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SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization								Employer (dentification number			
MAPLE GROVE CRIMSON FOOTBALL ATHLETIC CLUB Part I Reason for Public Charity Status (All organizations must complete this								20-3389400			
	omanization is no	t a private found	arity Status (All org	anizatio	ns must	comple	te this p	art.) See	instruc	tions.	
1 2 3	organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) \[\text{A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). \[\text{A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)} \] \[\text{A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).} \]										
4	☐ A medical re hospital's na	nedical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the ipital's name, city, and state:									
5	Section 170	rganization operated for the benefit of a college or university owned or operated by a governmental unit described in ion 170(b)(1)(A)(iv). (Complete Part II.)									
6 7	An organizat	l, state, or local government or governmental unit described in section 170(b)(1)(A)(v). Dization that normally receives a substantial part of its support from a governmental unit or from the general public of in section 170(b)(1)(A)(vi). (Complete Part II.)									
8	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)										
9	An organization that normally receives: (1) more than 331/s% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/s% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)										
10	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).										
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 609(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.										
	a ☐ Type I b ☐ Type II c ☐ Type III~Functionally Integrated d ☐ Type III-Non-functionally Integrate										
0	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).										
f	organization,	organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting zation, check this box									
g	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?										
	(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?										
	(ii) A family member of a parage described in (2 above)							. 119(i)			
h	Provide the fo	ntrolled entity of Illowing informat	a person described in ion about the support	ı (i) or (li)	above? .					11g(HI)	
~	Name of supported organization	(ii) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(tv) is the organization in col. (i) listed in your governing document?		(v) Did you notity		(vi) is the organization in col. (i) organized in the U.S.?		(MI) Amount of monetary support	
	· · · · · · · · · · · · · · · · · · ·	ļ	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes	No	Yes	No	Yes	No	1	
(A)					_						
(B)											
(C)											
(D)											
(E) 						- Xam					
Total			i i i i i i i i i i i i i i i i i i i	150,610	X.54.5	17.5		P. S	100		

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MAPLE GROVE CRIMSON FOOTBALL ATHLETIC CLUB 9162 QUANTICO LANE N MAPLE GROVE MN 55369



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DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

officer or trustee