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SCHEDULE G (Form 990 or 990-EZ) Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047 2012

Departo	nent of the Revenue	Treasury Service	Complete	organization ente	red more ther	n \$15,000 on l	Form 990-6Z, line 6a separate instruction	na.	Open to Public Inspection
		anızatıon					•	Employer identif	
Integr	eted Co		evelopment Interna						0112278
Par	tii			. Complete if th not required to			vered "Yes" to f	orm 990, Part IV,	line 17.
1	Indics						wing activition (	Check all that apply.	····
a		ail solicita		on raised lutius t					
b	_	1	d email solicitatio	nno .	e Solicitation of non-government grants ons f Solicitation of government grants				
c		none sollo		7113	f  Solicitation of government grants g  Special fundralsing events				
d	_		olicitations		9 _	opoolui i	and alsing avent	•	
2a				itten or oral agre	ement with	any individ	dual (including of	ficers, directors, tru:	stees
	or ke	employe	es listed in Form	1 990, Part VII) oi	entity in co	nnection v	with professional	fundraising services	? Z Yes No
Ь	If "Ye	s," list the	ten highest pal		entities (fund				he fundraiser is to be
		e and address of Individual (ii) A		(ii) Activity	(III) Old fundraiser have custody or control of contributions?		(IV) Gross receipts from activity	(v) Amount paid to (or retained by) fundraliser listed in col. (t)	(vi) Amount paid to (or retained by) organization
					Yes	No			
35	oner ik	ton Street		Dept focus		4			24,266
2 E	ncompa O Box 5	is World Pa 88		Graphics		4			7,280
3	ioone L	ke, IN 465	190						
4									
5									
6	_								
7								<del>,</del>	
8									
9									
10			·						
				Ι				· <del>··········</del>	31,560
Total	1.54-	1 0404 1	a which the area			, <b>&gt;</b>	11012 0001 110 01		ied it is exempt from
3	regist	ration or li	icensing.	•					
	444								
		l							
		l							
		1							
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Cat. No. 50083H

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

	edule G Irt II	Ì	m 990 or 990-EZ) 2012 Fundraising Events. Con than \$15,000 of fundraisir	nplete if the organizati	on answered "Yes" to	Form 990, Part IV, line	Page 2					
			gross receipts greater tha	in \$5,000.	and gross meeting on	- VIIII 330-L.Z., III 163 1 6	ing op, rist avauts with					
			<u> </u>	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through					
				(évent type)	(event type)	(total number)	col. (c))					
Ę							···					
Revenue	1	Ģ	ross receipts				·····					
Œ	2	L	ess: Contributions									
	3		ross income (line 1 minus									
_		lir	ne 2)									
	4	c	ash prizes									
Direct Expenses	•	Ĭ										
	5	N	oncash prizes									
	6	R	ent/facility costs	····								
	7	F	ood and beverages									
	8	Ε	ntertainment			·						
	9	o	ther direct expenses .									
	10	Direct expense summary. Add lines 4 through 9 in column (d)										
Þ٥	11 rt (()	N	et income summary. Comb <b>Gaming.</b> Complete if the	eine line 3, column (d), a	nd line 10	O Part IV line 19 or	aported more					
1 (			than \$15,000 on Form 9		red res to rollings	o, Fait IV, IIII 9 19, 01 1	aportad mora					
- Pur				(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col. (e))					
Revenue	1	G	ross revenue				***************************************					
							•					
Ses	2	C	ash prizes									
Direct Expenses	3	N	oncash prizes									
Direct	4	R	ent/facility costs		7							
	5	0	ther direct expenses .									
	6	V	olunteer labor	☐ Yes% ☐ No	☐ Yes%	☐ Yes%						
	7	D	rect expense summary. Ad	ld lines 2 through 5 in o	olumn (d)		( )					
	8		et gaming income summan	_	,	<i>.</i>	· · · · · · · · · · · · · · · · · · ·					
	_					<u>, , , , , , , , , , , , , , , , , , , </u>						
9			the state(s) in which the organization operates gaming activities:  organization licensed to operate gaming activities in each of these states?									
			l =				Yes No					
	***					~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~						
40												
10			any of the organization's g s." explain:	•	•	•						
			n <sup>H</sup> avalain:	•	***************************************	ted during the tax year?						
			n <sup>H</sup> avalain:	•	***************************************							

Schedu		m 990 or 990-EZ) 2012		P	age 3
11 12	Is the	organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity		es 🗌	
13 a	Indica The o	te the percentage of gaming activity operated in: rganization's facility		es 🗀	%
14		Itside facility		<del></del>	<u>%</u> _
	Name	······································			
	Addre	ess <b>&gt;</b>			
	reven	the organization have a contract with a third party from whom the organization receives gaming ue?	□ Y <sub>0</sub>	es 🔲	No
	amou	s," enter the amount of gaming revenue received by the organization \( \) \$ and the nt of gaming revenue retained by the third party \( \) \$			
	Name	, <b>-</b>			
	Addr	pss ▶			
16	Gami	ng manager information:			
	Name	∍►			
		ng manager compensation ► \$			
		ractor/officer Employee Independent contractor		4140000	
17 a b	Is the retain Enter	latory distributions.  organization required under state law to make charitable distributions from the gaming proceeds to the state gaming license?	□ Y	es 🗌	No
Part	V	Supplemental Information. Complete this part to provide the explanations required by Part I, I columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also corpart to provide any additional information (see instructions).			
	wey wo	rked with the new Development department to create goals and structure after employee turnover.  /orld Partners did graphic work for promotional material and website maintenance	*****		
*******					
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		Şchedule û (Form	990 or :	990-EZ)	2012