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Department of the Treasury Internal Revenue Service

#### Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 2012 Open to Public Inspection

Form 990 (2012)

For the 2012 calendar year, or tax year beginning 07/01/12, and ending 06/30/13 C Name of organization Employer identification number Check if applicable SKY RANCH FOUNDATION, INC Address change Doing Business As 13-1970360 Name change Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Initial return 2612 ALIA CIRCLE 502-295-1550 Terminated City, town or post office, state, and ZIP code Amended return LOUISVILLE 40222 3,601,082 G Gross receipts \$ Name and address of principal officer Application pending H(a) Is this a group return for affiliates? X RALPH AGUERA 2612 ALIA CIRCLE H(b) Are all affiliates included? **KY 40222** LOUISVILLE If "No." attach a list (see instructions) Tax-exempt status X 501(c)(3) 501(c) ( (insert no ) www.skyranchfoundation.org Website > H(c) Group exemption number ▶ X Corporation Trust Form of organization Association Year of formation 1961 M State of legal domicile Part I Summary 1 Briefly describe the organization's mission or most significant activities TO GIVE AT-RISK YOUTH A SECOND CHANCE BY IDENTIFYING AND OFFERING FINANCIAL AID TO EFFICIENT AND EFFECTIVE PROGRAMS FOCUSED ON IMPROVING THE PRESENT **OUALITY OF HELP AVAILABLE TO THESE YOUTH.** 2 Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) 3 7 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 0 5 6 Total number of volunteers (estimate if necessary) 6 25 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7h Prior Year **Current Year** 15,077 8 Contributions and grants (Part VIII, line 1h) 537,115 9 Program service revenue (Part VIII, line 2g) 877,547 325,510 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 652 4,323 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,415,314 344,910 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 399,644 302,750 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 5,684 **b** Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 298,964 91,822 698,608 394,572 18 Total expenses Add lines 13-17 (must equal Part IX, column-(A), line-25) -49<u>,662</u> 716,706 19 Revenue less expenses Subtract line 18 from line 12 P S Beginning of Current Year End of Year 3,827,304 20 Total assets (Part X, line 16) OS( 3,990,612 0 9 2014 21 Total liabilities (Part X, line 26) 6,250 108,750 ഗ് Net assets or fund balances Subtract line 21 from line 20 821,054 3,881,862 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 Sign President SKy Ronch FoundaTion . @ Here AhOhType or print name and title Print/Type preparer's name Preparer's signature Check Paid Steve R. Guy 05/28/14 self-employed P00027615 Preparer Steve Guy & Associates, 20-1817360 Firm's name Firm's EIN ▶ Use Only 4900 Southpoint Drive Fredericksburg, VA 22407 540-891-7555 Phone no May the IRS discuss this return with the preparer shown above? (see instructions) Yes No For Paperwork Reduction Act Notice, see the separate instructions.

		SKY RANCH FOUN		13-1970360	Page 2
Pa			ervice Accomplishments ains a response to any question	in this Part III	
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3	services?	ganization cease conducting, or escribe these changes on Sche	make significant changes in how it con	ducts, any program	Yes X No
4	Describe texpenses	he organization's program servi Section 501(c)(3) and 501(c)(4	ce accomplishments for each of its thre	e largest program services, as measured by e amount of grants and allocations to others,	
	(Code	) (Expenses \$ ANCE TO PROGRAMS	302,750 including grants of \$ FOR AT-RISK YOUTH.		)
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	(Expenses	s \$ gram service expenses ▶	including grants of \$ 302,750	) (Revenue \$	. )
DAA					Form 990 (2012)

## Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," omplete Schedule B, Schaddle of Cornthutors (see instructions)? 2 Is the organization required to complete Schedule B, Schaddle of Cornthutors (see instructions)? 3 In the organization required in direct or indiversity of the complete Schaddle C, Part I Section 501(c)(3) organizations. Det the organization engage in lobbying activities, in have a section 501(h) effection in effect during the tax year? If "Yes," complete Schadule C, Part I I S the organization assection 501(c)(6)		•		Yes	No
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VII, VIII, IX, or X as applicable  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete Schedule D, Part VI  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 18° If "Yes," complete Schedule D, Part VII  11b X  Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 18° If "Yes," complete Schedule D, Part VIII  11c X  Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16° If "Yes," complete Schedule D, Part IX  Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X  Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X  11d X  Did the organization's iability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  11th X  12a Did 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 and XII is optional  12b X  13 Is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  13 X  Did the organization maintain an office, employees, or agents outside of the United States?  14a Did the organization neared 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 A  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gardis or assistance to any organization report on Part IX,		endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
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Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  19 If "Yes," complete Schedule G, Part III  20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20a X  20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		x
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  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  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20a X  b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  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  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		Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
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  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20a X  b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  20b	18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
If "Yes," complete Schedule G, Part III  20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20a X  b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  20b		Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  20a X  20b	19				
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  20b			19		
					<u> </u>
	b	It "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	ليا	<u> </u>

# Part IV Checklist of Required Schedules (continued)

		T	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization		res	No
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	$\mathbf{x}$	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			₩.
20	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<u> </u>
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 "Vee " complete Schodule I. Bort IV		~ mm	<b>X</b>
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		
J	Schedule L, Part IV	28b		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
Ū	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u>x</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	<u></u>		
	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? 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 Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	ĺ		
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		_X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		_ <u>X</u> _
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
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		<u>x</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		[	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

Pa	art V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part \	/				
			1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	d				
	reportable gaming (gambling) winnings to prize winners?			1c		<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 _				
L	Statements, filed for the calendar year ending with or within the year covered by this return	2a	0	<u> </u>		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax r			_2b	$\vdash$	<u> </u>
3a	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruct Did the organization have unrelated business gross income of \$1,000 or more during the year?	uons)		3a		<b>x</b>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a		her author	itv	0.5		$\vdash$
	over, a financial account in a foreign country (such as a bank account, securities account, or other		•			
	account)?			4a		x
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 Finan	cial Accou	ınts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax yea	r?		5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-	nsaction?		5b		x
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		L
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and d	id the				
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a	<b></b>	<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contrib	outions or				
7	gifts were not tax deductible?  Organizations that may receive deductible contributions under coetien 170(c)			6b	<b>-</b>	<u> </u>
и а	Organizations that may receive deductible contributions under section 170(c).  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?	ioi goods		7a		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		<del></del>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which i	t was				
	required to file Form 8282?			7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal bene	fit contrac	ţ۶	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit or	ontract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file	Form 889	99 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		le a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporti	9				
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsor	ring		-		
_	organization, have excess business holdings at any time during the year?			8	<b> </b>	<u> </u>
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?			9a	<del>  </del>	<u> </u>
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter			9b	$\vdash$	
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	l			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a		-		
11	Section 501(c)(12) organizations. Enter	100		$\dashv$		
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources	1.15		$\neg$		
	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 F	orm 1041	?	12a		Ì
þ	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.					<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		L
	Note. See the instructions for additional information the organization must report on Schedule O.					
þ	Enter the amount of reserves the organization is required to maintain by the states in which	1	1			
	the organization is licensed to issue qualified health plans	13b				
C	Enter the amount of reserves on hand	13c			igwdapprox	<del></del> _
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a	$\vdash \vdash \vdash$	X
b DAA	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Sche	dule O		14b		<u> </u>
DAA				For	か ゴゴし	(2012)

Form 990 (2012) SKY RANCH FOUNDATION, INC 13-1970360 Page 6 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. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 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 7 Enter the number of voting members included in line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 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 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8a Each committee with authority to act on behalf of the governing body? 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 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 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? 10b 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 X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 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 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 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? 16a X 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 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 Other (explain in Schedule O) 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 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: > RALPH AGUERA 2612 ALIA CIRCLE

LOUISVILLE

**KY 40222** 

orm 990 (2012)	SKY	RANCH	FOUNDATION.	TNC

13-1970360

Page **7** 

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

Kenter the companisation of the companisation of the companisations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any	bo	x, unle	Pos check ess pe	rson	than on is both a	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1)MIKE DONOHOE								-		
	5.00	٦.		<b>.</b> ,						
VICE PRESIDENT (2) RALPH D AGUERA	0.00	X		X	_	$\vdash$		0	0	0
(2) KALIPH D AGUERA	10.00									
PRESIDENT	0.00	x		x				o	0	0
(3) BARRY BECTON	0.00	-			<del> </del>					<del>_</del>
(6,-1-1)	5.00									
VICE PRESIDENT	0.00	x		x		1 1		0	0	0
(4) RAYMOND HERRMANN				-						
	1.00									
DIRECTOR	0.00	X						0	0	0
(5) STEVE BELLINI										
	1.00									
DIRECTOR	0.00	X	_		<u> </u>	11-		0	0	0
(6) BRAD BOSWELL	1 00					1				
DIRECTOR	1.00					H			_	
DIRECTOR (7) DR. PETER CRESSY	0.00	X			ļ	╆╾┼		0	0	0
(/)DR. PETER CRESS!	1.00									
DIRECTOR	0.00	x						0	o	0
(8) BILL EARLE		<del> </del>		一		$\vdash$			-	
(-,	1.00									
DIRECTOR	0.00	x				1 1		0	0	0
(9) GEORGE MCCARTHY						П				,
,	5.00									
VICE PRESIDENT	0.00	X		X				0	0	0
(10) CRAIG WOLF										
	1.00							_		_
DIRECTOR	0.00	X	ļ	_		$\vdash$		0	0	0
(11) DORI BRYANT	1.00									
DIRECTOR	0.00	x			1			o	o	^
DAA	0.00	<u> </u>	Щ.		1	Щ			<u> </u>	Form 990 (2012)

Part VII Section A. Officers	s, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)				
`(A)	(B)				C)			(D)	(E)		(F)		
Name and title	Average hours per	1 (	o not		ition more	than c	nne	Reportable compensation	Reportable compensation from		Estimat amount		
	week					s both		from	related		othe		
	(list any	of	icer a	nd a c	lirecto	r/trust	ee)	the	organizations	(	compens		
	hours for related	우콩	lng	ğ	Key	릙	Fo	organization (W-2/1099-MISC)	(W-2/1099-MISC)	]	from th organiza		
	organizations	dred	Ē	Officer	en	hest	Former	( = 1000			and rela		
	below dotted line)	[호호	onal		employee	e ca				'	organizat	ions	
	inte)	Individual trustee or director	Institutional trust		ê	Highest compensated employee		Ì		Ì			
		L	8	L		ated				<u> </u>			
(12) PEGGY DONOVAN	F 00	İ											
4747777	5.00			-				_	_				^
SECRETARY	0.00	X	-	X	├	├		0	0	├			0
(13) CHARLES FORMAN	1 00						ł						
	1.00								_				^
DIRECTOR	0.00	X	$\vdash$	├-	<u> </u>	1		0	0	<b>├</b> ──			0
(14) WILLIAM SLONE	1 00												
PARTICIPATION OF THE PARTICIPA	1.00		l				Ì		_	Į.			^
DIRECTOR	0.00	X	├	<b>├</b> ─	-		$\vdash$	0	0	<del> </del>			0
(15) JOHN BODNOVICH	1 00				l								
DIDECMOR	1.00	$ \mathbf{x} $	l		Ì			0	١ .				0
DIRECTOR (16) SARA ROSEN	0.00	╇	$\vdash$	├	├	$\vdash$	⊢	0	0	├──			
(16) SARA ROSEN	1 00												
TOTAL STAY OFFICER	1.00	\ <b>.</b>			1	1		_	1	j			^
FOUNDATION OFFICER	0.00	X	├	X		+	-	0	0	<del> </del> -			0
(17) GERRY RUVO	1.00						1						
DIRECTOR	0.00	x						0	0	1			0
<del></del>	0.00	<u> </u>	<del>                                     </del>		├		-		0	<del> </del>			
(18)				l		1				Ì			
(19)													
•		]											
	<u>.]</u>	<u> </u>	<u>L</u>										
1b Sub-total										<b>↓</b>			
c Total from continuation she	ets to Part VII,	Sect	ion <i>i</i>	4						<u> </u>			
d Total (add lines 1b and 1c)	<del></del>						<u> </u>	<u></u>		<u>L</u>			
2 Total number of individuals (in reportable compensation from				thos	e lis	ted a	abov	e) who received more than	\$100,000 in				
reportable compensation from	i the organization		<u> </u>					<del></del>	<del></del>		Т	Yes	No
3 Did the organization list any for								loyee, or highest compensa	ated				
employee on line 1a? If "Yes,"									,		3		X
4 For any individual listed on lin organization and related organ													
individual	mzalions greater	ulai	тфі	30,00	۱ ۰ ت	1 10	is, t	complete schedule a loi su	CII		4		х
5 Did any person listed on line	1a receive or acc	crue	com	pens	atio	n fror	n ar	ny unrelated organization or	r individual	ļ			
for services rendered to the o											5		X
Section B. Independent Contracto									<del></del>				
<ol> <li>Complete this table for your fi compensation from the organ</li> </ol>	ve highest comp	ensa	ated ensa	ınde ition	pend for t	dent d he ca	cont	ractors that received more dar year ending with or with	than \$100,000 of on the organization's tax vi	ear			
	(A) d business address	· · · · · · ·	000				T		(B) otion of services	<u> </u>	Cor	(C) npensat	tion.
Name and	1 ousiliess addiess								MIGH OF SERVICES	_		препза	1011
							╁						
							-						
2 Total number of independent								se listed above) who		_			
received more than \$100,000	of compensatio	n fro	m th	e org	janiz	ation	<b>)</b>		0		L		

Pa	irt V		<b>ent of Reve</b> If Schedule (		ntains a	response	to any question in	this Part VIII.		П
1						• • • • • • • • • • • • • • • • • • • •	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated cam	paigns	1a			3		·	
Program Service Revenue Contributions, Gifts, Grants	b	Membership du	ies	1b			]			
ts, (	C	Fundraising ev	ents	1c						
育	d	Related organiz	zations	1d		10,890	]			
ns,	e	Government grants (d	contributions)	1e			]			
er S	f	All other contributions								
듗		and similar amounts		1f		4,187	<u> </u>			
ont d	g	Noncash contribution		1f	\$					
<u>3 5</u>	h	Total. Add line	s 1a-1f				15,077			
nu:						Busn Code				**************************************
leve	2a								·	
ce F	b									
ervi	°									
n S	a								·	
grar	e ,	All other measure						<u> </u>		· · · · · · · · · · · · · · · · · · ·
Pro	'	All other progra Total. Add line		nue		<b>•</b>				<u> </u>
_	3	Investment inco		dıvıdar	nde intere		<u> </u>			
		and other similar		uiviuci	ius, iiiteit		84,904			84,904
	4	Income from in	,	-evem	nt hond r	roceeds >	04,504	-	<del></del>	84,904
	5	Royalties	rectinent of tax	CACIII	pr bona p	), occous				
	`	[	(ı) Real		(n)	Personal				<del></del>
	6a	Gross rents					1	1		
	ь	Less rental exps					1	* (	À	
	С	Rental inc or (loss)					<b>^.</b> *,	*	*	, ,
	d Net rental income or (loss)		<b>•</b>		warning . I wan					
	7a	Gross amount from	(i) Securities		(11	) Other	, ,			,
		sales of assets other than inventory	3,496,	778			1			3
	b	Less cost or other					1			,
		basis & sales exps	3,256,	172	l.					*
	c	Gain or (loss)		606						
	ď	Net gain or (los	s)			<b>•</b>	240,606	240,606	***************************************	2 2 2000 A 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
9	8a	Gross income from	m fundraising eve	nts						
Other Revenue		(not including \$								
eve		of contributions re	ported on line 1c)							
F		See Part IV, line 1	8	а				·		
Ť	b	Less direct exp		b		•	~~ ~~~~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~			
١	С	Net income or			events	<u> </u>				
	9a	Gross income from		s						
		See Part IV, line		а			]			
	b	Less direct exp		b			ļ			,
	С	Net income or	_	ing ac	tivities	<u> </u>				
	10a	Gross sales of	•							
		returns and allo		а						
		Less cost of go		b						
	C	Net income or		s of in	ventory	<u> </u>				
			ellaneous Revenue			Busn. Code				
	11a		NDS & OTHER				3,670		-	3,670
	b	OIL & GAS	LEASE				653		· · · · · · · · · · · · · · · · · · ·	653
	C									
	d	All other revenu				L				
	е	Total. Add line:				<b>•</b>	4,323		<del></del>	
	12	Total revenue.	See instruction	าร			344,910	240,606	0	89,227

Part IX Statement of Functional Expenses

	Check if Schedule O contains a resp	<del></del>		(6)	(7)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		САРСИЗСЗ	general expenses	ехрепаса
ı	organizations in the U.S. See Part IV, line 21	300,750	300,750		
2	Grants and other assistance to individuals in	3007730	300,730		
2	the U.S. See Part IV, line 22	2,000	2,000		
3	Grants and other assistance to governments,	2,000	2,000		
3	organizations, and individuals outside the	1			
	U.S. See Part IV, lines 15 and 16				
4	ſ				
4	Benefits paid to or for members  Compensation of current officers, directors,				
5	•				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				<del></del>
7	Other salaries and wages				- <del></del>
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	<del></del>			<del></del>
10	Payroll taxes	<del></del>			
11	Fees for services (non-employees)				
a	Management				
	- T	11 (22		11 600	<u> </u>
	Accounting	11,623		11,623	<del> </del>
d	Lobbying				<u> </u>
е	Professional fundraising services See Part IV, line 17	60 734	····	60 704	
f	Investment management fees	60,734		60,734	
g	· • •				
	(A) amount, list line 11g expenses on Schedule O)				<del></del>
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				<u> </u>
17	Travel	5,085		5,085	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization		·		
23	Insurance	395		395	
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	RECORDS RETENTION	6,600		6,600	
b	FUNDRAISING	5,684			5,684
С	FOREIGN TAX	1,701		1,701	
d	<b>i</b>	_			<u> </u>
e	All other expenses			<del></del>	<del>-</del>
25	Total functional expenses. Add lines 1 through 24e	394,572	302,750	86,138	5,684
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here   if following SOP 98-2 (ASC 958-720)			23,220	2,001

Part	X Balance Sheet				
	* Check if Schedule O contains a response to any	question in this Part X			
			(A)		(B)
			Beginning of year		End of year
1	Cash—non-interest bearing	ļ		1	
2	Savings and temporary cash investments		221,326	2	147,500
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net			4	
5	Loans and other receivables from current and former	' '			
	trustees, key employees, and highest compensated e	mployees	~ ·		**** ** * * * * * * * * * * * * * * *
	Complete Part II of Schedule L			5	
6	Loans and other receivables from other disqualified pe				
	4958(f)(1)), persons described in section 4958(c)(3)(B				
	sponsoring organizations of section 501(c)(9) voluntar	• • •		_	
ets	organizations (see instructions) Complete Part II of S	chedule L		6	
Assets 6 2	Notes and loans receivable, net			7	
8	Inventories for sale or use			8	
9	Prepaid expenses and deferred charges		26,400	9	19,800
10	a Land, buildings, and equipment cost or				
	other basis Complete Part VI of Schedule D	10a	~		
	Less accumulated depreciation	10b		10c	
11	Investments—publicly traded securities		3,579,578		3,823,312
12	Investments—other securities See Part IV, line 11			12	
13	Investments—program-related See Part IV, line 11			13	
14	Intangible assets			14	
15	Other assets See Part IV, line 11			15	2 222 512
16	Total assets. Add lines 1 through 15 (must equal line	34)	3,827,304	16	3,990,612
17	Accounts payable and accrued expenses		6,250	17	108,750
18	Grants payable	•		18	
19	Deferred revenue			19	h
20	Tax-exempt bond liabilities			20	
21	Escrow or custodial account liability Complete Part IV			21	
<u>s</u> 22	. ,				
Liabilities	trustees, key employees, highest compensated emplo	yees, and			
lat	disqualified persons Complete Part II of Schedule L	•		22	
23	5 5	•		23	
24	Unsecured notes and loans payable to unrelated third	-		24	
25	Other liabilities (including federal income tax, payable				
	parties, and other liabilities not included on lines 17-24	4). Complete Part X			
	of Schedule D			25	400
26		. [==]	6,250	26	108,750
اي	Organizations that follow SFAS 117 (ASC 958), che	_			
ĕ	complete lines 27 through 29, and lines 33 and 34.			-	
<u>e</u> 27	Unrestricted net assets	•	3,719,741	27	3,769,451
28		•	51,313	28	62,411
돌 29	•	. —	50,000	29	50,000
Ē	Organizations that do not follow SFAS 117 (ASC 9	58), check here ▶ 🔲 and			
o g	complete lines 30 through 34.				
30 set		ļ		30	
Net Assets or Fund Balances 22 29 30 31 32 32	Paid-in or capital surplus, or land, building, or equipme		31		
		, or other funds		32	
33		ļ	3,821,054		3,881,862
34	Total liabilities and net assets/fund balances		3,827, <u>304</u>	34	3,990,612

orm	990 (2012) SKY RANCH FOUNDATION, INC 13-1970360				Pag	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		34	14,	910
2	Total expenses (must equal Part IX, column (A), line 25)	2		39	94,	572
3	Revenue less expenses Subtract line 2 from line 1	3		-4	19,0	662
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	(1)	3,82	21,	054
5	Net unrealized gains (losses) on investments	5		1:	LO,4	470
6	Donated services and use of facilities	_ 6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9		_		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	3	3,88	31,	<u>862</u>
Pa	rt XII Financial Statements and Reporting					_
	Check if Schedule O contains a response to any question in this Part XII					
					Yes	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 O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				-	
	reviewed on a separate basis, consolidated basis, or both				İ	
	Separate basis Consolidated basis Both consolidated and separate basis			*- *		
b	Were the organization's financial statements audited by an independent accountant?			2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				1	
	separate basis, consolidated basis, or both					
	Separate basis Doth consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight					
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in					
	Schedule O					
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		İ			
	the Single Audit Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		
				For	ո 990	(2012)

#### SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Open to Public

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

					OUNDATION,								0360		
Pa	art I	Reas	on for f	Public Charity	Status (All orga	anizations	must co	mplete	this pa	art.) Se	e inst	ruction	ns.		
The	orga	nization is not	a private	foundation because	se it is: (For lines 1	through 11,	check only	y one box	c.)						
1		A church, cor	nvention (	of churches, or ass	sociation of churche	s described	ın <b>sectio</b> r	170(b)(	1)(A)(i).						
2		A school des	cribed in	section 170(b)(1)(	(A)(ii). (Attach Sche	edule E)									
3		A hospital or	a coopera	atıve hospital servi	ce organization des	scribed in <b>se</b>	ction 170	(b)(1)(A)(	(iii).						
4		A medical res	search or	ganızatıon operate	d in conjunction wit	h a hospital	described	ın sectio	n 170(b	)(1)(A)(i	ii). Ente	er the h	ospital's nam	е,	
		city, and state	e										-		
5		An organizati	ion operat	ted for the benefit	of a college or unive	ersity owned	or operat	ed by a g	overnme	ental uni	t descri	bed in			
		section 170(	(b)(1)(A)(i	v). (Complete Part	tII)										
6		A federal, sta	ate, or loca	al government or g	governmental unit de	escribed in s	section 17	'0(b)(1)(A	\)(v).						
7					substantial part of i					from the	genera	al public	;		
		described in	section 1	70(b)(1)(A)(vi). (C	complete Part II)						-	-			
8		A community	trust des	cribed in section	170(b)(1)(A)(vi). (C	omplete Par	t II )								
9	X	An organizati	on that no	ormally receives (	1) more than 33 1/3	% of its sup	port from	contributi	ons, me	mbershi	p fees,	and gro	oss		
		receipts from	activities	related to its exem	npt functions—subj	ect to certair	n exceptio	ns, and (2	2) no mo	re than	33 1/39	% of its			
		support from	gross inv	estment income ai	nd unrelated busine	ess taxable ii	ncome (le:	ss section	1 511 ta:	x) from b	usines	ses			
		acquired by t	he organı	zation after June 3	30, 1975. See <b>secti</b> e	on 509(a)(2)	. (Comple	te Part III	i)						
10		An organizati	ion organi	zed and operated	exclusively to test for	or public saf	ety See s	ection 5	09(a)(4).						
11		An organizati	ıon organı	zed and operated	exclusively for the b	penefit of, to	perform the	ne functio	ns of, o	r to carry	out the	е			
		purposes of o	one or mo	re publicly support	ted organizations de	escribed in s	ection 509	9(a)(1) or	section	509(a)(2	2) See	section	1		
		<b>509(a)(3).</b> Ch	eck the b	ox that describes t	the type of supporting	ng organizat	ion and co	mplete li	nes 11e	through	11h				
		a Type		<b>b</b> Type II		III-Function			d				tionally integra	ated	
е		By checking t	this box, I	certify that the org	ganization is not cor	ntrolled direc	tly or indir	ectly by o	one or m	ore disc	ualified	l person	ns		
		other than for	undation r	managers and othe	er than one or more	publicly sup	ported or	ganızatıor	ns descr	ibed in s	ection	509(a)(	1)		
		or section 50	9(a)(2).												
f		If the organiz	ation rece	eived a written dete	ermination from the	IRS that it is	a Type I,	Type II,	or Type	III suppo	orting				
		organization,	check thi	s box											
g		Since August	t 17, 2006	6, has the organiza	tion accepted any g	gift or contrib	ution from	any of th	пе						
		following per	rsons?												
		(i) A persor	n who dire	ectly or indirectly co	ontrols, either alone	or together	with perso	ons descr	ibed in (	ii) and				Yes	No
		(m) belov	w, the gov	erning body of the	supported organiza	ation?							11g(ı)	<u> </u>	
		(iı) A famıly	member	of a person descril	bed ın (ı) above?								11g(i <sub>1</sub> )		
		(iii) A 35% c	ontrolled	entity of a person (	described in (i) or (ii	ı) above?							11g(m	,	<u> </u>
h		Provide the f	following i	nformation about t	he supported organ	uzation(s)									
(1		e of supported	İ	(iı) EIN	(iii) Type of orga		4 ' '	organization		ou notify		ls the	(vii) Amount	of monet	агу
	org	janization			(described on la above or IRC s		4 ''	sted in your document?		nization in of your	organizat	zed in the	supp	ort	
					(see instruct		governing	document.		port <sup>o</sup>	υ				
							Yes	No	Yes	No	Yes	No			
A)															
							-	_	ļ	ļ	ļ				
B)												ŀ			
		<del></del>		••		<u>.                                      </u>			<del>-</del>						
C)															
D)			-				1				<del>                                     </del>		<del></del>		
E)															
			<b></b>		ļ	-	<del> </del>	ļ	<u> </u>	<u> </u>					
Гota			1												
· Utd	<u>-</u>			<del></del>	L.,	<del></del>	Ц.	Ц	Щ	<u> </u>	L	LL	L.,		

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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (e) 2012 (c) 2010(d) 2011 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage from 2011 Schedule A. Part II, line 14 15 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

instructions

Schedule A (Form 990 or 990-EZ) 2012 SKY RANCH FOUNDATION, INC

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

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

2 Gross receipts from admissions, merchandres sold or services performed, or facilities furnished in any activity that is related to the organization's size exempt purpose  3 Gross receipts from activities that are not an unrelated trade or business under section 513  4 Tax revenues leaved for the organization's benefit and either paid to or expended on its behalf  5 The value of services or facilities furnished by a governmental unit to the organization's thenefit and either paid to or expended on its behalf  6 Total. Add lines 1 through 5  7a Amounts included on lines 1, 2, and 3 received from disqualified persons  b Amounts included on lines 2 and 3 received from disqualified persons  b Amounts included on lines 2 and 3 received from disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year of Add lines 7a and 7b  8 Public support (Subtract line 7c from line 6  9 Amounts from line 6  380,047 342,544 280,632 523,560 15,730 1,542,513  Section B. Total Support  (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total of the year of fiscal year beginning in)    9 Amounts from line 6  380,047 342,544 280,632 523,560 15,730 1,542,513  (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total organization of the business staxable moome (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b    -306,684 139,060 159,988 116,035 84,904 193,303  11 Net income from unrelated business seaching common from the business is regularly carried on 10 the business is regularly carried on 10 the business is regularly carried on 10 the business is regularly carried on 10 the business is regularly carried on 10 the business is regularly carried on 10 the business is regularly carried on 10 the business is regularly carried on 10 the business is regularly carried on 10 the business is regularly carried on 10 the business is regularly carried on 10 the business is regularly carried on 10 the 10 the organization of 10 the business is regularly carried on 10 th	Sec	tion A. Public Support	<u> </u>	0 10010 110100 2	0.0.v, p.00.00 00	mpioto i art ii.	/	
destreamed (Dr. not include any "unusual grain"   233,331   262,640   522,908   15,077   1,301,927	Caler	ıdar year (or fiscal year beginning in) ▶	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
2 Gross neepts from admissions, merchandes obtor services performed, or facilities turnshed on any activity that is related to the organization's new empty purpose and incident disable or terminal to an incident disable or burners under section 510 an incident disable or burners under section 510 an incident disable or burners under section 510 an incident disable or burners under section 510 an incident disable or burners under section 510 an incident disable or burners under section 510 an incident disable or burners under section 510 an incident disable or burners under section 510 an incident disable or burners under section 510 an incident disable or burners under section 510 an incident disable or burners under section 510 an incident disable or burners under section 510 and 510 a	1	fees received (Do not include any *unusual	277,871	223,331	262,640	522,908	15,077	1,301,827
### A Tax revenues leved for the earn sevent of the earn sevent of the earn sevent of the earn sevent of the earn sevent of the earn sevent of the earn sevent of the earn sevent of the earn sevent of the earn sevent of the earn sevent of the earn sevent of the earn sevent of the earn sevent of the earn sevent of the earn sevent of the earn sevent of the earn sevent of the earn sevent of the earn sevent from the sevent of the earn sevent from the sevent frow	2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the	102,176	119,213	17,992			239,381
organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge organization without charge organization without charge organization in the content of the property of the content of	3					652	653	1,305
furnished by a governmental unit to the organization without charge organization without charge 6 6 Total. Add lines 1 through 5 7 Announts included on lines 1, 2, and 3 received from disqualified persons be Announts included on lines 2 and 3 received from disqualified persons be Announts included on lines 2 and 3 received from disqualified persons that exceed the greater of \$5,000 or 1% of the annount on line 13 for the year c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) 9 Announts from line 6 380,047 342,544 280,632 523,560 15,730 1,542,513 8ection B. Total Support Callendar year (or fiscal year beginning in) ▶ (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total and 10a organization from interest, dividends, payments received on securities loans, rents, royaltes and income from similar sources 10 Unrelated business is acytical income (fees section 51 1 taxes) from businesses section 51 1 taxes) from businesses section 51 1 taxes) from businesses section 51 taxes of the properties of the propert	4	organization's benefit and either paid						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons  b Amounts included on lines 1, 2, and 3 received from other than disqualified persons but all exceed the greater of \$5,00 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)  1,542,513  Section B. Total Support  Calledar year (or fiscal year beginning in) ▶ (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total lines (b) 15,730 (c) 15,730 (	5	furnished by a governmental unit to the						
b Amounts included on lines 2 and 3 received from disqualified persons bit acceed the greater of \$5,000 or 1% of the amount on line 13 for the year conditions on the analysis of the persons bit acceed the greater of \$5,000 or 1% of the amount on line 13 for the year conditions on the analysis of the year conditions of	6	Total. Add lines 1 through 5	380,047	342,544	280,632	523,560	15,730	1,542,513
received from other than disqualified persons that acknowled the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b  8 Public support (Subtract line 7c from line 6)  8 Public support (Subtract line 7c from line 6)  1,542,513  Section B. Total Support  Callendar year (or fiscal year beginning in) ▶ (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total 10a Gross income from interest, dividends, payments received on securities loans, rents, royaltes and income from similar sources  10a Gross income from interest, dividends, payments received on securities loans, rents, royaltes and income from similar sources  10b Unrelated business standable income (less section 511 taxes) from businesses section 511 taxes) from businesses acquired after June 30, 1975  11 Net income from unrelated business standard carried and 10b  11 Net income from unrelated business standard carried and 10b  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)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage from 2012 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))  17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))  18 10 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))  19 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization of line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organizati	7a							
8 Public support (Subtract line 7c from line 6)  Section B. Total Support  Calendar year (or fiscal year beginning in) ▶ (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total  9 Amounts from line 6 380,047 342,544 280,632 523,560 15,730 1,542,513  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from securities loans, rents, royalties and income from similar sources  b Unrelated business taxable income (less section 511 taxes) from businessess acquired after June 30, 1975  c Add lines 10a and 10b		received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
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Calendar year (or fiscal year beginning in) ▶ (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (ff) Total  9 Amounts from line 6 380,047 342,544 280,632 523,560 15,730 1,542,513  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 −306,684 139,060 159,988 116,035 84,904 193,303  11 Net income from unrelated business activities on included in line 10b, whither or not the business is regularly carried on 10ss from the sale of capital assets (Explain in Part IV)  13 Total support. (Add lines 9, 10c, 11, and 12) 73,363 481,604 440,620 639,595 103,304 1,738,486  First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage from 2011 Schedule A, Part III, line 15 15 88.73%  16 Restion D. Computation of Investment Income Percentage  17 Investment income percentage from 2011 Schedule A, Part III, line 17 11%  18 Investment income percentage from 2011 Schedule A, Part III, line 17 11%  19 31/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ 18 line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ 18 line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ 18 line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ 18 line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publ	Sec			1		<del></del>		1,542,513
9 Amounts from line 6 380,047 342,544 280,632 523,560 15,730 1,542,513  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from smilar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b -306,684 139,060 159,988 116,035 84,904 193,303  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on or not the business is regularly carried on or not the business is regularly carried on or not fine fine or partication or fine or organization or organization or fine fine organization organizati		······································	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
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  -306,684  139,060  159,988  116,035  84,904  193,303  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on loss from the sale of capital assets (Explain in Part IV)  13 Total support. (Add lines 9, 10c, 11, and 12)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section D. Computation of Public Support Percentage  17 Investment income percentage from 2011 Schedule A, Part III, line 15  18 88.73 % Section D. Computation of Investment Income Percentage  18 Investment income percentage from 2011 Schedule A, Part III, line 17  19 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization    X   X   X   X   X   X   X   X   X			`	<u>`</u>			· · · · · · · · · · · · · · · · · · ·	
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b  -306,684  139,060  159,988  116,035  84,904  193,303  1Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on loss from the sale of capital assets (Explain in Part IV)  13 Total support. (Add lines 9, 10c, 11, and 12)  73,363  481,604  440,620  639,595  103,304  1,738,486  First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage from 2011 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage from 2011 Schedule A, Part III, line 17  19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  1 Investment income percentage from 2011 Schedule A. Part III, line 17  1 Investment income percentage from 2011 Schedule A. Part III, line 17  1 Investment income percentage from 2011 Schedule A. Part III, line 17  10 Investment income percentage from 2011 Schedule A. Part III, line 17  10 Investment income percentage from 2011 Schedule A. Part III, line 17  10 Investment income percentage from 2011 Schedule A. Part III, line 17  10 Inves	10a	Gross income from interest, dividends, payments received on securities loans, rents,						
Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 2,670 2,670  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)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage from 2011 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage from 2011 Schedule A, Part III, line 17  18 Investment income percentage from 2011 Schedule A, Part III, line 17  19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  1 Investment income than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  1 Investment income than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  1 Investment income than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  1 Investment income than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  1 Investment income than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	b	Unrelated business taxable income (less section 511 taxes) from businesses		202,000		120,000	31,332	233,303
activities not included in line 10b, whether or not the business is regularly carried on 2,670 2,670  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)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage from 2011 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage from 2011 Schedule A, Part III, line 17  19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  1 Investment income percentage from 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  1 Investment income percentage from 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  1 Investment income percentage from 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	С	Add lines 10a and 10b	-306,684	139,060	159,988	116,035	84,904	193,303
loss from the sale of capital assets (Explain in Part IV)  13 Total support. (Add lines 9, 10c, 11, and 12)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage from 2011 Schedule A, Part III, line 15  16 Public support percentage from 2011 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage from 2011 Schedule A, Part III, line 17  18 Investment income percentage from 2011 Schedule A, Part III, line 17  19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  1 In 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  1 In 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	11	activities not included in line 10b, whether					2,670	2,670
and 12 )  73,363 481,604 440,620 639,595 103,304 1,738,486  First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage from 2011 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage from 2011 Schedule A, Part III, line 17  19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  10	12	loss from the sale of capital assets						_
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organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage from 2011 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage from 2011 Schedule A, Part III, line 17  19 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  1		<i>'</i>						1,738,486
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Public support percentage from 2011 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))  Investment income percentage from 2011 Schedule A, Part III, line 17  Investment income percentage from 2011 Schedule A, Part III, line 17  Investment income percentage from 2011 Schedule A, Part III, line 17  Investment income percentage from 2011 Schedule A, Part III, line 17  Investment income percentage from 2011 Schedule A, Part III, line 17  Investment income percentage from 2011 Schedule A, Part III, line 17  Investment income percentage from 2011 Schedule A, Part III, line 17  Investment income percentage from 2011 Schedule A, Part III, line 17  Investment income percentage from 2011 Schedule A, Part III, line 17  Investment income percentage from 2011 Schedule A, Part III, line 17  Investment income percentage from 2011 Schedule A, Part III, line 17  Investment income percentage from 2011 Schedule A, Part III, line 17  Investment income percentage from 2012 (line 10c, column (f))  Investment income percentage from 2012 (line 10c, column (f))  Investment income percentage from 2012 (line 10c, column (f) divided by line 13, column (f))  Investment income percentage from 2012 (line 10c, column (f) divided by line 13, column (f))  Investment income percentage from 2012 (line 10c, column (f) divided by line 13, column (f))  Investment income percentage from 2012 (line 10c, column (f) divided by line 13, column (f))  Investment income percentage from 2012 (line 10c, column (f) divided by line 13, column (f))  Investment income percentage from 2012 (line 10c, column (f) divided by line 13, column (f))  Investment income percentage from 2012 (line 10c, column (f) divided by line 13, column (f))  Investment income percentage from 2012 (line 10c, column (f) divided by line 13, column (f))  Investment income percentage from 2012 (line 10c, column (f) divided by line 13, column (f))  Investment income	Sec	tion C. Computation of Public Su	pport Percent	age				
Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage from 2011 Schedule A, Part III, line 17  19 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  10 Investment income percentage from 2011 Schedule A, Part III, line 17  11 Investment income percentage from 2011 Schedule A, Part III, line 17  12 Investment income percentage from 2011 Schedule A, Part III, line 17  13 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  14 Investment income percentage for 2012 (line 10c, column (f))  15 Investment income percentage for 2012 (line 10c, column (f))  16 Investment income percentage for 2012 (line 10c, column (f))  17 Investment income percentage for 2012 (line 10c, column (f))  18 Investment income percentage for 2011 Schedule A, Part III, line 17  18 Investment income percentage for 2012 (line 10c, column (f))  18 Investment income percentage for 2012 (line 10c, column (f))  18 Investment income percentage for 2012 (line 10c, column (f))  18 Investment income percentage for 2012 (line 10c, column (f))  18 Investment income percentage for 2012 (line 10c, column (f))  18 Investment income percentage for 2012 (line 10c, column (f))  18 Investment income percentage for 2012 (line 10c, column (f))  18 Investment income percentage for 2012 (line 10c, column (f))  18 Investment income percentage for 2012 (line 10c, column (f))  18 Investment income percentage for 2012 (line 10c, column (f))  19 Investment income percentage for 2012 (line 10c, column (f))  10 Investment income percentage for 2012 (line 10c, co	15	Public support percentage for 2012 (line 8	, column (f) divided	by line 13, colum	n (f))		15	88.73%
Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))  Investment income percentage from 2011 Schedule A, Part III, line 17  13 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  In 11%  11%  12%  13 1/3%							16	86.16%
Investment income percentage from 2011 Schedule A, Part III, line 17  19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  In 14 %	Sec	tion D. Computation of Investme	nt Income Per	centage				
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	17	Investment income percentage for 2012 (I	ine 10c, column (f)	divided by line 13	, column (f))		17	11%
17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization  b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization	18	Investment income percentage from 2011	Schedule A, Part I	II, line 17			18	14%
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	19a							
line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	b			-				► X
	-							▶ □
	20							<b>.</b>

Schedule A (Form 990 or 990-EZ) 2012 SKY RANCH FOUNDATION, INC

13-1970360

Page 4

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

#### Supplemental Information

SCHEDULE A, LINE 10a:

IN PRIOR YEARS, THE FOUNDATION WAS CLASSIFIED AS A SUPPORTING ORGANIZATION.

THE SUPPORTED ORGANIZATION WAS A SCHOOL THAT WAS OPERATED FOR THE BENEFIT

OF AT-RISK YOUTH. THE FOUNDATION OWNED THE PROPERTY USED BY THE SCHOOL.

THE SCHOOL CLOSED IN EARLY 2011 AND THE FOUNDATION SOLD THE PROPERTY IN

JULY 2011. THE RESULTING GAIN ON THE SALE OF THE PROPERTY WAS \$755,436.

THIS GAIN HAS NOT BEEN INCLUDED IN THE PUBLIC SUPPORT TESTS AS IT RELATED

TO THE FORMER SUPPORTING ORGANIZATION STATUS AND WAS UNUSUAL IN NATURE.

#### 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. ➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number SKY RANCH FOUNDATION, INC 13-1970360 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a 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 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. a Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

(investment) (other) depreciation 1a Land **b** Buildings c Leasehold improvements d Equipment e Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c))

2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

	dule D (Form 990) 2012 SKY RANCH FOUNDATION, INC	13-19703		Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per R	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	2a	_	
b	Donated services and use of facilities	2b		
C	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII )	2d		
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:		5.	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	╛	
b	Other (Describe in Part XIII )	4b	]	
C	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	nents With Expenses per	Returi	n
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		<u> </u>	
b	Prior year adjustments	2b	_՝	
C	Other losses	2c	]	
d	Other (Describe in Part XIII )	2d		
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	4a	_	
b	Other (Describe in Part XIII.)	4b		
C	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information.

Schedule D (Form 990) 2012 SKY RANCH FOUNDATION, INC

13-1970360

Page 5

Part XIII Supplemental Information (continued)

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SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Open to Public Inspection OMB No 1545-0047 2012

Employer identification number

13-1970360

**ջ** □

X Yes

Name of the organization

Part !

the selection criteria used to award the grants or assistance?

▶ Attach to Form 990.

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and General Information on Grants and Assistance SKY RANCH FOUNDATION, INC

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. Part II can be duplicated if additional space is needed. 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II

Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated it additional space is needed	received more t	nan \$5,0	00. Part II can be c	Iuplicated if additi	onal space is n	needed.	
1 (a) Name and address of organization	( <b>p</b> ) EIN	(c) IRC	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	(g) Description of	(h) Purpose of grant
or government		if applicable	grant	cash assistance	other)	non-cash assistance	or assistance
(1) POP KIDS							
2995 WOODSIDE RD, STE 400-429							SUPPORT ATRISK YOUTH
REDWOOD CITY CA 94062-2446	77-0364279	501C3	12,000				
(2) PACIFIC BOYS LODGE							
4900 SERRANIA AVE, BOX 308		•					SUPPORT ATRISK YOUTH
WOODLAND HILLS CA 91364-3301	95-1691300	501C3	20,000				
(3) SIOUXLAND HUMAN INVESTMENT PTNRSHIP							
1520 MORNINGSIDE AVE							SUPPORT ATRISK YOUTH
SIOUX CITY IA 51106-1716	42-1495836	501C3	78,750				
(4) MCCROSSAN BOYS RANCH							
47135 260TH STREET							SUPPORT ATRISK YOUTH
SIOUX FALLS SD 57107-6428	57107-6428 46-0311913	501C3	20,000				
(5) SOS CHILDRENS VILLAGE							
216 W JACKSON BLVD, STE 925							SUPPORT ATRISK YOUTH
CHICAGO IL 60606	36-3599110	501C3	40,000				
(6) BOYS & GIRLS HAVEN							
2301 GOLDSMITH LANE					•		SUPPORT ATRISK YOUTH
LOUISVILLE KY 40218-1018	61-0479621	501C3	30,000				
(7) BOYS AND GIRLS TOWN OF ITALY							
250 EAST 63RD STREET SUITE 2014							SUPPORT ATRISK YOUTH
NEW YORK NY 10065	13-1835632	501C3	40,000				
(8) DISTILLED SPIRTS COUNCIL OF THE US							
1250 I ST NW#400		-					SUPPORT ATRISK YOUTH
WASHINGTON DC DC 20005	52-0971454	501C3	25,000				
(9) RED HOOK INITIATIVE							
767 HICKS STREE							SUPPORT ATRISK YOUTH
BROOKLYN NY 11231	23-3904662	501C3	10,000				
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	organizations listed	in the line	1 table				▶ 10

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2012)

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SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service

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 20:12

Inspection

ž SUPPORT ATRISK YOUTH 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. Part II can be duplicated if additional space is needed. (h) Purpose of grant or assistance **Employer Identification number** ☐ Yes 13-1970360 non-cash assistance (g) Description of Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance 25,000 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable 59-3093995 | 501C3 General Information on Grants and Assistance (p) EIN SKY RANCH FOUNDATION, INC the selection criteria used to award the grants or assistance? (1) VOICES FOR CHILDREN ON N CENT FL FL 34478 (a) Name and address of organization or government PO BOX 4062 Name of the organization Part Part II OCALA 3 ල **£** 9 9 8 8 | ତ

Schedule I (Form 990) (2012)

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

Enter total number of other organizations listed in the line 1 table

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Page 2

Schedule I (F	Schedule I (Form 990) (2012) SKY RANCH FOUNDATION,	NUDATION, INC		13-1970360		Page
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.	Individuals in the U	nited States. Comp	lete if the organizatio	n answered "Yes" to Form	990, Part IV, line 22.
	Part III can be duplicated if additional space is need	nal space is needed.				
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book, EMV appraisal other)	(e) Method of valuation (book, EMV anneased other)
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Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	plete this part to provi	ide the information r	equired in Part I, line	2, Part III, column (b), and	any other additional

Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds

THE FOUNDATION REVIEWS GRANT REQUEST AND REQUIRES REPORTS FROM GRANTEE

WITHIN A YEAR FROM THE GRANT.

Schedule I (Form 990) (2012)

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### Supplemental Information to Form 990 or 990-EZ

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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

SKY RANCH FOUNDATION, INC

Employer identification number 13-1970360

Form 990, Part I, Line 6

BOARD MEMBERS, WAABI CHAPTER CHAIRPERSONS, VOLUNTEER FUNDRAISERS

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 THE BOARD PRESIDENT AND TREASURER REVIEW THE FORM 990 PRIOR TO FILING

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation AVAILABLE UPON REQUEST