances test						
	more, and if the organization meets the						,
40	organization meets the "facts-and-circ						₹ ⊟
18	Private foundation. If the organization	ii uiu not check a t	oox on line 13, 16a	i, 160, 1/a, or 17b	, cneck this box a	na see instructions	

Schedule A (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

Section A. Public Support	m, picase comp	Jose Fait II.)				
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009_	(d) 2010	(e) 2011	(f) Total
Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or bus-			ļ			
iness under section 513 4 Tax revenues levied for the organ-					 	
ization'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		<u> </u>	<u> </u>	 		
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6) Section B. Total Support						
alendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income					 	
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)		l	<u></u>	l		
14 First five years. If the Form 990 is for the	ne organization's	s first, second, thir	d, fourth, or fifth ta	x year as a section	on 501(c)(3) organiza	ition,
check this box and stop here	Cuma and D		-			>
Section C. Computation of Public					 _	
15 Public support percentage for 2011 (line		= :	olumn (f))		15	
16 Public support percentage from 2010 S					16	
Section D. Computation of Investi					T:= 1	
17 Investment income percentage for 201		· · ·	ne 13, column (f))		17	
18 Investment income percentage from 20					[18]	
19a 33 1/3% support tests - 2011. If the o more than 33 1/3%, check this box and						7 is not . ▶□
b 33 1/3% support tests - 2010. If the o	rganization did n	not check a box or	line 14 or line 19a	, and line 16 is m	ore than 33 1/3%, a	nd
line 18 is not more than 33 1/3%, check	this box and s	top here. The org	anization qualifies a	as a publicly supp	oorted organization	. ▶□
20 Private foundation. If the organization	did not check a	hox on line 14 19	a or 19h check th	is how and see in	etructions	

Schèdule A

Identification of Excess Contributions Included on Part II, Line 5

2011

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
	4,410,459.	3,447,692.
		·
Total Excess Contributions to Schedule A, Part II, Line 5		3,447,692.

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. OMB No 1545-0047 Open to Public Inspection

Employer identification number

Name of the organization

► Attach to Form 990. ► See separate instructions.

	CONNECTED NATION, INC.	61-1394934
Pai	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Ac	counts. 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 .	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fund	ds
	are the organization's property, subject to the organization's exclusive legal control?	. Yes 🔲 No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used o	nly
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferm	ing
	Impermissible private benefit?	Yes No
Pai	TII Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education)	ly important land area
	Protection of natural habitat Preservation of a certified hi	storic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a contribution of a contributio	nservation easement on the last
	day of the tax year.	
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements .	2b
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	
	listed in the National Register	
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization	zation during the tax
	year >	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(
_	and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statem	
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization appearance.	anization's accounting for
Pai	conservation easements. † III Organizations Maintaining Collections of Art, Historical Treasures, or Other S	imilar Assets
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	iiiiidi Assets.
12	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and	d balance sheet works of art
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of p	
	the text of the footnote to its financial statements that describes these items.	Sublic Service, provide, in Fait XIV,
ь	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and ba	lance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public sen	
	relating to these items:	noo, provide the following amounts
	(i) Revenues included in Form 990, Part VIII, line 1	> \$
	(ii) Assets included in Form 990, Part X	► \$ ► \$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, p	
-	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1	▶ \$
	Assets included in Form 990, Part X	▶ \$ ▶ \$
~		· ·

		ED NATION,							94934	Page 2		
Pa												
á	Using the organization's acquisition, accessi	on, and other record	s, check	cany of the f	following tha	t are a sigr	nificant u	se of its c	ollection ite	ems		
	(check all that apply):											
а	Public exhibition	C	: <u> </u>		hange progr							
b	Scholarly research	•	• 📖	Other								
С	Preservation for future generations											
4	Provide a description of the organization's co	ollections and explain	n how th	ney further th	ne organizatio	on's exemp	ot purpos	se in Part	XIV.			
5	During the year, did the organization solicit o					er sımılar <mark>a</mark>	ssets		_			
_	to be sold to raise funds rather than to be ma								Yes	No		
Pai	t IV Escrow and Custodial Arran		ete if the	e organizatio	n answered	"Yes" to F	orm 990,	Part IV, I	ne 9, or			
	reported an amount on Form 990, Par											
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for	contribution	s or other as	sets not in	cluded	_	7			
	on Form 990, Part X? Lif "Yes " explain the arrangement in Part XIV and complete the following table:											
b	b If "Yes," explain the arrangement in Part XIV and complete the following table:											
	Amount											
C	Beginning balance		•				1c					
d	Additions during the year	•			•		1d					
_	Distributions during the year	•		•	•	•	1e					
f	Ending balance	000 D+ V I	040	•			<u>1f</u>		1,,			
	Did the organization include an amount on Fo	•	217					∟	Yes	L No		
Pai	If "Yes," explain the arrangement in Part XIV. t V Endowment Funds. Complete in			"Voo" to For	000 Port	IV line 10						
<u> </u>	Endownient ands. Complete							anto book	(-) Four ve	ara baak		
4-	Paginning of year balance	(a) Current year	(0) +	Prior year	(c) Two yea	irs back (a) Inree y	ears back	(e) Four ye	ars back		
	Beginning of year balance		 		 							
b	Contributions		 		 	 -						
C	Net investment earnings, gains, and losses				 							
d	Grants or scholarships		 		 			——				
е	Other expenditures for facilities		ì		Ì	1			•			
	and programs											
T	Administrative expenses				 							
g	End of year balance		- // 1	(.)	<u> </u>							
2	Provide the estimated percentage of the curr Board designated or quasi-endowment	ent year end balance	e (iine i (g, column (a))) neid as:							
a h	Permanent endowment	%	— ⁷⁰									
b	Temporarily restricted endowment	[%] %										
G	The percentages in lines 2a, 2b, and 2c shou											
32	Are there endowment funds not in the posses	•	ation the	t are held ar	nd administra	rad for the	organiza	tion				
oa	by:	ssion of the organiza	ation tha	it are riciu ar	iu auministei	red for the	organiza	LION	[v	es No		
	(i) unrelated organizations								3a(i)	es No		
	(ii) related organizations	• •			•	•			3a(ii)	_		
h	If "Yes" to 3a(ii), are the related organizations	: listed as required o	n Schen	D2 ماريا					3b	_		
4	Describe in Part XIV the intended uses of the					•			30			
Pai												
Ь	Description of property	(a) Cost or o			or other	(c) Acc	cumulate	d	(d) Book v	zlue		
	a coordinate of property	basis (investr			(other)	, , ,	eciation	~	(a) Dook v	MUU		
	Land	1						_				
b	Buildings							_				
	Leasehold improvements		 _	8	0,818.		69,50	8.	11.	310.		
	Equipment				8,958.		85,53			428.		
	Other				2,700.		32,70			0.		
	. Add lines 1a through 1e. (Column (d) must e	gual Form 990. Part	X. colun						194,	738.		

Schedule D (Form 990) 2011

Part VII Investments - Other Securities. Se	e Form 990, Part X, Im	e 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c	Method of valuation Method of valuation	
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)		_		
(B)				
(C)				
(D)	 			
(E)				
(G)				-
(H) (I)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related. Se	ee Form 990. Part X. lir	ne 13		
) Method of valuation	on:
(a) Description of investment type	(b) Book value		r end-of-year marke	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line				(1) De el contro
	Description	 _		(b) Book value
(1)				
(2)			-	
(3)		· -		
(4) (5)	 			
(6)		 		
(7)		<u> </u>		
(8)	· · · · · · · · · · · · · · · · · · ·		-	
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	15.)		>	
Part X Other Liabilities. See Form 990, Part X,	line 25.			
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) ADDITIONAL ACCRUAL OF WAGE	S FOR			
(3) AMENDED RETURN		10,145.		
(4)				
(5)				
(6)				
(8)				
(9)				
(11)		10 145		
Total. (Column (b) must equal Form 990, Part X, col (B) line FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote to the End (ASC 740)	25.) he organization's financial stat	10,145.	liability for uncertain tax o	ositions under
132053				
D1-23-12			Sched	ule D (Form 990) 2011

Sche	dule D (Form 990) 2011 CONNECTED NATION, INC.		PT-T	394934	Page 4
	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Finance	ial State	ments		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1			_
: 2	Total expenses (Form 990, Part IX, column (A), line 25)	2			
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3			
4	Net unrealized gains (losses) on investments	4			
5	Donated services and use of facilities	5			
6	Investment expenses	6			
7	Prior period adjustments	7			
8	Other (Describe in Part XIV.)	8			
9	Total adjustments (net). Add lines 4 through 8	9			
	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10			
10 Par	t XII Reconciliation of Revenue per Audited Financial Statements With Reven		eturn		
1	Total revenue, gains, and other support per audited financial statements		1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments		_]]		
b	Donated services and use of facilities 2b				
С	Recoveries of prior year grants 2c		7		
ď	Other (Describe in Part XIV.)		7 1		
е	Add lines 2a through 2d		2e		
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIV.)		7		
С	Add lines 4a and 4b		4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.)		5		-
Pai	t XIII Reconciliation of Expenses per Audited Financial Statements With Exper	ises per	Return		
1	Total expenses and losses per audited financial statements		1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities 2a				
ь	Prior year adjustments 2b		7		
С	Other losses 2c				
d	Other (Describe in Part XIV.)		7]		
е	Add lines 2a through 2d		2e		
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			 	
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIV.)		7		
	Add lines 4a and 4b		4c		
5			5		
	t XIV Supplemental Information				
Com	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	rt IV, lines	lb and 2b;	Part V, line 4;	Part
X, lin	e 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to pro	vide any ac	lditional in	formation.	
PAF	RT X, LINE 2: ACCOUNTING PRINCIPLES GENERALLY ACCEPTE	D IN	THE U	NITED	
		· <u> </u>			
STA	TTES OF AMERICA REQUIRE MANAGEMENT TO EVALUATE TAX PO	SITIO	NS TA	KEN BY	
THE	C ORGANIZATION AND RECOGNIZE A TAX LIABILITY IF THE C	RGANI	ZATIO	N HAS	
יייו	VENI ANI INVOEDENTANI DOCUMETANI MUNE NODE TENEVI MUNE NODE				
TAF	KEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT V	מתחטו.	MOJ. B	<u> </u>	
SUS	TAINED UPON EXAMINATION BY VARIOUS FEDERAL AND STATE	TAXI	NG		
<u>rua</u>	CHORITIES. MANAGEMENT HAS ANALYZED THE TAX POSITIONS	TAKE	N BY	THE	
ORC	SANIZATION, AND HAS CONCLUDED THAT AS OF DECEMBER 31,	2011	AND	2010	
THE	RE ARE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO E	E TAK		AT WOULI	
			Schedu	le D (Form 990	<i>J</i> 2011

Schedule D (Form 990) 2011	CONNECTED NATION,	INC.	61-1394934 Page 5
Schedule D (Form 990) 2011 Part XIV Supplemental Inforn	mation _(continued)		
REQUIRE RECOGNITION	OF A LIABILITY OR	DISCLOSURE IN TH	E ACCOMPANYING
FINANCIAL STATEMENTS	3.		
	<u>.</u>		
			·
		-1	
		 	

SCHEDULE (Form 990) Internal Revenue Service

Department of the Treasury

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Open to Public OMB No 1545-0047 2011

Inspection

ê [**Employer identification number** REIMBURSEMENT OF COMPUTER REIMBURSEMENT OF COMPUTER REIMBURSEMENT OF COMPUTER RIMBURSEMENT OF COMPUTER EVELOPMENT GRANT PROGRAM REIMBURSEMENT OF COMPUTER ECHNOLOGY OPPORTUNITIES ECHNOLOGY OPPORTUNITIES 61-1394934 STATE BROADBAND DATA AND ECHNOLOGY OPPORTUNITIES ECHNOLOGY OPPORTUNITIES ECHNOLOGY OPPORTUNITIES URCHASES AND TRAINING URCHASES AND TRAINING URCHASES AND TRAINING URCHASES AND TRAINING URCHASES AND TRAINING (h) Purpose of grant or assistance OR THE BROADBAND OR THE BROADBAND OR THE BROADBAND OR THE BROADBAND OR THE BROADBAND X Yes 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 \$5,000. Part II can be duplicated if additional space is needed and address of organization (b) EIN (c) IRC section or government and address of organization (book, if applicable cash grant assistance or government or government assistance or government or Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection : : . 。 。 。 ٥. 。 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 53,347. 45,805. 5,292. 8 387 5,765, 666'6 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table INC. 48-1124839 31-0802588 34-6000031 31-0795170 31-0745884 31-0734597 General Information on Grants and Assistance CONNECTED NATION critena used to award the grants or assistance? 1000 S.W. JACKSON STREET SUITE 100 CHILLICOTHE AND ROSS COUNTY PUBLIC AKRON-SUMMIT COUNTY PUBLIC LIBRARY CARDINGTON-LINCOLN SCHOOL DISTRICT 1 (a) Name and address of organization PUBLIC LIBRARY - 128 E MAIN ST -(JAMES A.) RHODES STATE COLLEGE KANSAS DEPARTMENT OF COMMERCE CLARK STATE COMMUNITY COLLEGE LIBRARY - 140 S PAINT ST CHILLICOTHE, OH 45601 SPRINGFIELD, OH 45501 CARDINGTON, OH 43315 Name of the organization TOPEKA, KS 66612 4240 CAMPUS DR, AKRON, OH 44326 570 E LEPFEL LN LIMA, OH 45804 60 S HIGH ST Part Part = N

3 Enter total number of other organizations listed in the line i table
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2011)

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Schedule I (Form 990) CONNECTED NATION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	NATION, Assistance to Gov	INC.	izations in the Uni	ited States (Sche	dule I (Form 990), Par		61-1394934 , Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							REIMBURSEMENT OF COMPUTER
COLUMBUS METROPOLITAN LIBRARY							PURCHASES AND TRAINING
F							FOR THE BROADBAND
COLUMBUS, OH 43215	31-6401170	3	43,623.	0.			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
							PURCHASES AND TRAINING
O,							FOR THE BROADBAND
COLUMBUS, OH 43215	31-0729591		10,653.	0.			TECHNOLOGY OPPORTUNITIES
				•			REIMBURSEMENT OF COMPUTER
<u>គ</u>							PURCHASES AND TRAINING
				,			FOR THE BROADBAND
MULBERRY ST - MT. VERNON, OH 43050	31-6401662		11,936.	0.			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
COUNTY OF MORGAN DBA KATE LOVE							PURCHASES AND TRAINING
SIMPSON MORGAN - 358 EAST MAIN							FOR THE BROADBAND
STREET - MCCONNELSVILLE, OH 43756	31-6401797		13,512.	0.			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
CUYAHOGA COUNTY PUBLIC LIBRARY							PURCHASES AND TRAINING
2111 SNOW RD							FOR THE BROADBAND
PARMA, OH 44124	34-6000819		74,043.	0.			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
PC							PURCHASES AND TRAINING
LIBRARY - 206 BROADWAY - FINDLAY,							FOR THE BROADBAND
ОН 45840	34-6400446		5,062.	0.	i		TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
GEAUGA COUNTY PUBLIC LIBRARY							PURCHASES AND TRAINING
12701 RAVENWOOD DR				•			FOR THE BROADBAND
CHARDON, OH 44024	34-0924368		27,969.	0.		i	TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
GRANDVIEW HEIGHTS PUBLIC LIBRARY							PURCHASES AND TRAINING
RST				_			FOR THE BROADBAND
COLUMBUS, OH 43212	31-6401359		6,400.	0.			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
GROUNDWORK GROUP							PURCHASES AND TRAINING
1880 MACKENZIE DR. SUITE 111							FOR THE BROADBAND
COLUMBUS, OH 43220	59-3808297		64,926.	0.			TECHNOLOGY OPPORTUNITIES
							Schedule I (Form 990)

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Schedule I (Form 990) CONNECTED NATION, INC.	NATION, 1	INC.	zations in the Uni	ted States (Sche	Organizations in the United States (Schedule (Form 990) Part II)		61-1394934 , Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	, (h) Purpose of grant or assistance
GD							REIMBURSEMENT OF COMPUTER PURCHASES AND TRAINING FOR THE BROADBAND
HURON, OH 44839	34-6300667		6,479.	0			REIMBURSEMENT OF COMPUTER
IDA RUPP PUBLIC LIBRARY 310 MADISON ST DORT CLINTON OH 43452	34-6401091			c			FURCHASES AND TRAINING FOR THE BROADBAND TRECHNICOSY OPPOPUTATES
							REIMBURSEMENT OF COMPUTER
KINGSVILLE FUBLIC LIBKAKY 6006 ACADEMY ST KINGSVILLE, OH 44048	34-1033935		5,715.	0			PURCHASES AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
LAKE COUNTY COUNCIL ON AGING 8520 EAST AVENUE							PURCHASES AND TRAINING FOR THE BROADBAND
MENTOR, OH 44060	23-7266637		9,954.	0			TECHNOLOGY OPPORTUNITIES
LIBERTY CENTER PUBLIC LIBRARY							REIMBURSEMENT OF COMPUTER PURCHASES AND TRAINING
				-			FOR THE BROADBAND
LIBERTY CENTER, OH 43532	34-6401728	įi	5,140.	0.			TECHNOLOGY OPPORTUNITIES
LIBRARY ASSOCIATION OF SANDUSKY							REIMBURSEMENT OF COMPUTER PURCHASES AND TRAINING
114 W ADAMS ST							FOR THE BROADBAND
SANDUSKY, OH 44870	34-6401309		8,898.	0			TECHNOLOGY OPPORTUNITIES
LICKING COUNTY LIBRARY (NEWARK							REIMBURSEMENT OF COMPUTER PURCHASES AND TRAINING
н				,			FOR THE BROADBAND
NEWARK, OH 43055	31-6401551		9,474.	0			DETABLE CENERAL OF CONDITIES
LONDON PUBLIC LIBRARY			,				PURCHASES AND TRAINING
20 E 1ST STREET							FOR THE BROADBAND
LONDON, OH 43140	31-6401660		6,690.	0			TECHNOLOGY OPPORTUNITIES
Variati of falls Mostary							REIMBURSEMENT OF COMPUTER
6111 MIDDLE RIDGE RD							FOR THE BROADBAND
MADISON, OH 44057	34-6001763		7,468.	0.			TECHNOLOGY OPPORTUNITIES
							Schedule I (Form 990)

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	States (Schedule I (Form 990), Part II.)
, INC.	vernments and Organizations in the United Stat
IATION	Assistance to Go
CONNECTED	of Grants and Other
Schedule I (Form 990)	Part II Continuation

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MANSFIELD/RICHLAND PUBLIC LIBRARY							REIMBURSEMENT OF COMPUTER PURCHASES AND TRAINING
. ; E+							FOR THE BROADBAND
MANSFIELD, OH 44902	34-6001803		8,567.	0			TECHNOLOGY OPPORTUNITIES
MARION PUBLIC LIBRARY DBA							REIMBURSEMENT OF COMPUTER PURCHASES AND TRAINING
LIBRARY -			-		•		FOR THE BROADBAND
CHURCH STREET - MARION, OH 43302	31-6400150		7,013.	0.			TECHNOLOGY OPPORTUNITIES
MARTINS FERRY PIRITE LIBRARY							REIMBURSEMENT OF COMPUTER DIRCHASES AND EDAINING
20 JAMES WRIGHT PLACE							FOR THE BROADBAND
MARTINS FERRY, OH 43935	34-6001821		12,347.	0.			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
MCKINLEY MEMORIAL LIBRARY							PURCHASES AND TRAINING
40 N, MAIN ST							FOR THE BROADBAND
NILES, OH 44446	34-6001755		8,145.	0.			rechnology opportunities
							REIMBURSEMENT OF COMPUTER
MIDDLETOWN PUBLIC LIBRARY							PURCHASES AND TRAINING
125 SOUTH BROAD ST							FOR THE BROADBAND
MIDDLETOWN, OH 45044	31-6000378		16,542.	0	,		TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
MONROE COUNTY DISTRICT LIBRARY							PURCHASES AND TRAINING
NUE			•				FOR THE BROADBAND
WOODSFIELD, OH 43793	34-6001920		9,301.	0.			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
뛵							PURCHASES AND TRAINING
CENTER - 928				-			FOR THE BROADBAND
SUITE A - TIFFIN, OH 44883	34-1830013		6,165.	0			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
NORTH CENTRAL STATE	_						PURCHASES AND TRAINING
2441 KENWOOD CIRCLE							FOR THE BROADBAND
MANSFIELD, OH 44901	34-1038108		8,436.	0.			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
NORTHWEST STATE COMMUNITY COLLEGE							PURCHASES AND TRAINING
22600 STATE ROUTE 34							FOR THE BROADBAND
ARCHBOLD, OH 43502	34-1003685		15,291.	0.			TECHNOLOGY OPPORTUNITIES
				!			Schedule I (Form 000)

	CO CO COUNTY			ממופה הביו	ממוס ו (ו סווויי סיכי), י מי	(-11.7)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							REIMBURSEMENT OF COMPUTER
OHIO STATE UNIVERSITY, THE							PURCHASES AND TRAINING
1960 KENNY ROAD							FOR THE BROADBAND
COLUMBUS, OH 43210	31-6025986		13,989.	0.			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
ORRVILLE PUBLIC LIBRARY							PURCHASES AND TRAINING
230 N. MAIN STREET							FOR THE BROADBAND
ORRVILLE, OH 44667	34-6002120	i	5,881.	0.			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
PERRY COUNTY DISTRICT LIBRARY							PURCHASES AND TRAINING
SON							FOR THE BROADBAND
NEW LEXINGTON, OH 43764	31-6401617		6,285.	0.			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
PERRY PUBLIC LIBRARY							PURCHASES AND TRAINING
3753 MAIN ST							FOR THE BROADBAND
PERRY, OH 44081	34-0927140		8,501.	0.			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
PIONEER CTC			-, -				PURCHASES AND TRAINING
							FOR THE BROADBAND
SHELBY, OH 44875	34-0971791		14,369.	0			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
PORTSMOUTH PUBLIC LIBRARY							PURCHASES AND TRAINING
1220 GALLIA STREET							FOR THE BROADBAND
PORTSMOUTH, OH 45662	31-6401665		18,352.	0			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
PUBLIC LIBRARY OF YOUNGSTOWN AND							PURCHASES AND TRAINING
MAHONING COUNTY - 1325 FIFTH							FOR THE BROADBAND
AVENUE - YOUNGSTOWN, OH 44504	31-0969202		19,596.	0.			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
ROSSFORD PUBLIC LIBRARY							PURCHASES AND TRAINING
H							FOR THE BROADBAND
ROSSFORD, OH 43460	34-6401168		7,257.	0.			PECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
SANDUSKY COUNTY DBA BIRCHARD							PURCHASES AND TRAINING
PUBLIC LIBRARY - 423 CROGHAN ST				.,			FOR THE BROADBAND
FREEMONT, OH 43420	34-6400118		7,991.	0.			TECHNOLOGY OPPORTUNITIES
							Schedule (Form 990)

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Schedule I (Form 990) CONNECTED NATION, INC. Part II Continuation of Grants and Other Assistance to Governments and	NATION, J		Organizations in the United States		(Schedule I (Form 990), Part II.)		61-1394934 , Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Varden to the bill to the base V							REIMBURSEMENT OF COMPUTER
SHANDA MELGALIS FUBLIC LIBRARI 16500 VAN AKEN BLVD							FOR THE BROADBAND
SHAKER HEIGHTS, OH 44120	34-6002618		10,023.	0.			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
SINCLAIR COMMUNITY COLLEGE							PURCHASES AND TRAINING
444 WEST THIKU DAYTON, OH 45402	31-0723444		7,005.	0			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
SOUTHERN STATE COMMUNITY COLLEGE							PURCHASES AND TRAINING
100 HOBART DR	21-00-02-0-12-0-12-0-12-0-12-0-12-0-12-		40 410	c			FOR THE BROADBAND
	1670C00-TC		*671,01	•			TECHNOLOGI OF CONTONIE
TUSCARAWAS COUNTY PUBLIC LIBRARY							REIMBURSEMENT OF COMPUTER PURCHASES AND TRAINING
121 FAIR AVENUE NW							FOR THE BROADBAND
NEW PHILADELPHIA, OH 44663	34-6002005		9,925.	0.			TECHNOLOGY OPPORTUNITIES
							REIMBURSEMENT OF COMPUTER
TH ELLA M. EV							PURCHASES AND TRAINING
132			t 0 1	•			FOR THE BROADBAND
WADSWORTH, OH 44281	34-6000975		8,527.	•0			DETWEID SEVENT OF CONDUMED
TOODS TRINGTHEONY VINITION MAGRETY							REIMBURSEMENT OF COMPUTER
MARKEN COUNTY VOCATIONAL SCHOOL							FORCIASES AND INTING
он 45036	31-0803915		15,473,	0.			TECHNOLOGY OPPORTUNITIES
				-			REIMBURSEMENT OF COMPUTER
WARREN-TRUMBULL COUNTY PUBLIC							PURCHASES AND TRAINING
LIBRARY - 444 MAHONING AVE NW -							FOR THE BROADBAND
WARREN, OH 44483	34-6002983		8,539.	0.			TECHNOLOGY OPPORTUNITIES
TIMETO CERTAIN VIMINATION MODIFICATIONS							REIMBURSEMENT OF COMPUTER
21740 STATE BOTTER 676							FOR THE BROADBAND
	31-0735812		11,957.	0			TECHNOLOGY OPPORTUNITIES
						-	

INC CONNECTED NATION, Schedule I (Form 990) (2011)

Page 2

61-1394934

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

(b) Number of (c) Amount of (d) Amount of non- (e) Method of valuation (f) Description of non-cash assistance recipients cash grant cash assistance (book, FMV, appraisal, other)			Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	IODIC REPORTS PROVIDED BY GRANTEES	
(a) Type of grant or assistance (b) Ni rec			Part IV Supplemental Information. Complete this part to provide the ii	SCHEDULE I, PART I, LINE 2: REVIEW PERIODIC REPORTS PROVIDED BY GRANTEES	AND COMPARE TO GRANT AGREEMENTS AND RELATED APPLICATIONS

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: (JAMES A.) RHODES STATE COLLEGE

(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER PURCHASES

AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT: AKRON-SUMMIT COUNTY PUBLIC LIBRARY

Schedule I (Form 990) 2011 CONNECTED NATION, INC. Part IV Supplemental Information	61-1394934	Page 2
(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER		
AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGR	RAM.	
NAME OF ORGANIZATION OR GOVERNMENT:		
CARDINGTON-LINCOLN SCHOOL DISTRICT PUBLIC LIBRARY		
(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER	R PURCHASES	
AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGR	RAM.	
NAME OF ORGANIZATION OR GOVERNMENT:		
CHILLICOTHE AND ROSS COUNTY PUBLIC LIBRARY		
(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER	R PURCHASES	
AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGR	RAM.	
NAME OF ORGANIZATION OR GOVERNMENT: CLARK STATE COMMUNITY COI	LLEGE	
(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER		
AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGR	RAM.	
		
NAME OF ORGANIZATION OR GOVERNMENT: COLUMBUS METROPOLITAN LIF	BRARY	
(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER	R PURCHASES	
AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGR	RAM.	
NAME OF ORGANIZATION OR GOVERNMENT: COLUMBUS STATE COMMUNITY	COLLEGE	
(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER		
AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGR		
NAME OF ORGANIZATION OR GOVERNMENT:		
COUNTY OF KNOX DBA MT VERNON PUBLIC LIBRARY		
(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER	PURCHASES	

Schedule I (Form 990) 2011

NAME OF ORGANIZATION OR GOVERNMENT: HURON PUBLIC LIBRARY

AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGRAM.

(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER PURCHASES

AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT: IDA RUPP PUBLIC LIBRARY

(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER PURCHASES

AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT: KINGSVILLE PUBLIC LIBRARY

(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER PURCHASES

AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT: LAKE COUNTY COUNCIL ON AGING

(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER PURCHASES

AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT: LIBERTY CENTER PUBLIC LIBRARY

(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER PURCHASES

AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT: LIBRARY ASSOCIATION OF SANDUSKY

(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER PURCHASES

AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT:

LICKING COUNTY LIBRARY (NEWARK PUBLIC LIBRARY)

(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER PURCHASES

AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT: MONROE COUNTY DISTRICT LIBRARY

(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER PURCHASES

AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT:

NORTH CENTRAL OHIO EDUCATIONAL SERVICE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER PURCHASES

AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT: NORTH CENTRAL STATE

(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER PURCHASES

AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT: NORTHWEST STATE COMMUNITY COLLEGE

(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER PURCHASES

AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT: OHIO STATE UNIVERSITY, THE

(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER PURCHASES

AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT: ORRVILLE PUBLIC LIBRARY

(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER PURCHASES

AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGRAM.

NAME OF ORGANIZATION OR GOVERNMENT: PERRY COUNTY DISTRICT LIBRARY

(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER PURCHASES

(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER PURCHASES

AND TRAINING FOR THE BROADBAND TECHNOLOGY OPPORTUNITIES PROGRAM.

(H) PURPOSE OF GRANT OR ASSISTANCE: REIMBURSEMENT OF COMPUTER PURCHASES

Schedule I (Form 990) 2011

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047

Inspection

Department of the Treasury

Internal Revenue Service

Name of the organization

Employer identification number 61-1394934 CONNECTED NATION, INC.

Pa	art I Questions Regarding Compensation			
_			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	1		
	First-class or charter travel Housing allowance or residence for personal use	ŀ		
	Travel for companions Payments for business use of personal residence	İ]	
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			ĺ
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	<u> </u>	<u> </u>
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	_2_		
_				
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, Explain in Part III.			
	X Compensation committee			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee		1	
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing		Ì	
7	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		х
h	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		х
Ĭ	If "Yes" to any of lines 4a·c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1		
	contingent on the revenues of:			
а	The organization?	<u>5a</u>		X
b	Any related organization?	5b		X_
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of.			ļ
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	<u> </u>	X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53,4958-6(c)?	9		1

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

Schedule J (Form 990) 2011

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

INC.

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

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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(0)	(D)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
	≘	213,70	0	0	479.	10,732.	224,916.	0
1 BRIAN R. MEFFORD	▣		0	0.	0.			0.
	Ξ	194,84	0.	0.	6,055.	13,145.	214,041.	0.
2 THOMAS W FERREE	▣		0	0.	0.		0.	0.
		157,48	0.0	0	5,121.	13,219.	175,824.	• 0
3 MARK MCELROY	(1)		0.	0.	0.	0.	0.	
	(1)	145,15	0	0	4,572.	11,825.	161,553.	
4 THOMAS FRITZ	ੰ≣		• 0	0	0	0	0	0
	(1)	174,00	0	0	5,565.	11,500.	191,067.	0
5 THOMAS KOUTSKY	⊞		0	0	0.	0	0	0
	(1)							
9	(E)							
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16	▣							
							Schedu	Schedule J (Form 990) 2011

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

► 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.

OMB No 1545-0047

2011

Open To Public Inspection

Name of the organization CON	NECTED	NA!	rion, in	ic.				Employer 61-13			umber
					501(c)(4) organizatio				-		
	nization answ	ered "	Yes" on Form	990, Part IV, I	line 25a or 25b, or For	m 990-E	Z, Part	V, line 401	o	(-) Com	
(a) Name of disc	qualified pers	on]	(b) Description	of transa	ction			Yes	rected?
										165	
											
										igsquare	
				<u>L. </u>	 						Ļ
2 Enter the amount of tax imposection 4958	sed on the o	rganız	ation managers	s or disqualifi	ed persons during the	year und	ler	. .			
3 Enter the amount of tax, if an	w on line 2	ahava	roimburead hi	the organiza	tion.			► \$			
Cittor the amount of tax, if an	y, 017 11716 2, 6	above,	remoursed by	r the Organiza	MOII			•			
Part II Loans to and/or	From Inte	erest	ed Persons).			_				
Complete if the organ	nization ansv	vered "	Yes" on Form	990, Part IV,	line 26, or <u>Form 99</u> 0-E	Z, Part V	, line 3	8a			
(a) Name of interested	(b) Loan t			inal principal	(d) Balance due		ln .	(f) App by bo	proved ard or	(g) W	ritten
person and purpose	the organ			mount	•	defa	ult?	comm	uttee?	agreer	nent?
	То	Fro	om			Yes	No	Yes	No_	Yes	No
·	 					 				 	
	 					 -		+		 	
_				_		<u> </u>	<u> </u>	-		 	
 						 		 			
	 					ļ		-		ļ	
						 -		ļ		├	
Total Part III Grants or Assist	ance Ber	efitin	a Intereste	<u>▶ \$</u> ed Persons				<u> </u>			
Complete if the organ			_								
(a) Name of interested p				ionship betwe	een interested person ganization	and			ount an	d type of	:
							 				
							-				
							+				
							+				
					 _		+				
		 -									

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

Schedule L (Form 990 or 990-EZ) 2011

Complete if the organization answered	1 "Yes" on Form 990, Part IV, line 28a, 28	b, or 28c.		(A) OF	
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Shar organiza revent	ation's
EDIC WILLS	A DIDUCTION AND OTHER	440 422	MILLO AND H	Yes	No_
JOE MEFFORD	A DIRECTOR AND OFFI		MILLS AND H MEFFORD PRO	 	X
	SOUTHIT ONLY BRITING	0,730.			
	al information for responses to questions				
SCH L, PART IV, BUSINESS T		G INTERESTE	D PERSONS:		
(A) NAME OF PERSON: ERIC M (B) RELATIONSHIP BETWEEN I		ODCANTGAMT	ON		
(B) RELATIONSHIP BETWEEN I A DIRECTOR AND OFFICER	NIEKESIED FERSON AND	ORGANIZATI	ON:		
(D) DESCRIPTION OF TRANSAC	CTION: MILLS AND HIS	STAFF PROVI	DE PRIMARIL	 У	
LEGAL BUT ALSO FINANCIAL A					
(A) NAME OF PERSON: JOE ME	FFORD				
(B) RELATIONSHIP BETWEEN I	NTERESTED PERSON AND	ORGANIZATI	ON:		
JOE MEFFORD, BRIAN MEFFORD	'S FATHER	·		 _	
(D) DESCRIPTION OF TRANSAC	TION: MEFFORD PROVID	ED PROJECT	MANAGEMENT	·	
SERVICES IN OUTREACH AND M	ANAGEMENT OF THE OPPO	ORTUNITY ON	LINE BROADB	AND	
PROGRAM AS WELL AS MANAGIN	IG BROADBAND PROVIDER	AWARENESS,	EDUCATION A	AND	
DATA ACQUISITION FOR MAPPI	NG EFFORTS. FURTHER	QUALIFICAT	IONS AND WO	RK	
RESPONSIBILITIES CAN BE VI	EWED AT				
HTTP://WWW.CONNECTEDNATION	COM/WHO_WE_ARE/STAF	F/_JOE_MEFF	ORD.PHP.		
					

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service 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.

2011
Open to Public Inspection

Name of the organization

CONNECTED NATION, INC.

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

132211 01-23-12 Employer identification number 61-1394934

Schedule O (Form 990 or 990-EZ) (2011)

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
INDIVIDUALS CAN REALIZE GREAT ECONOMIC AND SOCIAL ADVANTAGES WHEN WE
ACCELERATE BROADBAND AVAILABILITY AND INCREASE BROADBAND USE IN ALL
AREAS, RURAL AND URBAN, ALIKE. CONNECTED NATION FACILITATES
PUBLIC-PRIVATE PARTNERSHIPS TO INCREASE ACCESS TO AND USE OF BROADBAND
AND RELATED TECHNOLOGY, CREATING DRAMATIC RESULTS THAT TRANSLATE INTO
ECONOMIC AND COMMUNITY GROWTH, BETTER EDUCATION, HIGHER QUALITY
HEALTHCARE, MORE EFFICIENT PUBLIC SERVICE AND IMPROVED QUALITY OF LIFE.
CONNECTED NATION IS A LEADER AMONG ORGANIZATIONS THAT WORK IN THE
TRENCHES TO BRIDGE THE DIGITAL DIVIDE AND INCREASE OPPORTUNITIES THAT
ARE ENABLED WHEN PEOPLE HAVE THE ABILITY AND DESIRE TO CONNECT.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
EVALUATE THE CURRENT STATE OF ADOPTION, ACCESS, AND USE OF BROADBAND IN
THEIR AREA THIS PROGRAM, COMPLETED BOTH ONLINE AND THROUGH COMMUNITY
MEETINGS, HELPS COMMUNITIES FRAME THEIR NEEDS AROUND BROADBAND MAPPING
DATA, NATIONAL BROADBAND PLAN GOALS, AND BEST PRACTICES FOR LOCAL
SERVICE. THIS FRAMEWORK MATCHES PROBLEMS WITH MEASURABLE, IMPLEMENTABLE
SOLUTIONS. WHEN COMPLETE, THE PROGRAM PROVIDES A NATIONALLY RECOGNIZED
PLATFORM FOR SPOTLIGHTING COMMUNITIES THAT ARE EXCELLING ACROSS ALL
ADOPTION, ACCESS, AND USE MEASUREMENTS.
IDOLITON / ILCOLOD / ILLO COL ILLIDONALIZATION
CONNECTED NATION'S TECHNOLOGY ASSISTANCE PROGRAMS OPEN UP A GATEWAY TO
EDUCATIONAL, INFORMATIONAL, GOVERNMENTAL, HEALTH, AND SOCIAL RESOURCES.
WITH AN EXPERIENCED, DIVERSELY SKILLED, AND COMMITTED STAFF, CONNECTED
NATION HAS WORKED WITH GOVERNMENTS, COMMUNITY CHAMPIONS, BUSINESSES,

Employer identification number 61-1394934

CONNECTED NATION, INC.

AND COMMUNITY LEADERS TO OFFER GUIDANCE, EXPERTISE, AND RESEARCH TO

EXPAND BROADBAND TO UNDERSERVED AREAS ACROSS THE NATION. FURTHER, OUR

INDUSTRY-LEADING RESEARCH PROVIDES THE NEEDED INFORMATION FOR

COMMUNITIES TO MAKE INFORMED DECISIONS, AS DO OUR INNOVATIVE MAPS THAT

GIVE AN UNPRECEDENTED VIEW OF AN AREA'S BROADBAND LANDSCAPE. IN MANY

STATES, GOVERNMENTS HAVE ESTABLISHED TASK FORCES TO WORK ON BROADBAND

EXPANSION, AND CONNECTED NATION SEEKS TO BE AN ACTIVE AND USEFUL

RESOURCE FOR THESE TASK FORCES WITH SUPPORT IN RESEARCH, PLANNING,

OUTREACH, AND OTHER AREAS.

FOR A DECADE, THE CONNECTED NATION MODEL HAS RELIED ON PUBLIC-PRIVATE

PARTNERSHIPS WORKING TO EXPAND BROADBAND ACROSS THE NATION WITH A

VARIETY OF EFFORTS. THE CONNECTED NATION MAPPING PROGRAM RELIES ON THE

COOPERATION OF LITERALLY HUNDREDS OF PRIVATE PROVIDERS, AND OUR

COMMUNITY EXPANSION EFFORTS SIMILARLY RELY ON WORK WITH THE PRIVATE

SECTOR. CONNECTED NATION ACTIVELY SEEKS TO ENGAGE PARTNERS FROM ALL

SECTORS IN THE WORK OF BRIDGING THE DIGITAL DIVIDE. THESE

PUBLIC-PRIVATE PARTNERSHIPS ALLOW CONNECTED NATION TO PROVIDE TANGIBLE

RESULTS IN COMMUNITIES ACROSS THE NATION, AND STRENGTHEN OUR ABILITY TO

BRIDGE THE DIGITAL DIVIDE.

RAISING AWARENESS OF THE ISSUES SURROUNDING BROADBAND EXPANSION IS A

KEY COMPONENT OF THE CONNECTED NATION MISSION. TO THAT END, CONNECTED

NATION FACILITATES BROADBAND SUMMITS IN ITS STATES. THESE EVENTS BRING

TOGETHER STAKEHOLDERS FROM GOVERNMENT, NON-PROFITS, THE PROVIDER

COMMUNITY, EDUCATION, AND OTHER SECTORS, ALONG WITH OTHER INDUSTRY

LEADERS, TO OFFER A UNIQUE OPPORTUNITY FOR DIRECT ENGAGEMENT, PLANNING,

AND KNOWLEDGE SHARING. SIMILARLY, CONNECTED NATION ACTIVELY WORKS WITH

INDIVIDUAL COMMUNITIES TO ENGAGE THEM IN THE PLANNING PROCESS BY

OFFERING A COMPREHENSIVE STRUCTURE AND THE NEEDED SUPPORT TO EXPAND

BROADBAND ACCESS LOCALLY. THROUGH THESE EFFORTS, CONNECTED NATION HAS

ENGAGED HUNDREDS OF COMMUNITIES, FROM ALASKA TO PUERTO RICO, TO GET

THEM ON THE PATH TO THE EMPOWERING ADVANTAGE OF BROADBAND ACCESS,

ADOPTION, AND USE.

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

OFFLINE - WAS ESTABLISHED IN 2004 IN KENTUCKY AS A COMPUTER

REFURBISHING PROGRAM THAT PLACED COMPUTERS IN THE HANDS OF

MIDDLE-SCHOOL STUDENTS IN DISTRESSED APPALACHIAN REGIONAL COMMISSION

COUNTIES. OVER THE LAST SIX YEARS, THE PROGRAM HAS EVOLVED TO INCLUDE

DISTRIBUTIONS TO DIVERSE SEGMENTS OF THE POPULATION THROUGH CONNECTED

NATION'S CONNECTKENTUCKY, CONNECTED TENNESSEE, AND CONNECT OHIO

PROGRAMS. THE EVERY COMMUNITY ONLINE PROGRAMS HAVE DELIVERED NEARLY

10,000 COMPUTERS ALONG WITH PRINTERS, SOFTWARE, SERVERS AND OTHER

TECHNOLOGIES.

IN TENNESSEE, CONNECTED NATION'S COMPUTERS 4 KIDS (C4K) PROGRAM HAS HAD

A SIGNIFICANT IMPACT ON SOME OF STATE'S MOST VULNERABLE YOUTH. TO DATE,

C4K HAS PROVIDED OVER 4,300 COMPUTERS TO AT RISK CHILDREN AND FAMILIES

ACROSS TENNESSEE. C4K IS WORKING WITH THE TENNESSEE DEPARTMENT OF

CHILDREN'S SERVICES TO PROVIDE COMPUTERS TO CHILDREN IN THE FOSTER CARE

SYSTEM. IN 2010, C4K RECEIVED A FEDERAL GRANT TO FURTHER ITS REACH

THROUGH THE BOYS AND GIRLS CLUBS OF TENNESSEE. AS A PART OF THE

COMPUTERS 4 KIDS: PREPARING TENNESSEE'S NEXT GENERATION FOR SUCCESS

PROJECT. THE C4K PROGRAM DEPLOYS COMPUTERS, ACADEMIC SUPPORT PROGRAMS,

AND WORKFORCE TRAINING TO TWO DISPARATE, BUT ESPECIALLY AT-RISK,

CONNECTED NATION, INC.

Employer identification number 61-1394934

POPULATIONS: THOSE IN THE STATE'S FOSTER CARE SYSTEM WHO ARE "AGING OUT" AS THEY TURN 18, AND YOUTH WHO ARE ACTIVE IN THE STATE'S 76 BOYS & GIRLS CLUBS. THE AMERICAN RECOVERY AND REINVESTMENT ACT-FUNDED PROGRAM WILL IMPACT THE LIVES OF NEARLY 60,000 YOUTH ACROSS THE STATE THROUGHOUT THE LIFE OF THE GRANT - PROVIDING A HELPING HAND TO YOUTH THAT ARE WORKING HARD TO ATTAIN A BETTER LIFE FOR THEMSELVES.

IN OHIO, THE EVERY CITIZEN ONLINE PROJECT, WHICH BEGAN IN EARNEST IN 2011, PROVIDES FREE COMPUTER TRAINING SESSIONS AT PUBLIC LIBRARIES. COMMUNITY COLLEGES, COMMUNITY ORGANIZATIONS, AND EDUCATIONAL CENTERS THROUGHOUT OHIO AND TEACHES NEW USERS HOW TO ACCESS THE INTERNET AND HOW TO BEST UTILIZE ALL THE INTERNET HAS TO OFFER. THE GOAL OF THE PROJECT IS TO SHOWCASE THE MANY EDUCATIONAL, HEALTHCARE, ECONOMIC, AND COMMUNICATION BENEFITS OF BROADBAND USE, AND TO ENCOURAGE ADOPTION BY RESIDENTS STATEWIDE. CURRENTLY, JUST 66% OF OHIOANS SUBSCRIBE TO A BROADBAND SERVICE AT THEIR HOME. THE SCOPE OF THIS PROGRAM INCLUDES: 80,000 TRAINING HOURS; 280+ LOCATIONS; 200,000 NON-SUBSCRIBING HOUSEHOLD PARTICIPANTS; 75,000 INCREMENTAL ADOPTERS; 2,000+ COMPUTERS PROVIDED TO LIBRARIES AND COMMUNITY COLLEGES; \$10 MILLION PROJECT, INCLUDING \$3 MILLION IN MATCHING FUNDS; 136 TOTAL JOBS, DIRECT, INDIRECT, AND INDUCED; 68 DIRECT JOB-YEARS; EXTENSIVE STATEWIDE PUBLIC SERVICE ANNOUNCEMENT CAMPAIGN; \$31 MILLION IN INCREMENTAL ANNUAL SUBSCRIPTION REVENUE FOR BROADBAND.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: THEIR ARRA FUNDED GRANTS TO IMPROVE CONNECTIVITY IN LOCAL PUBLIC LIBRARIES.

DUE TO INADVERTENT ERROR, THIS AMOUNT WAS NOT INCLUDED ON THE RETURN AS ORIGINALLY FILED. OFFICER COMPENSATION (PARTS VII AND IX), MANAGEMENT AND GENERAL EXPENSES (PART IX), AND ACCRUED WAGES LIABILITY (PART X) EACH INCREASED \$10,145. NET ASSETS (PART X) DECREASED \$10,145.

IN ADDITION TO THE ABOVE, THE ALLOCATION OF NET ASSETS FOR UNRESTRICTED AND TEMPORARILY RESTRICTED ON PART X WAS CORRECTED.

SCHEDULE D, PART X, REFLECTS THE LIABILITY OF \$10,145 FOR ADDITIONAL ACCRUAL FOR WAGES.

	ule O (Form 990		UII)			.	_			_Fd	ige z
Name	of the organizat		ECTED NAT	ION,	INC.			Employe 61	-139	tification num	ber —-
THE	AMENDED	RETURN	REFLECTS	THE	ORGANIZATIONS'S	CURRENT	AD	DRESS	ON	PAGE	
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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

mber 2011 Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenice Service	Complete if the organization answered. Test to rothli sou, rait iv, fine so, 54, 55, 50, 50, 51, 52, 50, 51, 52, 52, 52, 52, 52, 52, 52, 52, 52, 52	See separate instructions.	tions.	.,,	Ö	Open to Public Inspection
Name of the organization CONNECTED NATION,	ION, INC.				Employer identification number $61-1394934$	ation number 3.4
Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)	te if the organization answered "Yes" to	o Form 990, Part IV, line 33.)				
(a)	(q)	(0)	(2)	(e)		(J)
Name, address, and EIN	Pnmary activity	Legal domicile (state or	Total income	End-of-year assets		Direct controlling
of disregarded entity		foreign country)			<u>——</u>	entity
CN FINANCIAL, LLC - 26-0530874						:
1020 COLLEGE STREET						
BOWLING GREEN, KY 42101	ASSET HOLDING COMPANY	KENTUCKY	17,672.	1,884,508.	08. CONNECTED NATION	ATION, INC.
CONNECT ALASKA, LLC - 26-0742035						
1020 COLLEGE STREET	TO IMPLEMENT CONNECTED					
BOWLING GREEN, KY 42101	NATION'S MISSION IN ALASKA	KENTUCKY	925,9	,968.	0. CONNECTED NATION	ATION, INC.
CONNECT ALABAMA, LLC - 26-0550734						
1020 COLLEGE STREET	TO IMPLEMENT CONNECTED					
BOWLING GREEN, KY 42101	NATION'S MISSION IN ALABAMA	KENTUCKY		0.	0. CONNECTED NATION	ATION, INC.
CONNECT ARKANSAS, LLC - 26-0550908	TO IMPLEMENT CONNECTED					
1020 COLLEGE STREET	NATION'S MISSION IN					
BOWLING GREEN, KY 42101	ARKANSAS	KENTUCKY		0.	0. CONNECTED NATION	ATION, INC.
Part II Identification of Related Tax-Exempt Organizations (Complete if the organizations during the tax year.)	ations (Complete if the organization an	ie organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt	art IV, line 34 beca	luse it had one or m	ore related tax-exem	pt
(a)	(q)	(0)	(p)	(e)	ω	(g)
Name, address, and EIN of related organization	Pnmary activity	Legal domicile (state or	Exempt Code section s	Public charity status (if section	Direct controlling entity	controlled entity?
				501(c)(3))		Ves

Yes No entity status (if section 501(c)(3)) section foreign country) of related organization

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

Schedule R (Form 990) 2011

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(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
CONNECT ARIZONA, LLC - 26-0745378 1020 COLLEGE STREET BOWLING GREEN KY 42101	TO IMPLEMENT CONNECTED NATION'S MISSION IN ARIZONA	KENTUCKY	.0	0	CONNECTED NATION, INC.
CALIFORNIA LEGE STREET GREEN KY	TO IMPLEMENT CONNECTED NATION'S MISSION IN CALIFORNIA	KENTUCKY	.0	0	CONNECTED NATION, INC.
121	TO IMPLEMENT CONNECTED NATION'S MISSION IN COLORADO	KENTUCKY	.0	.0	CONNECTED NATION, INC.
CONNECT CONNECTICUT, LLC - 26-1377201 1020 COLLEGE STREET BOWLING GREEN, KY 42101	TO IMPLEMENT CONNECTED NATION'S MISSION IN CONNECTICUT	KENTUCKY	0	0	CONNECTED NATION, INC.
CONNECT DELAWARE, LLC - 26-0741366 1020 COLLEGE STREET BOWLING GREEN, KY 42101	TO IMPLEMENT CONNECTED NATION'S MISSION IN DELAWARE	KENTUCKY	0	0	CONNECTED NATION, INC.
CONNECT FLORIDA, LLC - 26-0741262 1020 COLLEGE STREET BOWLING GREEN, KY 42101	MENT CONNECTED MISSION IN FLORIDA	KENTUCKY	672,941.	151,713.	CONNECTED NATION, INC.
CONNECT GEORGIA, LLC - 26-0550938 1020 COLLEGE STREET BOWLING GREEN, KY 42101	TO IMPLEMENT CONNECTED NATION'S MISSION IN GEORGIA	KENTUCKY	0	.0	CONNECTED NATION, INC.
CONNECT HAWAII, LLC - 26-0742834 1020 COLLEGE STREET BOWLING GREEN, KY 42101	TO IMPLEMENT CONNECTED NATION'S MISSION IN HAWAII	KENTUCKY	0	.0	CONNECTED NATION, INC.
CONNECT IOWA, LLC - 26-0742423 1020 COLLEGE STREET BOWLING GREEN, KY 42101	TO IMPLEMENT CONNECTED NATION'S MISSION IN IOWA	KENTUCKY	998,465.	0	CONNECTED NATION, INC.
CONNECT IDAHO, LLC - 26-0742655 1020 COLLEGE STREET BOWLING GREEN, KY 42101	TO IMPLEMENT CONNECTED NATION'S MISSION IN IDAHO	KENTUCKY	0	0.	CONNECTED NATION, INC.

(a)	(q)	(9)	9	(e)	(
Name, address, and EIN	Pnmary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)			entity
CONNECT ILLINOIS, LLC - 26-0550765	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN				
BOWLING GREEN, KY 42101	ILLINOIS	KENTUCKY	20,000.	0.	CONNECTED NATION, INC.
CONNECT INDIANA, LLC - 26-0742459					
1020 COLLEGE STREET	TO IMPLEMENT CONNECTED				
BOWLING GREEN, KY 42101	NATION'S MISSION IN INDIANA	KENTUCKY	0.	0.	CONNECTED NATION, INC.
CONNECT KANSAS, LLC - 26-0655800					
1020 COLLEGE STREET	TO IMPLEMENT CONNECTED				
BOWLING GREEN, KY 42101	NATION'S MISSION IN KANSAS	KENTUCKY	513,908.	15,986.	CONNECTED NATION, INC.
CONNECTKENTUCKY, LLC - 26-0530781	TO IMPLEMENT CONNECTED				
311 W. MAIN ST.	NATION'S MISSION IN				
FRANKFORT, KY 40601	KENTUCKY	KENTUCKY	81,488.	20,002.	CONNECTED NATION, INC.
CONNECT LOUISIANA, LLC - 26-0742125	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN				
BOWLING GREEN, KY 42101	LOUISIANA	KENTUCKY	0.	0.	CONNECTED NATION, INC.
CONNECT MASSACHUSETTS, LLC - 26-0531255	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN		_		
BOWLING GREEN, KY 42101	MASSACHUSETTS	KENTUCKY	0.	0.	CONNECTED NATION, INC.
CONNECT MARYLAND, LLC - 26-0742932	TO IMPLEMENT CONNECTED				ı
1020 COLLEGE STREET	NATION'S MISSION IN				
BOWLING GREEN, KY 42101	MARYLAND	KENTUCKY	0.	0.	CONNECTED NATION, INC.
CONNECT MAINE, LLC - 26-0742970					
1020 COLLEGE STREET	TO IMPLEMENT CONNECTED				
BOWLING GREEN, KY 42101	NATION'S MISSION IN MAINE	KENTUCKY	0.	0.	CONNECTED NATION, INC.
CONNECT MICHIGAN, LLC - 26-0744287	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN				
BOWLING GREEN, KY 42101	MICHIGAN	KENTUCKY	1,054,855.	0.	CONNECTED NATION, INC.
CONNECT MINNESOTA, LLC - 26-0744206	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN				
BOWLING GREEN, KY 42101	MINNESOTA	KENTUCKY	810,005.	0.	CONNECTED NATION, INC.

(a)	(q)	(0)	(p)	(e)	6
Name, address, and EIN	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)			entity
CONNECT MISSOURI, LLC - 26-0744141	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN				
BOWLING GREEN, KY 42101	MISSOURI	KENTUCKY	0.	0.	CONNECTED NATION, INC.
CONNECT MISSISSIPPI, LLC - 26-0744098	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN				
BOWLING GREEN, KY 42101	MISSISSIPPI	KENTUCKY	0.	0.	CONNECTED NATION, INC.
CONNECT MONTANA, LLC - 26-0744054					
1020 COLLEGE STREET	TO IMPLEMENT CONNECTED				
BOWLING GREEN, KY 42101	NATION'S MISSION IN MONTANA	KENTUCKY	0.	0.	CONNECTED NATION, INC.
CONNECT NORTH CAROLINA, LLC - 26-0745323	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN NORTH				
BOWLING GREEN, KY 42101	CAROLINA	KENTUCKY	0.	0.	CONNECTED NATION, INC.
CONNECT NORTH DAKOTA, LLC - 26-0745218	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN NORTH				
BOWLING GREEN, KY 42101	ракота	KENTUCKY	0.	0.	CONNECTED NATION, INC.
CONNECT NEBRASKA, LLC - 26-0743928	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN				
BOWLING GREEN, KY 42101	NEBRASKA	KENTUCKY	0.	0.	CONNECTED NATION, INC.
CONNECT NEW HAMPSHIRE, LLC - 26-0743978	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN NEW				
BOWLING GREEN, KY 42101	HAMPSHIRE	KENTUCKY	0.	.0	CONNECTED NATION, INC.
CONNECT NEW JERSEY, LLC - 26-0743055	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN NEW				
BOWLING GREEN, KY 42101	JERSEY	KENTUCKY	0.	0.	CONNECTED NATION, INC.
CONNECT NEW MEXICO, LLC - 26-0743010	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN NEW				
BOWLING GREEN, KY 42101	MEXICO	KENTUCKY	0.	.0	CONNECTED NATION, INC.
CONNECT NEVADA, LLC - 26-0743867					
1020 COLLEGE STREET	TO IMPLEMENT CONNECTED				
BOWLING GREEN, KY 42101	NATION'S MISSION IN NEVADA	KENTUCKY	873,448.	-50.	CONNECTED NATION, INC.

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(a)	(q)	(0)	(p)	(e)	()
Name, address, and EIN	Pnmary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)			entity
CONNECT NEW YORK, LLC - 26-0745275	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN NEW				
BOWLING GREEN, KY 42101	YORK	KENTUCKY	.0	0.	CONNECTED NATION, INC.
CONNECT OHIO, LLC - 26-0550687					
232 NORTH 3RD STREET, SUITE 201	TO IMPLEMENT CONNECTED				
COLUMBUS, OH 43215	NATION'S MISSION IN OHIO	KENTUCKY	4,268,827.	2,338.	CONNECTED NATION, INC.
CONNECT OKLAHOMA, LLC - 26-1361381	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN				
BOWLING GREEN, KY 42101	ОКГАНОМА	KENTUCKY	.0	0.	CONNECTED NATION, INC.
CONNECT OREGON, LLC - 26-0655737					
1020 COLLEGE STREET	TO IMPLEMENT CONNECTED				
BOWLING GREEN, KY 42101	NATION'S MISSION IN OREGON	KENTUCKY	0.	0.	CONNECTED NATION, INC.
CONNECT PENNSYLVANIA, LLC - 26-0655472	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN				
BOWLING GREEN, KY 42101	PENNSYLVANIA	KENTUCKY	0.	0.	CONNECTED NATION, INC.
CONNECT PUERTO RICO, LLC - 27-0230775	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN PUERTO				
BOWLING GREEN, KY 42101	RICO	KENTUCKY	508,808.	107,701.	CONNECTED NATION, INC.
CONNECT RHODE ISLAND, LLC - 26-0655289	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN RHODE				
BOWLING GREEN, KY 42101	ISLAND	KENTUCKY	0.	0.	CONNECTED NATION, INC.
CONNECT SOUTH CAROLINA, LLC - 26-0550185	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN SOUTH				
BOWLING GREEN, KY 42101	CAROLINA	KENTUCKY	677,325.	0.	CONNECTED NATION, INC.
CONNECT SOUTH DAKOTA, LLC - 26-0655233	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN SOUTH				
BOWLING GREEN, KY 42101	ракота	KENTUCKY	0.	0.	CONNECTED NATION, INC.
CONNECTED TENNESSEE, LLC - 26-0530182	TO IMPLEMENT CONNECTED				
618 CHURCH STREET, SUITE 305	NATION'S MISSION IN				
NASHVILLE, TN 37219	TENNESSEE	KENTUCKY	1,827,249.	-17.	CONNECTED NATION, INC.
				:	

(a)	(p)	(0)	(D)	(e)	(£)
Name, address, and EIN	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)			entity
CONNECT TEXAS, LLC - 26-0745141			7		
1020 COLLEGE STREET	TO IMPLEMENT CONNECTED				
BOWLING GREEN, KY 42101	NATION'S MISSION IN TEXAS	KENTUCKY	1,391,850.	0.	CONNECTED NATION, INC.
CONNECT UTAH, LLC - 26-0655085					
1020 COLLEGE STREET	TO IMPLEMENT CONNECTED				
BOWLING GREEN, KY 42101	NATION'S MISSION IN UTAH	KENTUCKY	0.	0	CONNECTED NATION, INC.
CONNECT VIRGIN ISLANDS, LLC - 27-0427136	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN VIRGIN				
BOWLING GREEN, KY 42101	ISLANDS	KENTUCKY	0	0.	CONNECTED NATION, INC.
CONNECT VIRGINIA , LLC - 26-0550872	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN				
BOWLING GREEN, KY 42101	VIRGINIA	KENTUCKY	0	0.	CONNECTED NATION, INC.
CONNECT VERMONT, LLC - 26-0654488					
1020 COLLEGE STREET	TO IMPLEMENT CONNECTED				
BOWLING GREEN, KY 42101	NATION'S MISSION IN VERMONT	KENTUCKY	0.	0.	CONNECTED NATION, INC.
CONNECT WASHINGTON DC, LLC - 26-0744440	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN				
BOWLING GREEN, KY 42101	WASHINGTON DC	KENTUCKY	.0	0.	CONNECTED NATION, INC.
CONNECT WASHINGTON, LLC - 26-0654354	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN				
BOWLING GREEN, KY 42101	WASHINGTON	KENTUCKY	0	0.	CONNECTED NATION, INC.
CONNECT WISCONSIN, LLC - 26-0744383	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN				
BOWLING GREEN, KY 42101	WISCONSIN	KENTUCKY	0	0.	CONNECTED NATION, INC.
CONNECT WEST VIRGINIA, LLC - 26-0531166	TO IMPLEMENT CONNECTED				
1020 COLLEGE STREET	NATION'S MISSION IN WEST				
BOWLING GREEN, KY 42101	VIRGINIA	KENTUCKY	0	0.	CONNECTED NATION, INC.
CONNECT WYOMING, LLC - 26-0744328					
1020 COLLEGE STREET	TO IMPLEMENT CONNECTED				
BOWLING GREEN, KY 42101	NATION'S MISSION IN WYOMING	KENTUCKY	•	.0	CONNECTED NATION, INC.

61-1394934

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CONNECTED NATION, INC. Schedule R (Form 990) 2011

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Pnmary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant (related, un excluded from sections 51	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of tend-of-year assets	(h) Disproportionate allocations? Yes No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or General or Formanaging partner?	(k) Percentage ownership
Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	anizations Taxable as poration or trust during	a Corpo	ration or Trust (Con	nplete if the	e organizatio	n answered "Yes"	to Form 990, Parl	IV, line 34	because it had	one or m	ore related
(a) Name, address, and EIN of related organization	7.		(b) Pnmary activity		(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income		(g) Share of end-of-year assets	(h) Percentage ownership
CN VENTURES, INC. 1020 COLLEGE STREET BOWLING GREEN, KY 42101			TECHNOLOGY CONSULTING	LTING	KY	CONNECTED	C CORP	:	9,282.	9,995	1008
132162 01-23-12									Sche	dule R (Fo	Schedule R (Form 990) 2011

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Schedule R (Form 990) 2011 CONNECTED NATION, INC.

Part V Transactions With Related Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. 1. Direct the tax year did the presention engage in any of the following transactions with one or more related presentations listed in Parts II.IV?	s with one or more rel	ted organizations listed	Parts II:IV2	Yes No
a Recept of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	;		: : : : : : : : : : : : : : : : : : : :	ta X
b Gift, grant, or capital contribution to related organization(s)	:	:	: : : : : : : : : : : : : : : : : : : :	ф Ж
c Gift, grant, or capital contribution from related organization(s)		:	: : : : : : : : : : : : : : : : : : : :	1c X
d Loans or loan guarantees to or for related organization(s)	:	:	: : : : : : : : : : : : : : : : : : : :	×
e Loans or loan guarantees by related organization(s)		:	:	1e X
f Sale of assets to related organization(s)		:	:	1f X
g Purchase of assets from related organization(s)		: : : : : : : : : : : : : : : : : : : :		1g X
h Exchange of assets with related organization(s)		:		바
i Lease of facilities, equipment, or other assets to related organization(s)		:	:	± X
j Lease of facilities, equipment, or other assets from related organization(s)	:	:		1;
k Performance of services or membership or fundraising solicitations for related organization(s)	nization(s)		:	샤 X
I Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			×
$oldsymbol{m}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)	:	:	T X
n Sharing of paid employees with related organization(s)	:	:		Th X
 Reimbursement baid to related organization(s) for expenses 				٠ ×
	: :	. :		1 _p X
				>
 q Other transfer of cash or property to related organization(s) r Other transfer of cash or property from related organization(s) 	:			1c X
If the answer to any of the above is "Yes," see the instructions for inform	ho must complete the	s line, including covered r	ation on who must complete this line, including covered relationships and transaction thresholds.	
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved	
(1) CN VENTURES, INC.	Ą	40,687.	CASH	
(2) CN VENTURES, INC.	Д	.506,869	саѕн	
(3) CN VENTURES, INC.	×	90,055.	саѕн	
(4) CN VENTURES, INC.	Z	153,441.	САЅН	Ī
(5)				
(9)				
132163 01-23-12			Schedule R	Schedule R (Form 990) 2011

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Schedule R (Form 990) 2011 CONNECTED NATION, INC.

Part VI Unrelated Organizations Taxable as a Partnership (Complete of the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(k) centage nership					1001
Perc			 		8
(j) meral or anaging	S S S S S S S S S S S S S S S S S S S			-	
8 = 3	<u> </u>				 <u> </u>
(h) (i) (j) (k) Dispropor- Dispr					Schedule B (Form 000) 2011
(h) Disproportionale allocations?	ON THE PROPERTY OF THE PROPERT				
Disp	ម័ -				
(g) Share of end-of-year assets					
(f) Share of total income					
(e) Are all partners sec. 501(c)(3) 01857	S S			 	
8. 1. 2. 1.					
Predominant income (related, unrelated, excluded from tax					
ign	3	_			
(c) Legal domicile (state or foreign country)					
(b) Pnmary activity			:		
Name, address, and EIN Pnmary activity Legal domicile (related, unclated, of entity of entity country) (a) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d					

Schedule F	R (Form 990) 2011	CONNECTED	NATION,	INC.		61-1394934	Page 5
Part VII	R (Form 990) 2011 Supplemental Infor	mation	<u></u>				
	Complete this part to pro		nation for respon	ses to questions on So	chedule R (see instruction	ons).	
	Complete the part to pro	Tido additional inform	idadii ida idagan	ioco to quostione on oc			
						 	
							
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